THERAPEUTIC COMMUNITY ACT OF 1978

HEARINGS

BEFORE THE

SUBCOMMITTEE ON PENITENTIARIES AND CORRECTIONS

OF THE

COMMITTEE ON THE JUDICIARY UNITED STATES SENATE

NINETY-FIFTH CONGRESS

SECOND SESSION

ON

S. 3227

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THERAPEUTIC COMMUNITY ACT OF 1978: S. 3227

WEDNESDAY, AUGUST 2, 1978

U.S. SENATE,
SUBCOMMITTEE ON PENITENTIARIES AND CORRECTIONS
OF THE COMMITTEE ON THE JUDICIARY,
Washington, D.C.

The subcommittee met, pursuant to notice, at 9:41 a.m., in room 2228, Dirksen Senate Office Building, Senator Paul Hatfield, chairman of the subcommittee, presiding.

Present: Senators Hatfield and DeConcini.

Staff present: Timothy Hart, chief counsel; Timothy K. McPike, counsel; Edna Panaccione, chief clerk; and Ralph Oman, counsel for Senator Mathias.

OPENING STATEMENT OF HON. PAUL G. HATFIELD, SENATOR FROM THE STATE OF MONTANA, CHAIRMAN OF THE SUBCOMMITTEE

Senator HATFIELD. Good morning.

This morning the Subcommittee on Penitentiaries and Corrections of the Senate Committee on the Judiciary begins hearings on S. 3227, the Therapeutic Community Act of 1978, a bill introduced on June 22 of this year by my good friend and committee colleague, Senator Dennis DeConcini of Arizona.

[The text of S. 3227 will be found on p. 125 of the appendix.]

Essentially, the bill would authorize the establishment of 10 therapeutic communities in facilities administered by the Federal Bureau of Prisons for a trial period through September 1, 1986. These communities, subject to the supervision of the directors of each of the 10 institutions consenting to participate, and under the direction of a mental health professional, would provide continuous therapeutic treatment to volunteer inmates utilizing transactional analyses, gestalt therapy, reality therapy, or other recognized group therapy modalities. Volunteers would be required to abide by certain specified rules to maintain participatory status in each community.

The concept of therapeutic self-help for inmates in the Federal correctional setting is not without history and considerable controversy. The Asklepieion transactional analysis therapeutic community, founded by Dr. Martin Groder at the Federal Correctional Institution at Marion, Ill., at the close of the last decade, has graduated many volunteer residents who have gone on to establish similar programs at other institutions. The subcommittee will hear from some of those participants today.

Two other behavioral projects under Dr. Groder's supervision, Project START—Special Treatment and Rehabilitative Training—and the Center for Correctional Research at Butner, N.C., became the subject of this committee's concern and, ultimately, litigation. As a result of this litigation, which challenged the humaneness and voluntariness of these modalities—most notably the cases of *Sanchez* v. *Ciccone* and *Wolf* v. *McDonnell*—Project START was canceled in February 1974.

A staff report to the Subcommittee on Constitutional Rights of this committee in November 1974, made this observation about the new Butner Center:

> [A] number of important questions concerning the Center remain to be considered. For example, serious questions of voluntariness in a prison setting have been raised in recent court cases * * *. Further, detailed ethical guidelines and a workable, effective review structure have not yet been developed for the Center. Chairman [former Senator Sam] Ervin stated in a recent letter to Dr. Groder that such mechanisms are essential to the constitutional operation of the program.

Similarly, Project START and the Bureau's Control Unit Treatment Program—both established by the Bureau as alternatives to long-term segregation—were criticized heavily by the Comptroller General in a report issued on August 5, 1975. Behavior modification programs at the Marion, El Reno, and Leavenworth institutions were reviewed in the contexts of purpose, policies, programs, selection criteria, and judicial review and found wanting in several aspects. He found, in essence, that:

> The Bureau's effort has not been well-managed. The Bureau did not assess the characteristics of the inmates it had in long-term segregation and, consequently, had not identified the extent to which control unit treatment programs were needed. I also had not assessed the overall operation and results of the programs. The Bureau should (1) determine how long-term segregation is being conducted throughout the Federal prison system, (2) assess the characteristics of the inmates involved, and (3) use this information to determine the adequacy of existing policy guidance, procedures for overseeing institution operations, and the way new or different treatment approaches are evaluated and approved or disapproved for wider use.

Thus, it is against this backdrop of mixed reviews that the subcommittee today begins its work. The issues of informed consent, voluntariness in a prison setting, selection criteria, guidelines, and evaluation are very much alive and of concern.

I should emphasize that the bill as introduced addresses them, in part; whither it does so sufficiently to meet minimum constitutional safeguards is a question which must be asked. Whether the Bureau and its institutions are presently equipped, on the basis of past history and valuable experience, to implement a meaningful program is another. It is my intention to develop as full and fair a record on this legislation as possible, because it is important legislation.

As Senator DeConcini made clear in his introductory remarks in June, the bandwagon mentality which holds that rehabilitation is dead must be avoided during the course of this inquiry. There are those who say that it was never very much alive. Sincere efforts to find answers, guided by the wisdom acquired from painful experience—even failure—are what are needed in this context.

I believe that Senator DeConcini has an opening statement.

Senator DECONCINI. Mr. Chairman, I would like the record to include the Congressional Record dated June 22, 1978, where I introduced the bill, S. 3227, along with the supporting statements.

Senator HATFIELD. Without objection, so ordered.

[The Congressional Record introduction follows:]

[From the Congressional Record, June 22, 1978]

By Mr. DECONCINI: S. 3227. A bill to amend title 18, United States Code, to establish therapeutic communities in Federal correctional institutions, and for other purposes; to the Committee on the Judiciary.

THERAPEUTIC COMMUNITY ACT OF 1978

Mr. DECONCINI. Mr. President, today I am introducing a bill to establish an experimental program of therapeutic communities in Federal prisons. Therapeutic communities consist of a psychological therapist, staff, and community members engaging in ongoing therapeutic processes in live-in setting. In Federal prisons, the residential or live-in setting would be a section of the prison living quarters separated from the general inmate population where the members would engage in therapy in continuous daily session. The therapeutic techniques to be employed are "group" or "encounter" therapy modes.

Group therapy has been practiced in one form or another since the beginning of the 20th century, but the impetus for its major expansion came from the need for clinical services during and immediately after World War II. The sudden influx of psychiatric casualties during World War II, along with a shortage of trained therapists to work with these individuals, led to an increased interest in briefer and more efficient techniques such as group therapy. After the war, human relations training groups (T groups) were formulated at the National Training Laboratory at Bethel, Maine. These later became known as sensitivity training groups. In the 1960's the encounter group movement or human growth and potential movement emerged, stimulated by the founding of human growth centers around the United States such as the Esalen Institute in California.

Group therapies offer several advantages over traditional therapist-patient modes: The therapist sees the patient interacting with others rather than having to rely on the patient's reports of his interaction with others; and the patient receives immediate support and feedback from the therapist and others, facilitating the educational process and the patient's insight.

One form of interactional (group) psychotherapy that is finding increased acceptance in the therapeutic professions is transaction analysis. This form of therapy was created by psychiatrist Eric Berne in the late 1950's. Transactional analysis—T.A.—focuses on the patient gaining understanding rather than emotional release, with the result of his achieving greater awareness of his faulty interaction with others. Transactional analysis is an intellectual form of therapy. Gestalt and encounter techniques are emotive forms.

The application of these techniques in prison settings seem especially appropriate. Efforts to apply group therapy techniques to prisoners were pioneered in Arizona and Illinois by Dr. Martin Groder. Dr. Groder established the first therapeutic community in the Federal prison at Marion Illinois, based on principles learned from his association with Dr. Eric Berne. Prisoners who have been trained in therapeutic techniques were later transferred to the Fort Grant Training Center in Arizona where programs were established. In-custody programs are being operated there by former inmates to provide continuing therapy to released persons. These programs still need study to determine their impact on the lives of prisoners, but early results are encouraging. I ask unanimous consent that articles from the Arizona Daily Star and the Arizona Republic describing several therapeutic communities be inserted in the Record following these remarks.

The PRESIDING OFFICER. Without objection, it is so ordered.

(See exhibit 1.)

Mr. DECONCINI. Mr. President, at a time when rehabilitation is being discredited among penologists, legislators, and laypersons, we must be wary of the bandwagon mentality and carefully examine programs like therapeutic communities that offer techniques and new possibilities for change. The Therapeutic Communities Act establishes communities in 10 Federal detention facilities for a period ending in 1986. The membership will be selected from among

volunteers in the inmate population and will be placed under the supervision of the community director, subject to the warden's responsibility for custody and detention. The community members will engage in continuous therapeutic sessions conducted in a meeting room adjacent to their living quarters.

The bill forbids the use of medical procedures, including drugs, shock treatments, surgical procedures, or other procedures as therapeutic techniques.

The director of the community must be a person qualified in a mental health profession. This position is not limited to psychiatrists or psychologists, but the director must be trained and experienced in group therapeutic methods. It is the director's responsibility to oversee the staff and members in the therapeutic process and to become clinically involved with the members during that process.

Because a goal of therapy is the open and honest acceptance of the members' feelings, the legislation provides that information received from any member shall be confidential except for information pertaining to the future commission of a crime or violation of rules.

The ultimate goal of therapy is self-awareness and change, particularly of those thoughts and emotions that led the member to commit crimes. In the course of the Arizona program, several inmate-members have become excellent therapists themselves. Two such individuals, Monte MacKenzie and Bill Smith, are discussed in the news article. The legislation therefore includes a provision that, to the extent possible, members shall be trained as staff to assist the director in the therapeutic process, and that inmate staff may be transferred, with the approval of the director of the Bureau of Prisons, to assist in establishing other therapeutic communities.

To insure that the community is selected from among inmates who truly desire to change and who are not merely seeking to obtain privileges or early release, the bill provides that membership shall be voluntary and may be voluntarily terminated at any time; membership shall not affect the length of incarceration in any way and all volunteers must be notified of this fact; members shall obey all rules of the detention facilities with modifications allowed only to carry out provisions of the legislation; and members shall be removed from the community for specified violations such as violence.

The bill establishes a Committee on Therapeutic Communities consisting of all directors of the 10 communities and an administrator to oversee the program. The legislation also requires that an independent agency be engaged to evaluate the program. To facilitate evaluation, the bill requires that all Federal agencies allow inspection of their records on any community member if such records are relevant to the therapeutic process evaluation and do not pertain to an ongoing criminal investigation. Finally, the bill empowers the Attorney General to employ directors and staff without regard to civil service requirements and to employ an agency to evaluate the program.

Mr. President, our prisons are little more than warehouses for inmates. The only value they serve is the temporary removal of some dangerous persons from society. Due to the vagaries of the criminal justice system, there is little guarantee that even this minimum function is being performed efficiently. All too often the most dangerous go unapprehended, unprosecuted, unconvicted, are given probation, are given light sentences, or are paroled. Yet persons committing nonviolent crimes may spend years in confinement.

The Congress in the Federal Criminal Code revision has taken significant steps to change this situation and focus the weapon of incarceration on the most harmful offenders. However, even if we only incarcerated our most dangerous offenders, we could not afford enough prisons to protect society from all of them. With these facts, it is apparent to me that we must never abandon the search for effective rehabilitative techniques. I believe much of the current disenchantment with rehabilitation is nothing more than discouragement with the obvious failure of early 20th century penological reforms.

The Federal Government has invested much of its resources in national mental health. At the same time, our prisons are filled with persons who are dysfunctional in society, and who are confined with much idle time. To me, the combination of these facts points to enactment of a program such as I am introducing today. Of course, we must be sensitive to the prisoner abuse that has unfortunately resulted from past rehabilitation programs. By providing complete voluntariness and by prohibiting medical techniques, this bill demonstrates that sensitivity.

Mr. President, the thinking behind these techniques and modes of therapy should appeal to persons on both sides of the rehabilitation issue. The belief in individual responsibility for one's acts, in individual ability to change one's behavior, and in individual dignity permeate the processes that will be employed in the therapeutic communities. I do not know if this legislation will provide a solution to the problem of the career criminal. I do know it has been carefully drafted to avoid the harm to society that has occurred from the parole of dangerous persons and other past rehabilitation programs. Therapeutic communities cannot harm society; they offer the possibility of great benefits. This legislation is the vehicle to test that possibility. I urge my colleagues to support its swift enactment.

I ask unanimous consent, Mr. President, to have the bill printed at this point.

There being no objection, the bill was ordered to be printed in the Record, as follows:

[See p. 125 of the appendix for the text of S. 3227.]

EXHIBIT 1

"A MIRACLE"—HE NOW SPEAKS FROM OTHER SIDE OF PRISON BARS

(By Liz Doup)

"My mere sitting here is a miracle," the man said, speaking in low, calm tones while the tape recorder picked up his words. "It's miraculous."

It was Bill Smith talking, a man once given a life sentence who was speaking now from outside the prison bars.

This week he talked to the Scottsdale Corporate Ministry as part of its series on corrections and rehabilitation, explaining that his miracle began with a prison group.

It was called Asklepieion, born in the toughest of places, a federal penitentiary in Marion, Ill., that was built to replace Alcatraz.

Smith was in that institution, his fifth time in jail, when he came across some literature aimed at people who didn't care for themselves very much, who were dissatisfied with the way they were.

Smith was at that point. He was 43 years old and had spent about 19 years of his life behind bars from offenses that ranged from attempting robbery to kidnapping.

What Smith became involved in was a kind of therapy "where people were asked questions they've never asked themselves." The emphasis was on transactional analysis, a way of undertanding behavior by categorizing it into parent, adult and child groupings.

Smith's turn-about behavior and work within the program was widely noted. Once sentenced to life in prison, former President Ford heard about him and commuted his sentence to 25 years.

Now he has been paroled to direct a therapeutic community, Asklepieion West, at the Fort Grant Training Center in Fort Grant.

Here he works with a group of 77 people, ranging in age from 22 to 55, trying to help them "un-learn" some very destructive ways of acting.

The idea is put out again and again that a person's behavior results from a script that is self-written. And this script can be rewritten if the effort is there.

There is the emphasis, too, that people are beautiful, even though their actions may sometimes be ugly.

"You have to be super dingy not to believe in something. If you don't believe in yourself, who will?" Smith asked.

Those who end up behind bars sometimes are the victims of "third degree character disorders," he said. Because one characteristic of this disorder is a resistance to treatment, his rule is that someone must have to remain in Fort Grant for at least nine months to be in the program. Even then, he said, 18 months to two years is recommended for the program to be effective.

It is voluntary but requirements must be fulfilled. Those participating must be clean of drugs and no violence or gambling of any kind is allowed.

No homosexuality is permitted in the community nor can members violate the confidentiality code.

The group studies transactional analysis and bit by bit takes a look at themselves and why they went amiss.

"Whatever works, we do it," Smith said. And if that means holding someone and kissing his brow, letting someone cry or take a teddy bear to bed with him, then it's done.

Smith is 51 years old and described himself as a model prisoner who had sustained himself behind bars through church activities and Alcoholics Anonymous.

"The trouble was I hadn't programmed myself that way on the outside," he said.

When he was released from Marion, where sentences went from 30 years to a high of 900 years, and sent to Fort Grant, he made the trip as a prisoner—in leg irons and other restraints. It took six weeks on the road, he explained, "stoppin' in every jail, every hole along the way."

"I know for me it was the last time."

[From the Arizona Daily Star, Dec. 28, 1976]

SCREAMS OF ANGER ARE THERAPY AT FORT GRANT

(By Elaine Davis)

FT. GRANT.—Squeezed into cramped rooms dimmed by paper covering the windows, the 65 men at the minimum-security prison here take part in a living drama.

For 36 hours, immersed in a therapeutic marathon, they curse, they cry, they scream. They reach into the hidden thoughts and feelings that make them what they are—prisoners.

"Why do you look so sad?" asked Bill Smith, the leader of the therapy program, as he walked into one of the rooms during a session. Smith, an ex-convict who spent most of his life behind bars, radiates energy and purpose.

Jerry, to whom the question was addressed is surprised. "What do you mean, sad?" he retorts.

"You look sad," Smith persisted, pressing Jerry and the others to concede how sad Jerry looked and acted.

Jerry, looking a little desperate under the gaze of his peers, meekly admitted that he was sad.

"Why?" the group demanded.

"Because," Jerry said, "I killed my teacher when I was 12 years old. I was too young to know what I was doing."

The group members pressed for more but Jerry was evasive.

"Why'd you kill another man after that?" Smith asked.

"I don't know," Jerry said. "It was a bar fight, not with a gun. I choked him. I didn't know he was dead until later."

"What would you do if some dude pressed you again?" a member of the group wanted to know.

"I'd have to pull my pistol," Jerry answered calmly, curling his hand around the bowl of his pipe.

There was an uproar. The group heaped criticism on Jerry, telling him that his attitude would bring him right back to prison and a life sentence.

Smith spent much of his prison time in the "hole" and, at age 43, faced a life sentence. "I was stricken," he said in an interview. "I looked down the tunnel of life and it was pitchblack."

At a prison in Marion, Ill., Smith was helped through transactional analysis.

"It helped me to make sense of things. It took eight years," Smith said.

Smith came to Ft. Grant because the superintendent, Cliff Anderson, wanted to try the transactional analysis program used in Illinois.

Anderson arranged to have Smith transferred to Ft. Grant where he finished his parole-shortened sentence. Now he directs the new therapeutic community at this alternative prison.

Transactional analysis works in cutting down on the number of criminals who return to prison, Smith said.

The transactional analysis model—created by Eric Berne and popularized in such books as "Games People Play" and "What Do You Say After You Say Hello?"—is that a child is given a "script" by his parents.

In the case of convicts, Smith said, it is a "losing script." Many parents of criminals have said, "Get lost, go out in the streets," Smith said.

George, a young man who looks as though he is a college student, wanted to talk, and blurted out: "Why do you guys hate me? Everything I do is wrong."

It wasn't easy figuring out what George was after, so after an hour of indecisive haggling, the group asked to see his contract.

A contract is the document each member of the group fills out that lists the games the inmate plays and what he wants to learn from the group.

"It says here that you want to take charge of your life," one prisoner said, reading George's contract.

"I do," George said, shifting his eyes to those of the other men, looking for reassurance.

George told how he was never allowed to play as a child. He had to help his foster mother clean the house while his alcoholic father watched television.

Encouraged by the group, George called for the mother and father who gave him away. The effort was accompanied by his screams and then he sobbed.

The time had dragged on slowly. It was late. The men were tired. And, big, muscular Eddie wanted to talk.

Eddie sweated under Smith's penetrating questioning. Others started to sweat too, sensing Eddie's gathering tension.

Smith and Eddie talked about murder, violence, and threats of violence. The group was quiet, as though it expected Eddie to explode.

The violence never came though, and the men were relieved. They relaxed. It was over—time for coffee and a cigarette—and the men congratulated each other.

[From the Arizona Republic, Feb. 20, 1977]

EMOTION THERAPY—CONVICTS CONFRONT FEAR OF GIVING LOVE

(By Jack Swanson)

The 12 convicted criminals sat in a circle of chairs, speaking quietly, earnestly. They weren't talking about the jobs they had pulled or the drugs they had used, but about love.

"How can we love somebody else if we don't love ourselves?" asked one young man with black hair and tattoos on his arms.

"My trust level with my brothers here is one I never attained with anybody on the outside. This is my family, not my relatives out there."

"I've spent a lot of time in other programs, said a red-haired man in his early 20s across the circle. "My thing was hyping on the streets. Now I'm done with hurting myself. I was one of the people I knew least in the world."

Another inmate hunched forward in his red plastic chair and addressed a clergyman across the circle. He talked about how it took him 20 years to tell his mother he loved her.

"I was carrying a lot of guilt around inside. I wasn't able to confront my feelings."

As the young inmate told his story, the man sitting next to him put his arm around the speaker's shoulders. Several time during the hour-long sharing session, men stood and hugged each other.

The inmates were sharing newfound feelings with three outsiders at the Maricopa County sheriff's office Durango correction facility. That's the new jail at 32nd Avenue just south of Durango, which has come to be known as the "Durango Hilton."

The 12 men are members of a therapeutic community, a program developed behind prison walls to help criminals who have a "want to" to change their behavior by helping them understand why they broke the law.

The program is as new as the building that houses it. The director of the community is an ex-convict. He works with the executive director of the OK Community who spent 28 years behind bars.

The purpose of the program isn't to make better adjusted prisoners who love each other and don't cause trouble. It's to help them deal with their fear of the outside so they won't need to keep running back behind bars for security.

"Sure. We know how to deal with the streets. We know how to do crime, do dope. How to pop our fingers and be cool," an inmate continues the dialogue. "But we're talking about changes in our behavior. Our thoughts. Feelings! That's scary as hell!

"We already know we're sick, 'cause we're in jail."

Monte McKenzie, 53-year-old founder of the OK Community, picks up on the safety aspects of prison life. Tired, suffering from a bad case of flu, McKenzie "gets into his feelings" and begins to cry. Others in the circle offer verbal and physical support.

"I can't handle it out there. I'm comfortable in a penitentiary. I see myself in all of you guys. I didn't have nobody who gave a damn about me or what I got," McKenzie tells them.

"Jails and prisons are beautiful places. You can just shut off your feelings. You don't have to deal with love."

McKenzie, a former bank robber, learned the tolls of transactional analysis and therapy as an inmate in a federal prison at Marion, Ill. He was sent to Ft. Grant Training Center two years ago to set up a similar program.

That program is still flourishing. After a year of intensive work, McKenzie turned the program over to another inmate and moved to Phoenix to set up the OK Community as an "out-patient" facility to help convicts and others trying to cope with the outside world.

His program is being supported by a grant from the Federal Law Enforcement Assistance Administration, which is administered through the state Justice Planning Agency.

Charles Adrian, who served time in Arizona State Prison and Ft. Grant for assault, is one of McKenzie's graduates. Adrian now runs the community.

He jokes about the difference between the men he has to deal with at Durango and those in prison.

"They're babies compared to Ft. Grant," he chuckles. "By that I mean they're not as hardened. It's easier to put them into treatment. I'm used to working with tougher cases. I find we can do in four or five months what it would take a psychiarist a couple of years to do."

Adrian meets with the community every day. The mornings include lectures on transactional analysis and "sensitivity" sessions.

Then there are the games. Not funtype games but day-long sessions in which men with behavior problems are forced to confront them.

The community has four rules: No alcohol, no drugs, no violence, no homosexuality.

So far, the program has had encouraging results. Four men left the program. Adrian said. "Two because they broke the rules and two because they couldn't handle the love."

Out of 20 persons who have graduated from the program to life outside, Adrian said two have gotten into trouble again.

Lt. Russell Zarkou, the 29-year-old director of the Durango facility, thinks the failure may be somewhat higher than that but feels the program is too new for statistical evaluation.

Zarkou was put in charge of the corrections officers. He has a degree in French and a master's degree in criminal justice and is the first corrections officer in Maricopa County to earn a lieutenant's bars.

Zarkou was put in charge of the controversial Durango facility last summer shortly after it was completed.

The $9 million plant, conceived by former Sheriff Paul Blubaum, received a lot of criticism before it was completed because of what some saw as unnecessary frills. Some called it a country club because of its modern, campus-like decor.

Others called it the Durango Hilton and the name seems to have stuck.

"Funny thing about that name," Zarkou said. "We were looking for the name of the street we're located on so we could put our mailbox. We checked the map and the street that should run through here is Hilton. We decided to put the mailbox on Durango."

Zarkou speaks cautiously about the therapeutic community. He is not one given to excessive optimism. One reason he is cautious may be because he has his hands full with getting the bugs worked out of the new jail.

Because it was designed as a minimum security facility, security has been a problem. Eleven women prisoners broke out recently and Friday 38 women were transferred back to the downtown county jail to prevent more escapes.

Zarkou has had to compensate for the facility's design problems with more guards.

Zarkou has a staff of 33 to handle the Durango jail's 230 inmates. Two of the facility's seven modules are unoccupied.

One of the facility's early programs—coeducation—didn't work out and had to be scrapped, Zarkou said.

"We had a lot of people who were not willing to be responsible for themselves," he said. "We're coed now only because we house two sexes."

He is blunt when asked his feelings about the therapeutic community.

"I believe the program is unproven," he said. "But I think the program has merit. I'm a supporter because I want to see if it works. God knows, nothing else does."

There has been some friction between the staff and leaders of the community. Sheriff Jerry Hill said some OK Community members were disgruntled when the group had to be moved out of a carpeted module to one with concrete floors.

The facility has different decor and floor coverings as rewards for good behavior. Newcomers start out in modules with concrete floors then move to modules with painted floors, ceramic tile floors and, finally, carpeted floors as their attitude improves. Each inmate has a single room.

The move of the community to a module with concrete floors was interpreted by some as a loss of status.

Hill said the move was necessary because of the extra cost of heating and staffing a separate module just for the community. The exclusive treatment also caused some morale problems, Hill said.

"But in general I'd say they're doing all right out there. I believe they're providing some good input," Hill said.

Zarkou said some rules for the community differ from those for other inmates. Community members aren't allowed to have jobs or attend school programs.

On the other hand, they are free to engage in some sports activities among themselves and may have ball-point pens, forbidden to other inmates. Community members also may enter each other's rooms, another no-no for the rest of the population.

"Personally, I have problems making some of these allowances," Zarkou said. "The problem with running any jail is that you must be fair and consistent. This contradicts that."

One of the biggest sore points has been that Adrian and McKenzie received permission to bring in several criminals who ordinarily would not have been allowed at Durango—a convicted sex offender and several with armed robbery records.

The purpose, Adrian said, was to show that transactional analysis works with the toughest guys in the system.

McKenzie believes such concessions are justified.

"The community is intended to provide a safe environment where people can deal with the very real problems of why they can't function in society," he said. "Punishment doesn't work; vocational programs, education programs don't work until a person has a chance to find out why he behaves the way he does.

"For too long a time penology has based its rehabilitation measures on the theory that you can change people's behavior without their consent. We know.

Senator DECONCINI. Mr. Chairman, I would ask permission that Judge Collins, a visitor from Tucson, Ariz., who is very interested in this area for juveniles, might join us here as an observer.

Senator HATFIELD. Welcome, Judge Collins.

OPENING STATEMENT OF HON. DENNIS DeCONCINI, SENATOR FROM THE STATE OF ARIZONA

Senator DECONCINI. Mr. Chairman, I also would like to take this opportunity to thank the Senator from Montana for holding these hearings and his interest in this area.

Earlier hearings before this subcommittee during the 95th Congress have explored the subject of rehabilitation and the success of various techniques in reducing the recidivism rate of criminal offenders. The record of modern penology is dismal. The rate of recidivism is stated to be as high as 75 to 80 percent for the general inmate population in the United States.

During my tenure as the county attorney of Pima County, Ariz., I became familiar with the concept of the therapeutic community. Therapeutic communities are intensive, live-in therapy groups where

inmates use psychological techniques to constantly examine, understand, and change negative emotional and behavioral patterns. The hearings today will clarify the subcommittee's understanding of how these communities operate and what emotional, cognitive, and behavioral changes are effected by the therapy.

Therapeutic communities were first instituted, as the chairman pointed out, at the Marion, Ill., Federal penitentiary by Dr. Martin Groder, an associate of Dr. Eric Berne, the founder of transactional analysis. Inmates trained by Dr. Groder as therapists were then transferred to other penitentiaries to start other communities.

I first became familiar with the concept when Mr. Monte MacKenzie began such a community at the Fort Grant, Ariz., Training Center. Mr. MacKenzie is a former Federal inmate who became an accredited therapist as a result of his work with Dr. Groder. His story, and those of Mr. Bill Smith and Mr. Wayne Michael, is truly remarkable. These men have been, in my opinion, truly rehabilitated.

Mr. MacKenzie and Mr. Smith, who was pardoned by President Ford, have earned their freedom by demonstrating that they made the decision to change their lives. Through the use of the therapeutic techniques we will explore here today, these men learned to understand their negative emotions, perceptions, and behavior. With their desire to change, and the emotional support and intellectual insights provided by the therapeutic communities, they succeeded in changing their experience of the world.

Whether these therapeutic communities can effect such changes in a significant number of criminal offenders has yet to be empirically demonstrated. Research and evaluation is needed. For this to occur, several such communities with a degree of uniformity of therapeutic approach must be established.

These communities, once established, must be guaranteed sufficient time in operation for evaluation to be conducted. Therapeutic communities as they now exist are subject to changes in therapeutic approach, the reduction of budgets and elimination of programs, shifting penological philosophies of new administrations, and other vagaries of government.

For this reason, I believe a demonstration program must be legislatively established with an expiration period sufficiently in the future to permit statistically valid evaluation.

The Federal prison system is fortunate to have been directed by our first witness this morning, Mr. Norm Carlson, for several administrations up to the present. Under Mr. Carlson's direction, innovative programs have received favorable attention and administrative support. The first therapeutic community was established under his direction.

Mr. Carlson has also given the subcommittee tremendous assistance in the preparation for these hearings. Although we differ on the method of implementing the therapeutic community concept, we agree on the need to explore it.

I want to thank Mr. Carlson and his staff for his assistance and cooperation and for his excellent record as director of the Bureau of Prisons.

Also appearing today are several persons associated with the therapeutic communities in Arizona and Wisconsin. Mr. Anderson and Mr.

Moran are well known in Arizona for their enlightened and excellent administration of the Arizona corrections system. It is a pleasure to have these gentlemen testify today.

Another area we will explore today and tomorrow is the role that short-term, intensive trainings may come to play in prison rehabilitation. Such trainings utilize techniques similar to those used in therapeutic communities along with other nontherapeutic techniques. These trainings emphasize a person's conscious awareness of often unconscious beliefs, attitudes, and behaviors that shape a person's perception and experience in the world. They provide a short-term and intensive opportunity for the participant to experience reality from a position of total responsibility for his or her actions, thoughts, and experience. These trainings, although they do not claim to be therapy, may have an integral role in therapeutic communities.

Finally, Mr. Chairman, I hope these hearings will serve to educate the subcommittee on areas where this legislation may be improved to be more effective.

I would like to welcome the witnesses and thank the chairman once again for his concern and interest in this area.

Senator HATFIELD. Thank you, Senator, very much.

We will move right on to the first witness, who is Norman A. Carlson, Director of the Federal Bureau of Prisons, U.S. Department of Justice.

Welcome, Mr. Carlson.

I assume that you have a prepared statement. That will be submitted for the record. You may proceed in any way you choose.

TESTIMONY OF NORMAN A. CARLSON, DIRECTOR, FEDERAL BUREAU OF PRISONS, U.S. DEPARTMENT OF JUSTICE; ACCOMPANIED BY ROBERT B. LEVINSON, DEPUTY ASSISTANT DIRECTOR, INMATE SERVICES, FEDERAL BUREAU OF PRISONS, AND ROBERT POWITZKY, CHIEF PSYCHOLOGIST, FEDERAL BUREAU OF PRISONS

Mr. CARLSON. Thank you very much, Mr. Chairman and Senator DeConcini. I appreciate the invitation to be here this morning to participate with the committee in discussion of a very important subject, the therapeutic community approach in the field of corrections.

I am accompanied today by two of my colleagues. On my left and your right is Dr. Robert Levinson, who is the administrator of inmate programs for the Federal prison system. On my right is Dr. Robert Powitzky, who is our chief psychologist at the Federal Bureau of Prisons. Both men have considerable knowledge of the operation of the therapeutic communities that exist today in the Federal prison system.

As you indicated, Mr. Chairman, I have a prepared statement which I have submitted. If I may, I would like to summarize briefly at this point.

[Mr. Carlson's prepared statement follows his testimony.]

At the outset let me say that I certainly appreciate the interest and support of this committee in looking at the programs that we provide in the Federal prison system. I certainly agree with you and Senator

DeConcini about the role of therapeutic communities in the field of corrections. To me they represent an excellent example of what we talk about in terms of voluntary programs for offenders who are committed to custody by the courts.

As you know, recently there has been a reexamination of the purposes of incarceration—why people are sent to prison to begin with. Historically there have been four principal reasons espoused by the courts and by people involved in the criminal justice process. Those reasons are retribution, deterrence, incapacitation, and more recently, rehabilitation.

During the past 4 or 5 years there has been a growing realization on the part of most of us involved in the criminal justice system that we simply cannot change offenders; all we can do is facilitate that change. We have discarded—and appropriately so—the former medical model that implied that we had the ability to diagnose and treat criminal behavior. I, for one, do not believe we can do that. I do, however, feel that we can provide opportunities—and must provide opportunities—for those offenders who are motivated and have a sincere desire to change their behavior.

As we have shifted away from the medical model in the field of corrections and throughout the criminal justice system, it is more incumbent upon us than ever to develop programs which are attractive and which do assist offenders, such as the therapeutic community.

As Senator DeConcini indicated, the history of the therapeutic community in the Federal prison system goes back to the late 1960's. Actually the first such community was established at Danbury, Conn., after the Narcotic Addict Rehabilitation Act was passed in 1966. The following year a similar but much larger program, another type of therapeutic program, was instituted at our maximum security penitentiary at Marion, Ill. That program, of course, had the name Asklepieion.

Over the years these types of programs have expanded until today we have 15 separate therapeutic communities currently in existence—serving over 2,000 offenders in the Federal prison system.

As a personal aside, last week I visited the U.S. penitentiary at McNeil Island, Wash., which happens to be the oldest prison in the Federal system. It was built back in 1865. I was there as a member of the Advisory Corrections Council which is constituted by statute and includes people from the Federal system as well as three judges appointed by the Chief Justice of the United States.

During our tour of the institution we spent some time in the therapeutic community at McNeil Island. We had a chance to talk with the inmates who were involved in the process. We got a good description from them of what actually transpires.

There was no question that that was the highlight of the trip, in terms of enthusiasm of response by the inmate population, for any of the various programs provided at that institution.

It points out that if we can take a program into an institution as antiquated and overcrowded as McNeil Island and have that type of response by inmates in the program, it must have value.

However, despite the positive support we have for therapeutic community programs, I should point out some of the problems that we find

existing in the Federal system as well as in virtually every State and local correctional system in the country.

First and foremost is the very critical problem of overcrowding. Today our Federal institutions have in confinement over 28,500 offenders. Of course, our space is only sufficient to provide single-cell or single-bed occupancy for some 22,000. We are 6,000 over capacity.

That results in double bunking. It means crowding more inmates into small units than we ever would hope to do. Unfortunately, that is the reality of the situation today. The States as well as the Federal systems are critically overcrowded.

Compounding the problem, of course, is that overcrowding results in the dilution of staff and resources. We simply do not have the staff and the resources that we would like to have to provide necessary program support and direction to the offenders being committed by the courts.

Secondarily, there is another problem which we experience. I think I share this problem with many of my colleagues in the State correctional system. That is the difficulty of recruiting and retaining professional staff to run these programs. It is very difficult for us to find and train competent, dedicated psychologists, psychiatrists, and others who are willing to work in a correctional environment. It is a problem we have had over the years. We have made progress in the past several years but we continue to have difficulty recruiting professional staff to work in institutions.

Despite these problems, without question therapeutic communities are a helpful program. Preliminary research results to which Senator DeConcini alluded certainly are encouraging. In addition, we can demonstrate without question that offenders who are involved in therapeutic communities have far less problems adjusting within the institution: far fewer disciplinary reports, far fewer incidents of assaultive and aggressive behavior than their counterparts who are not involved in such programs.

If for no other reason we want to continue the programs, to reduce the corrosive effects of imprisonment by providing programs such as therapeutic communities.

By the same token, however, I have to say that therapeutic communities are not a panacea. They are not for all offenders. It takes a certain type of motivation, a certain type of stick-to-it-ness that not all offenders possess. However, it does attract the type of offender who sincerely wants to change his behavior, who has a desire to do so. Again, I think it is incumbent on us to provide additional programs such as the therapeutic community in all of our institutions.

Despite the supportive comments I have made about the therapeutic community, I do have to say that I have some reservations about the bill which is before the committee.

First of all, the authorizaion which we presently have for the Federal prison system as contained in title 18, United States Code, section 4042, does give us the authority to provide therapeutic community programs in our institutions.

Also, I have to say that I have reservations about creating a new administrative structure. I am afraid that that may result in fragmentation and competition for resources which I believe may have nega-

tive consequences in terms of the overall operation of the Federal prison system.

In conclusion, Mr. Chairman, I want to assure both you and Senator DeConcini that, regardless of the outcome of this bill, we certainly plan to continue our support for the therapeutic community programs. As our population begins to stabilize, as new institutions are opened, as additional resources are provided for the Federal prison system by the Congress, we certainly plan to continue those therapeutic communities presently in existence and in the future to expand the number of such communities so that all inmates who have a sincere desire to participate in the programs will have that opportunity.

That concludes my very brief summary, Mr. Chairman. I would be very happy to answer any questions you or Senator DeConcini may have.

Senator HATFIELD. Senator DeConcini?

Senator DECONCINI. Mr. Carlson, you make some reference to the bill. I appreciate that because I authored the bill but claim no great expertise in the area.

The statutory authority you have mentioned grants broad authority to discipline and instruct prisoners. The bill creates a specific program that we hope to insulate from changing administrations.

Is the bill something that the Bureau could accept, that would be compatible with your philosophy on administration? Do you have any specific suggestions or would you like to submit some to us?

Mr. CARLSON. Yes, I would, Senator DeConcini.

I do have reservations about the administrative structure that is proposed which would tend to insulate therapeutic community staff and programs from the Bureau's overall administration. From my experience in the Federal system and also in some of the State systems, where outside programs are superimposed on the institutional structure, you find competition and fragmentation which in the long run serve to frustrate the purposes of the program itself. I would far rather continue to provide centralized direction so that the therapeutic communities are seen by the staff or the inmates not as something separate and apart but as a totality of the institution itself.

Senator DECONCINI. How do we protect from the change of administration and also be certain that enough emphasis is continuously placed on the therapeutic community, assuming that Congress elected to go that way?

That was the reason it was drawn this way. I wonder if you have any suggestions on how to achieve that.

Mr. CARLSON. Senator DeConcini, I certainly understand the views of this subcommittee, which is responsible for the authorization of the Bureau of Prisons. However, during my tenure as Director, I think we have been responsive to this committee.

Senator DECONCINI. Indeed, you have.

Mr. CARLSON. We have tried to carry out your mandate or your requirements. I certainly plan to continue to do so in the future.

Your point, of course, is well taken that should there be a chance of administration, there is no way that I or anyone else could insure that these same programs would continue.

However, as far as I am concerned, the Bureau has been a career agency. It has had four Directors in its 48-year history.

As far as my tenure as Director, I plan to continue my personal support of therapeutic communities.

Senator DECONCINI. I know your commitment to it. My concern is that for some reason you should change or the administration you have gets bogged down with other things. I had hoped to create something that might continue without the absolute direction that you have had to give to this, being involved in almost the day-to-day operation although you have some people who help you. This was to attempt to make it function a little bit less administratively tied to you but yet still under the control. That is my worry about it.

From the experience in my State and other States, I know the leadership at the top really makes the difference. However, sometimes the top gets fragmented and it filters down. That was what I was trying to get at.

Do you have any suggestions?

Mr. CARLSON. I have no serious reservations about the bill. I expressed some concern. I, of course, cannot speak for the administration; I can just speak personally as Director of the Bureau of Prisons.

Very candidly, the support this committee has demonstrated toward therapeutic communities is a clear direction to me as to how this committee plans to proceed or how you want us to proceed in the Federal prison system.

We certainly will take that into consideration as we formulate our budget. After all, that is what it is going to take—additional resources to provide these programs. During the authorization process, if you so choose, the committee members can point out that this is the direction in which you feel we should move.

Senator DECONCINI. In the 15 programs you now have, is lack of resources the No. 1 problem?

Mr. CARLSON. Overcrowding is the No. 1 problem, Senator DeConcini. We have crammed people into such a small living space that the programs do not operate as effectively as they should. If we had more space, more facilities for offices as well as for inmate living, we could do a far better job, without question.

Senator DECONCINI. If the space were provided, would it be your intent to beef up or expand those programs or to continue the input or assistance to the programs?

Mr. CARLSON. Very definitely. I can speak for our wardens as well. They realize the value of the program. As a matter of fact, many of them want to start programs but simply do not have the space in which to do it.

Senator DECONCINI. You mentioned that the Bureau has programs that experiment with techniques beyond what is included in this bill. Should the bill be expanded to include other techniques?

Mr. CARLSON. I do believe so. I do appreciate the part of the bill which restricts the use of any experimental drugs or any type of psychosurgery, for example, which merely puts into legislative fiat what we are already doing in our own policies.

Senator DECONCINI. Would any of the programs you have now in the Federal system be available to this committee, the whole committee, or some of the staff people to observe or participate in?

Mr. CARLSON. Absolutely. I would certainly encourage you to do so.

As you have already indicated, we have had a number of our

"graduates" and undergraduates who have been transferred to State institutions to begin similar programs. We have tried to share these programs with any State that has requested our assistance. We obviously have not tried to force the program on the States but, when they have come to us and asked for assistance, we certainly have provided it.

Senator DECONCINI. You could make the logistical arrangements with somebody to go see one of the Federal programs?

Mr. CARLSON. We would be happy to do that, sir. Absolutely.

Senator DECONCINI. I appreciate that very much.

Can you for the record—I did not see if it was in your statement—give us the list of where the present programs are and a little background on them if it is not administratively too burdensome. We would like to have it for the record.

Mr. CARLSON. We certainly will provide a description of each program and the number of inmates involved.

Senator DECONCINI. Thank you again, Mr. Carlson, for your outstanding leadership and professionalism. Our relationship goes way back from long before I was in the Senate in the courtesy your office showed, you and your assistant, to the concerns of Federal inmates in county jails. I know that is a long road from your primary responsibility, but it certainly demonstrates your professionalism.

Mr. Chairman, I have no further questions.

Senator HATFIELD. I want to thank you also.

With reference to the statement made by Senator Ervin, during the operation of these programs are there specific guidelines as to volunteering and the medications and things that might be used? That has been worked out? Is there a control of some kind for review of these programs?

Mr. CARLSON. Yes, there is, Senator Hatfield. I will be glad to provide the committee with copies of our policy statement on both the voluntary nature of our programs as well as the total control of any medication which is used, and the fact that we do not permit any experimentation in terms of drug therapy or any type of mind-altering drugs.

[See p. 133 of the appendix for information supplied by Mr. Carlson.]

PREPARED STATEMENT OF NORMAN A. CARLSON

Mr. Chairman and members of the Committee, I welcome the opportunity to appear before you today to present the views of the Federal Prison System on S. 3227, the "Therapeutic Community Act of 1978".

Let me begin by saying that I appreciate the committee's support and interest in voluntary, self-improvement programs that are critically needed in correctional institutions. As you know, the philosophy of corrections is an evolving one. In the past, correctional programs were based on the assumption that we could diagnosis the causes of crime, prescribe treatment, and recognize the time when a "cure" had been accomplished. More recently this "medical model" approach to correctional programming has been questioned by an increasing number of scholars in the criminal justice field. The idea that rehabilitation can be coerced has been discarded by virtually everyone who has intensely examined the issue.

Over the years, the Federal Prison System has developed a number of programs, including those based on the therapeutic community concept. These programs have attempted to facilitate change in inmates who are motivated to

change. It is this motivation, personal will, and desire for self-improvement that have been necessary elements in successful programs. Self-help is something we can try to influence, but it is not something we can control. We attempt to provide institutional environments that are safe and humane; and which facilitate self-growth while fostering in inmates a sense of dignity, responsibility, and feelings of self-worth.

The history of therapeutic communities in federal institutions dates back to the passage of the Narcotic Addict Rehabilitation Act of 1966. This resulted in the establishment of the first therapeutic community for narcotic addicts at the Federal Correctional Institution in Danbury, Connecticut. This program was based on a model of self-help therapeutic communities developed by Daytop, Inc., which is similar to that of Synanon in California and Phoenix House in New York City.

In 1968-1969, the Asklepieion Community was instituted at the U.S. Penitentiary, Marion, Illinois. That program also utilized procedures developed at Synanon and Phoenix House but added that training of inmates in the theories and practice of Transactional Analysis. Inmates who developed expertise in this Asklepieion mode, were transferred to other institutions to develop similar thereapeutic communities. Currently, some ten institutions have Asklepieion or similar therapeutic communities in operation.

We certainly want to encourage innovative programs of this nature. Programs of this type involve inmates living together as well as interacting together. In addition to regular correctional workers, psychologists and other mental health professionals—both staff and consultants—are involved in program development and implementation. Other self-help approaches utilize Reality Therapy, Human Resource Training, Yoga, Eclecticism and Positive Reinforcement.

Overall, therapeutic community programs currently exist in 18 different Bureau of Prisons institutions and serve approximately 2700 inmates. All involve elements of psychotherapy, confrontation and peer support.

While the concept of therapeutic communities is viewed as a constructive correctional approach, it has proven a difficult concept to implement in a prison setting for several reasons.

First is the critical problem of overcrowding. For example, units designated as therapeutic communities and designed to house approximately 50 inmates currently treat 100–125 inmates—reflecting the same degree of overcrowding found in other housing units. This has led to a diluting of staff and budgetary resources, and to the inclusion of unmotivated and sometimes antagonistic inmates. Overcrowding has forced us to place higher priority on staff for other needs, such as security and control. Lastly, it continues to be difficult to find, train and retain professional staff who can successfully relate to inmates in an institutional setting.

In spite of these problems, however, early program evaluation results support the therapeutic community concept. They indicate that recidivism rates are helped by these type programs. These are tentative results. We recognized the need for rigorous research in this area and are in the process of accumulating more follow-up data.

Most significant to date, is that inmates in these programs have a lower rate of disciplinary infractions compared to the rest of the inmate population. Thus, the real success of therapeutic communities may lie in their ability to reduce the corrosive effects of imprisonment.

Except for the problems mentioned above, our therapeutic communities essentially meet the guidelines set forth in S. 3227. We are concerned however with several sections of the Act which require these communities to be administered by a newly created structure—separate from the Bureau of Prisons. During my 22 years of correctional experience, I have observed that programs ae often doomed if they are seen as not being an integral part of the agency.

Although we appreciate the intent of the proposed "Therapeutic Community Act of 1978", we must point out that the necessary authority to implement such programs already exists (Title 18, Section 4042). For that reason, we do not believe the proposed legislation is necessary. As the Federal inmate population begins to stabilize, and as resources become available, I want to assure you that the Federal Bureau of Prisons is committed to expanding voluntary therapeutic communities throughout the Federal Prison System.

This concludes my prepared remarks. I would be happy to answer any questions you may have.

Senator HATFIELD. Thank you very, very much. We appreciate it.

Mr. CARLSON. Thank you very much, sir.

Senator HATFIELD. The next witness is Mr. John Moran, director, Department of Rehabilitative Services, State of Rhode Island, and former director, Department of Corrections, State of Arizona.

Welcome, Mr. Moran.

TESTIMONY OF JOHN MORAN, DIRECTOR, DEPARTMENT OF REHABILITATIVE SERVICES, STATE OF RHODE ISLAND, AND FORMER DIRECTOR, DEPARTMENT OF CORRECTIONS, STATE OF ARIZONA

Mr. MORAN. Thank you, Mr. Chairman and Senator DeConcini.

As the chairman has said, my name is John Moran. I have been director of the State Department of Corrections, State of Rhode Island, since February of the current year. For the previous 5 years I was in that same capacity in the State of Arizona.

I come here this morning at the invitation of the committee. I am very honored and pleased to be here. Probably this is one of the more important days in my total correctional career, which in fact extends over a 20-year period in several jurisdictions on many levels.

At the same time, Mr. Chairman, I am not here today to in any way suggest that the Bureau of Prisons should entertain this kind of a program. That is a decision for this committee and the Federal officials here in Washington. I am here today to speak from my own experience as relates to the therapeutic community in the State of Arizona.

I would agree with part of what Mr. Carlson said earlier. It is a rather popular belief these days to say that rehabilitation has failed. Certainly we would all agree that the recidivism rate is totally unacceptable to us as professionals, and is certainly unacceptable to the public. It is very clear that our citizens want something done about crime and want something done about criminals.

However, before we say that rehabilitation is dead, let's really try it. I say that because over many, many years I and lots of good, professional staff people from every conceivable discipline—whether it be education, vocational training, psychology, psychiatry, or whatever—have truly worked very hard, but the fact of the matter is that it has not worked.

As we consider this therapeutic community approach, we have an opportunity here to try something different. I have seen it work in the State of Arizona. I think it has some unique qualities that even the best of professionals cannot bring to the system. I want to very briefly tell you why.

People such as myself spend a lifetime, to a degree, going through the motions. We attempt to run sanitary, safe, decent, institutions. We attempt to bring about programs which, as Mr. Carlson indicated, offer opportunities for those who are interested in terms of their personal development. However, we but scratch the surface.

One of the big problems, as I see it, based on my experience, is the fact that we very rarely ever determine what the individual's problem is, and then try to do something about it. We go through the motions. We get them a GED diploma or maybe even college credits.

They learn how to be welders and so on, but rarely do we ever really get down to the gut issues and find out exactly what the problem is, and try to help them get it straightened out.

I think the therapeutic community approach with the right kind of people, the right kind of administration, and the proper supervision within the prison system, can do that. There are a couple of unique features with respect to the program that I think contribute to that potential.

First of all, it is voluntary.

Second, whatever occurs during the therapeutic community process is confidential. The truth of the matter is that the convict is not going to lay his cards on the table with us. He knows it goes on paper. He knows the warden knows about it. He knows the director knows about it. He knows the parole board knows about it. They are not going to get into their feelings. They are not going to lay it out. They do not trust us. I might suggest that to a degree they have good reason not to trust us.

Within the therapeutic community it is confidential. They cannot kid one another. They have to lay their cards on the table. They can get to their real feelings. They can get to know themselves better. They can develop a better self-image. They can get at the gut issue.

They can develop—and I have seen this happen—more respect for one another and true, normal human feelings about themselves and about others. They can increase and develop their respect for authority. They can develop a personal code of ethics, which I think will allow them to lead a decent, normal life in the community.

Mr. Chairman, I would simply say that I think that this kind of a program is worth continued attention. It is worth continued support and continued development. I have seen it work. I have seen some of the most difficult people in the Arizona system take part in this program and almost a miraculous change occurred.

Mr. Carlson said that these communities, if nothing else, contribute to the security and safety of an institution. The degree of violence and violation of the rules in these communities is almost nil.

Mr. Chairman, this is not brand new, as you have heard. It is not a panacea. It is not necessarily for everyone, but I feel that it is worth continued support and development in any correctional system in the country.

Thank you.

Senator HATFIELD. Senator DeConcini?

Senator DECONCINI. Mr. Moran, for the record I want to indicate what an outstanding, sterling job you did at the corrections division in Arizona. Rhode Island's gain is certainly Arizona's loss in my opinion.

Mr. MORAN. Thank you.

Senator DECONCINI. I mean that sincerely.

I had the pleasure of visiting the community through your assistance at Fort Grant. Also, I am aware of the fine leadership you provided the State of Arizona in the corrections area.

Mr. MORAN. Thank you very much.

Senator DECONCINI. Have you visited any of the existing Federal therapeutic communities?

Mr. MORAN. No, sir, I have not.

Senator DeConcini. Do you have any in the State of Rhode Island?

Mr. Moran. No, sir, we do not.

Senator DeConcini. Are you anticipating any or would you rather not say?

Mr. Moran. I have been there but 5 months.

Senator DeConcini. Is there a feeling in the community or legislature there toward any of this type of involvement?

Mr. Moran. No, sir. I doubt that they have ever heard of it.

Senator DeConcini. You mention that these communities have confidentiality. Do you find any disagreement with Mr. Carlson's indication that they should be closely tied to the establishment? How do you distinguish this confidentiality without having it closely tied to the establishment?

Mr. Moran. You can have confidentiality within the group and it is only known to particular individuals who are, in fact, members of the group, period.

On the other hand, any kind of program, particularly an inmate organized, self-help kind of program, needs very close supervision by the administration. It is not something which can just roll along on its own. It has to be done within the context and the resasonable and necessary rules and regulations of the prison.

The administration necessarily must keep it, frankly, under very close control. I am not talking about exactly what occurs within the community itself as part of the treatment program but where it is located and so on.

Senator DeConcini. You are talking about logistical support, the discipline, and that sort of thing, but not the actual operation of the inner part of the community?

Mr. Moran. I would not want to sound as though it is an either/or proposition, Senator.

As I indicated earlier, this is a program for some people, not all people. The other traditional treatment programs—whatever it might be, such as group therapy—are appropriate for others and they ought to continue as well.

Senator DeConcini. Based on your experience in Arizona working with these communities and being innovative in starting them, do you believe there is a need for legislation on the Federal level?

Mr. Moran. I am not familiar with what the existing Federal legislation is, and to what degree it would already, if given the proper resources, allow the development of a therapeutic community. I am not competent to say, Senator, whether additional legislation is needed or not.

Senator DeConcini. Do you have a feeling that it is worthwhile creating a pilot project that is adequately funded from all points of view so that hard data could really be achieved?

Mr. Moran. Yes, sir, I do, but under the administration of the director of the Bureau.

Senator DeConcini. Yes, sir, that is what I mean.

When you created the program in Arizona, did you have any specific legislation? Was that totally within your discretion?

Mr. Moran. No, sir. We did it ourselves within the broad statutory mandates that were available at the time. It was a fairly simple thing. We had legislation on the books that allowed us to receive on transfer

a Federal prisoner. They initiated the program as inmates and then later became staff people. We did not require additional legislation.

Senator DECONCINI. It was primarily due to an administrative decision or a policy decision by yourself, plus the dedication of you and the staff to proceed with it and gave it every effort.

Mr. MORAN. Yes, sir. It was supported from the top and very actively administered on a local institutional level by the superintendent.

Senator DECONCINI. If you care to comment, what would your reaction have been in Arizona if the legislature had passed something encouraging you, or authorizing you, to do this? Do you think that would have changed the speed with which you would have implemented the program in Arizona at all?

Mr. MORAN. Yes, sir, I think it would have sped it up. More importantly, it then would have clearly indicated the attitude of the legislature and where they were coming from, so to speak, what they expected us to do, and where the emphasis ought to be. I would have seen that as a very, very positive, progressive vote of confidnce.

Senator DECONCINI. When you instituted the program in Arizona, did you have great trepidation, do you recall, about taking this new approach?

Mr. MORAN. Yes; I did. I had seen similar developments before that were not successful and, frankly, were manipulated by inmates for their own individual, personal advantage.

As I said earlier, within reason, commonsense, and reasonable budget restrictions, I am willing to try anything. This is worth a try.

Senator DECONCINI. Thank you very much.

Mr. MORAN. Thank you very much, Senator.

Senator HATFIELD. The program that you instituted in Arizona, did it stop at the time of the release of the inmates or did it extend beyond? Did you have an early release where this program could be carried on in a halfway setting?

Mr. MORAN. Mr. Chairman, that is a critical point. Whatever you do in an institution only goes so far. From my point of view, the most important part of any program is its carryover value to the individual in return to the community.

I might just digress for a moment. I am not supporting this kind of approach because I am soft on criminals. I am supporting it, hopefully, so that people go out in better shape, as I indicated before, than when they came in.

The critical time is when they return to the community. As a matter of fact, that was recognized by the leaders of the group at the time. Our initial leader at that time then went out with local community support to develop a followthrough community program so that when the men were released from the institution they could continue in the real world. That is the crux of the issue right there.

It is insufficient to do it only within the context of a prison. It has to be carried through in the community on a continuing basis.

Senator HATFIELD. Are you telling me this program did contain an after-release, halfway decompression in the community?

Mr. MORAN. Yes, it was funded with avariety of public moneys, some of it from LEAA and other local sources of funding in the State. It was not a State-funded operation as such. Yes, it was established.

Senator HATFIELD. Would you think that this legislation we are looking at here should include that sort of continued support after release?

Mr. MORAN. That would be an outstanding addition to the program and is ultimately necessary if it is to have any true lasting effect on the individual.

Senator HATFIELD. Thank you very, very much.

Mr. MORAN. Thank you very much, Mr. Chairman and Senator DeConcini.

Senator HATFIELD. Our next witness is Mr. Cliff Anderson, Director, Fort Grant Training Center, Fort Grant, Ariz.

TESTIMONY OF CLIFF ANDERSON, DIRECTOR, FORT GRANT TRAINING CENTER, FORT GRANT, ARIZ.

Mr. ANDERSON. Mr. Chairman and Mr. DeConcini, it is both an honor and a privilege to be invited here to speak before you this morning.

I was asked to come before the committee to give a warden's view of what a program of this nature means to an institution, some of the ramifications that are necessary to implement such a program, some of the trust factors that are necessary, and hopefully to answer any questions that might be outstanding in your mind concerning the operation of such a program.

I have prepared a written statement that I have submitted for the record.

Senator HATFIELD. Without objection, that will be made part of the record.

[Mr. Anderson's prepared statement follows his testimony.]

Mr. ANDERSON. In early 1974 I was privileged to attend one of the workshops at the Marion institution to take part in a week-long program in the Asklepieion community. During this time I had an opportunity to watch the men in this unit work. I had the opportunity to see three or four of the men who had been in there 2 to 3 years perform what I felt was a miraculous change in attitude and behavior in probably the most hardcore group in the Federal system.

As a result of what I had seen and the experience in this program, Mr. Moran and I decided we would try an experimental program at Fort Grant. Fort Grant is a minimum custody male institution. The setting is totally different from the maximum security at Marion.

The lack of some of the problems that were experienced at the maximum security such as housing, movement of population, and restrictions, we felt would greatly enhance the program at the minimum security level. We also felt that the program could be adapted to any custody level.

We started with Monte MacKenzie, a former inmate in that program. Monte started the program with 13 inmates and increased this number to 35 within a month's time. He stayed with us for approximately 6 months to get the program operational. He then left our unit and moved on to Phoenix to develop what is currently the OK Community.

At that time Mr. Carlson agreed to send another inmate, Bill Smith, from the Marion program to Fort Grant on a transfer basis. We were able to use his service for approximately a year before he was eligible for, and made parole. Following his parole, Bill was

added to our staff in a paid capacity. He is currently on parole and working as a member of our regular staff.

We have had approximately 189 men go through the program in this 3-year period. Of those, we know of only eight men who have returned to the prison. Of all the inmates whom we have contacted or have seen in the program, we have had only one man to date, including the Marion program or any other therapeutic community setting, who has ever attempted to escape or escaped from an institution. I think that is a remarkable thing.

We have 650 inmates in our minimum custody setting. About 65 of these are currently in the therapeutic program.

The disciplinary process within the institution for the general population consumes approximately half of each working day. From the therapeutic community group we were able to reduce that contact by almost 75 percent and has proved to be a major factor in control.

Participation in programs following or during the therapeutic process, such as vocational training, education, and continuing education, was increased by 50 percent on a voluntary basis.

The primary component on each one of these units is confidentiality, which was alluded to a little earlier. This does not hamper the operation of any institution. It does not present any problem—or has not presented any problem—administratively for me or my staff.

There are a couple of exceptions on confidentiality. If there is a forthcoming violation of a major rule, law, or an act which would bring harm to another person within the institution, these are excluded. That information is supposed to come forth anyway.

Other than that, the community is designed to address and not to gloss over. The communities are actually double penalty in many cases over the ordinary disciplinary process or dealt with in a different manner, in addition to the regular penalty. This has removed some of the problems that we were facing and given us another tool for administrative control.

This concludes my presentation and now I will be glad to answer any questions.

Senator HATFIELD. Senator DeConcini?

Senator DECONCINI. Warden Anderson, thank you for your testimony.

The 600 men who are in there are felons and——

Mr. ANDERSON. Yes, sir, these are a cross section of the prison population who were initially committed to the maximum security unit at Florence.

Senator DECONCINI. They are not what you would call low risk or anything like that?

Mr. ANDERSON. No. We have a cross section——

Senator DECONCINI. Of all different kinds of inmates who are there? Is that right?

Mr. ANDERSON. Yes.

Senator DECONCINI. Do you have any cost information about what it costs per inmate to hold them in your institution versus the maximum security and then breaking that down into the therapeutic community?

Mr. ANDERSON. The cost of incarceration for each inmate at maximum security is roughly between $8,000 and $9,000 per year. We can

hold a man for approximately $6,000 to $7,000 per man per year in the institution and still provide vocational training, education, and the therapeutic process.

Costwise for staffing, there is one staff member who operates the therapeutic community. That is Bill Smith whom we transferred in. This is the only staff member assigned. Costwise you are dividing that by 65.

If we are able to keep two inmates out a year, we pay the cost of the operation of the program.

Senator DeConcini. Is this just funded out of your normal appropriation?

Mr. Anderson. The normal State appropiration, our normal operating budget.

Senator DeConcini. Since Mr. Moran left, has there been any lessening in enthusiasm about the program?

Mr. Anderson. No. It is at the same level.

Senator DeConcini. It is still going well?

Mr. Anderson. Yes.

Senator DeConcini. How does one get into the program?

Mr. Anderson. Entry into the program is strictly voluntary and the exit is also voluntary. The inmate has to have the option of coming in or, when he feels the need, he also has to have the option to be able to say, "I don't think this fits me and I want to go out." We have many cases who exit the program, remain out for a month, and then decide they want to go back in. We have to make allowances for that entry-exit porcess in order to get the man sufficiently motivated.

There are many reasons why the man would want to go in. It might be pointed out that there are no provisions nor concessions made that this program in any way will affect the length of sentence or be given any weight by the parole board for parole release. It is strictly for their own benefit.

Senator DeConcini. Is there a process of getting in? Do they make application? Do they just come over and tell you they want to get in and then they are transferred? How does it work?

Mr. Anderson. Administratively this may sound a little strange but I have very little to do with the process of getting in. The inmate indicates an interest that he would like to go in. They must attend a pre-orientation series of classes to enter the program.

Senator DeConcini. How long is that?

Mr. Anderson. That is usually about a week long.

His counselor or caseworker will represent his desires to the classification committee and have him classified from job assignment into the program.

Senator Hatfield. This is a job assignment?

Mr. Anderson. It is a job assignment. It is a 24-hour living situation.

He may or may not have other duties assigned to him while in the program. Approximately 50 percent of the inmates devote 24 hours a day to the program. The other 50 percent, usually those who have been in for 6 or 8 months, are able to master some of the information and take a little less study, and are able to move into some vocational classes and some work assignments within the institution for a period of 4 or 5 hours a day.

Senator Hatfield. This program is an alternative, for instance, to kitchen duty?

Mr. ANDERSON. Yes. It is an alternative to education; it is an alternative to a general work assignment, and anything else.

Senator HATFIELD. Is each inmate as he comes into the institution given the opportunity to know about this program? Are they recruited? How is that done?

Mr. ANDERSON. We have a regular orientation process for each group of inmates who come in from the maximum security prison. We present an overview of each of the programs. Hopefully, what we try to do is motivate them to go into something in which they are interested. We think we can get the most out of them if they will take an area of their own personal interest.

We try to explain what is available to them. Then they have a chance to check this out on the compound—to check to see what the rating is.

One of the biggest problems of the program is that as a man starts to do things for himself or as he assumes more and more responsibility, he also picks up labels from the other inmates. There is very heavy peer pressure not to enter programs that have direct impact on his performance within the institution. He becomes a snitch. He becomes an administration man.

Senator HATFIELD. I spent years on the Sentence Review Division of our Supreme Court. I have more time in prison than most burglars, I think.

In any event, how do you resolve this conflict? In order for this program to operate, as you say, you have to have trust. On the other hand, the institution has its own rules. The institution runs for its own benefit, rather than that of anybody in it. That is not only true for prisons, but hospitals and everything else.

How do you overcome that conflict to make this program successful in your institution?

Mr. ANDERSON. Of course, I had a chance to take part myself in the community workshop and I think that is a very important factor. I am probably one of the few wardens who did go in and sit down and let those guys scream at me for a week.

Senator HATFIELD. They put the judges in jail in Reno. That is part of the program there.

Mr. ANDERSON. That is a very effective part of the training process. It is difficult for an administrator of a prison to be able to allow the amount of autonomy that is necessary to one of these programs unless he has become involved somewhat himself first to see what it is and to see what he is trusting.

The primary component for the whole operation is a clean environment. That responsibility is more than just a custody responsibility that is imposed upon the staff.

We are using an ex-inmate for the staff member. One of his primary responsibilities is to insure me that the environment is clean. That does not take the therapeutic community out away from the rules and regulations of the institution. They are subject to the same search procedures and the same types of rules as every other inmate.

They do go on to the regular compound for their meals and for their educational classes. They are not isolated into a removed unit.

Senator HATFIELD. It does not resolve into a "con-boss" system? It seems to me that could be a possibility in that situation.

Mr. ANDERSON. If we had only clinical psychologists or college-trained people, we could get into the "con-boss" routine. It is hard for a con to con a con very long. That is my feeling with the men I have had.

Eight of the graduates of the program are now working in the OK community. It is very difficult for the guys to come out and run a con job on them. They have already been there. They can do it on me very easily or any other administrator. I expect to get beat once a day.

Senator DECONCINI. Mr. Chairman, I have no further questions.

I visited the program there and certainly want to compliment Warden Anderson for participating himself and also for the tremendous support he has given it.

I do have one last question. Is it your belief that it would be advantageous to have legislation in the Federal area for such communities in order to give them more support and resources?

Mr. ANDERSON. It would be very, very important. It would be very, very helpful.

Also, to bring up a point that was addressed a little bit earlier, there is a need to have a structure as you have designed in the bill. There is a very definite purpose for that—to keep the type of people, plus the training directors that you need. These are not necessarily as selected by the American Psychological Association. Most of the directors of the program that you are looking should be ex-inmates or people who have taken the time to become personally involved and know the trauma that is involved in this program.

Senator DECONCINI. So you need the inmates really involved in the administration?

Mr. ANDERSON. You definitely need the inmates in the director's position.

Senator DECONCINI. Once they have made that choice and put it together.

Mr. ANDERSON. That is right.

Senator DECONCINI. I have no further questions. Thank you, Mr. Chairman.

Senator HATFIELD. Mr. Tim Hart is our staff director. He has some questions.

Mr. HART. Warden Anderson, based on your experience, what is the ideal size of a therapeutic community; that is, director and staff to inmate population?

Mr. ANDERSON. Approximately 30 to 1 is an operable unit. If you get beyond 30, you are straining your therapist. He almost has to work from 18 to 20 hours a day if you get beyond 30. Bill Smith has many times spent many more hours than that, but it is not satisfactory.

I would say that actually 25 would be the best number that you could get.

Mr. HART. Does that include staff assistance in the sense that you have inmates as staff; that is, trainees?

Mr. ANDERSON. What we need to understand is that the program itself is a developmental process. They begin with the study of transactional analysis and develop into coordinators within the unit. The inmates themselves then take on responsible positions in the unit.

As they complete a course—roughly 18 months—they begin to assume some of the responsibilities from the program directors. In and of itself it should be a self-perpetuating program.

Mr. HART. When you are talking about 30 to 1 or 25 to 1, you are talking about a program director and then residents or inmates at various stages of completion of the program?

Mr. ANDERSON. Yes.

Mr. HART. Is there an approximate fraction—three levels?

Mr. ANDERSON. There are three inmates who will assist each director. That is what we use now. It seems to be a very workable formula.

Mr. HART. At its initiation the program at Marion, a maximum security institution, was used as an alternative to segregation. Do you believe that is wise either in a maximum or minimum security setting?

Mr. ANDERSON. No, I do not. I do not believe that you can force anybody into treatment at all, nor do I believe you can have any impact on that inmate's behavior. It has to be a free choice, whatever his motivation for going into the unit. We do not at our institution offer it as an alternative for disciplinary action. It has to be of his own free choice. He may be wanting to look good at the parole board or have whatever other reason, but that is not the reason that we give for his going in there.

Senator HATFIELD. Thank you very, very much.

[Mr. Anderson's prepared statement follows:]

PREPARED STATEMENT OF CLIFFORD W. ANDERSON

During late 1974 after realizing the void which existed in treatment of convicted felons within the Arizona Department of Corrections a joint effort was made by former Director John Moran and I to bring about an experimental program which appeared to be working very efficiently at the U.S. Penitentiary at Marion, Illinois.

The program appeared to be so effective that we began immediately to make arrangements for trained personnel to begin a duplicate model at Fort Grant Minimum security facility.

The program began under the direction of Monte McKinsey a former inmate of the Marion program with 13 members from the general population. The program soon increased to 35 for several months when we were able to obtain the transfer of Bill Smith from Marion.

Monte turned over the directors role to Bill and moved on to Phoenix to establish the present O.K. Community.

Soon after Monte left the population increased to 77 inmates but by necessity was reduced to 55 due to a lack of trained staff to bring about effective control of "clean environment."

To date, 189 inmates have spent at least 6 months in the program prior to release. Of these, 8 are known to have returned to prison. This would amount to approximately 4.5%. If we assume an error of 100% or 16 recidivist we are still looking at a figure of less than 10%.

The figures presented are extremely crude due to vague and ineffective follow-up data collection methods, but at its worst there appears to be over a 50% reduction in those returning to prison as well as the reduction in the nature of the crime.

As a prison superintendent in the Arizona Department of Corrections I have had ample opportunity at this point to test the concept presented by Senator DeConcini for the past few years. My own experience coupled with the statistics gained from the same type program, I feel, lends considerable credence to the theory that the theraputic community concept can be successfully adapted to any prison setting with high expectation for success in rehabilitation.

The original programs at Marion, Illinois Federal Penitentiary was developed in one of our finest maximum security facilities. The program developed at Fort Grant, Arizona was modeled very closely after the Marion unit with the major difference being the custody status of the prisoners involved and this is minimum.

The Fort Grant Program required adherence to all institutional rules and regulations as in any other program with the result effect being a 75% reduction in disciplinary action appearing before the institutional disciplinary Committee.

A noticeable reduction in hostility level was experienced by the custody personnel in dealing with this segment of the inmate population.

To date only one inmate has been involved in an escape attempt, either at Marion or at Fort Grant due to the ability of the therapeutic process to address the problems, either real or imagined, which cause an inmate to arrive at the breaking point of escape.

Based upon my personal experiences as a Superintendent in the operation of a prison, my personal observation of behavioral change and the limited statistical data available, I would highly recommend this form of treatment to you, not as a panacea but rather as a meaningful tool for rehabilitation. This can only be effected by trained personnel who have experienced the trama of having had the gates of prison slam behind them and who have demonstrated the perseverance necessary to bring about a self perpetuation of the program.

Senator DeConcini. If it is agreeable, we will take the next five witnesses as a panel: Mr. Monte MacKenzie, executive director, OK Community, Phoenix, Ariz.; Mr. Yale Simons, administrator, OK Community, and consultant, National Seven Step Foundation; Mr. Wayne Michael, inmate, Stillwater, Minn.; Mr. Bill Smith, director, Asklepieion West, a therapeutic community of Fort Grant, Ariz.; and Mr. Karl Tucker, administrator of treatment programs, Arizona Department of Corrections, and president, Board of Correctional Programs and Staff Development.

Let's start on the right by going across and identifying yourselves for the reporter, please.

Mr. Smith. I am Bill Smith.

Mr. Simons. My name is Yale Simons.

Mr. MacKenzie. My name is Monte MacKenzie.

Mr. Michael. My name is Wayne Michael.

Mr. Tucker. My name is Karl Tucker.

Senator Hatfield. Mr. MacKenzie, do you want to start?

TESTIMONY OF MONTE MacKENZIE, EXECUTIVE DIRECTOR, OK COMMUNITY, PHOENIX, ARIZ.

Mr. MacKenzie. Do you have a couple of weeks? [Laughter.]

My name is Monte MacKenzie. I would like to give my credentials to talk on such a subject as prisons, penology and the recidivist rate.

I am an ex-convict, a five-time loser. I spent 28 years of my life in 12 major State and Federal penitentiaries.

I went into San Quentin in 1941. At that time in the United States the recidivism rate was 68 to 72 percent, the 4 percent fluctuation depending upon what State and what penitentiary you were talking about. It is now 1978 and the national recidivism rate is 68 to 72 percent. We have not made a lot of progress since that time.

One of the things that we've tried in the penitentiaries throughout the United States is punishment. I am not here as a bleeding heart for convicts or ex-convicts. I do not want to present myself in that vein, but punishment certainly has not worked.

States such as Texas, Arkansas, Arizona, and the Florida chain gang were some of the most inhumane penitentiaries in the United States. Prisons that took away your identity and gave you a number. They worked you all day, 5, 6, 7 days a week and fed you garbage. You were locked up in inhumane conditions. Yet with all the inhumanity 68 to 72 percent of the people went back to the penitentiary.

In the late 1940's and 1950's and for the last 25 years some of the more affluent States in the Union that had more money to spend for penology said: "We have obviously been going about this whole thing

wrong. These people have been born in the barios, ghettos and slum areas. They have not really had a chance. What we need to do is to give them an education, give them a GED test and give them a vocation."

They did that for 20 or 25 years. The recidivism rate did not change.

Prisons are considered as places where you restrain and detain criminals. If convicts do, by any means, become rehabilitated, that is just an added plus. Rehabilitation is not and never really was built into the prison systems.

One of the fallacies under which we have been operating in this country since the days we started putting people into caves is that you can change people's behavior without their consent. You can't do that. It does not make any difference if you mollycoddle them. It does not make any difference if you use punishment or a combination of both. You are not going to change the recidivism rate in this country until you begin dealing with the "*why*" people are in prison.

In my opinion 70 percent of the people who are in the penitentiaries today are recidivists. We talk about overcrowding in the penitentiaries today like it is a new thing. Penitentiaries have always been overcrowded.

Arizona State Prison was built for 1,200 people. Shortly before a Federal judge gave us an order to reduce the population, we had 2,300 people. The people in the State of Arizona act as though that is something unusual. It has and is happening throughout the United States.

I went into San Quentin in 1941. That prison was built for 2,400 people and they had 6,000. It is not a new thing.

People in penitentiaries or any other walk of life are not going to change behavior without a "want-to" to change. People we like to deal with in therapeutic communities are people who do have a "want-to" to change behavior.

One of the things that has been addressed already is that a lot of people get into therapeutic communities. In the therapeutic communities I have been associated with on the streets and inside prisons such as Fort Grant, the Durango County Jail, the OK Community in Phoenix, these are places where you can come to and indicate a "want-to" to change your behavior and be welcome.

That is not enough. You need an environment conducive to changes. You need information. You need support. You need a caring, sharing environment. That is what therapeutic communities are all about.

You see in front of you somebody who is sane; somebody who can operate and function in society. For 28 years of my life I was dysfunctional. I was touched with a bit of insanity called a "loser." I grew up as a loser.

One of the things that is wrong with penology, it seems to me, or with our whole system, is that we know *what* people do to go to the penitentiary but very few of us have any indication of *why* they do it. Why would somebody who went to the penitentiary once and who suffered that experience go back the second, third, fourth, and fifth times?

They simply get on a merry-go-round and they do not know how to get off. They do not know what to do about it. They do not know *why* they do what they do. They do not know *why* they act and react

the way they do. They do not know *why* they are dysfunctional in society.

Some of us are even dysfunctional in prison. I was known as a bad ass in the penitentiary. "Don't fool with that guy. He's crazy. He'll kill you."

And I would, too. Not because I was bad but because I was scared. I spent 28 years in prison scared to death.

When I went to Marion, Ill. the first time, and through the therapeutic communities I have been involved in, I found out the tough guys in the penitentiary are the quickest guys to turn around. They are all scared. We are all, to some degree, children who have never been taught or learned to live positively as you people do on the streets.

When I opened up the program at Fort Grant I made a talk in the mess hall to the entire population. We expected 15 or 20 people to sign up and we would start a program. Eighty-six people signed up.

I had a choice. I was an ex-convict out of the penitentiary. I really wanted to look good. I wanted to have a program that would work, a program that people would notice. Out of those 86 people there could have been a lot of Sunday school teachers and first-term losers. People who, probably without the program, would make it. I really wanted to select them. I really wanted to start a community that would work, to which people would give a lot of credibility.

However, I had been a loser all my life. I started with 13 losers, 13 people who had been in the penitentiary at least three times. Out of those 13 losers, all of them are on the street functioning fine.

Yale Simons and I have been friends since 1968. He will tell you his story in a minute.

The people at Fort Grant and some of the people at Arizona State Prison knew our association. When they began having trouble on the streets, they started calling Yale Simons. He would ask me, "What shall I do about it?"

We slowly developed something that is the first thing of its kind, that I know of, in the United States. A followup therapeutic community for ex-convicts. People who are having problems functioning on the streets. They have some place where they can come and confidentially deal with what is really going on with them. It is a very valuable adjunct to therapeutic communities in prisons and to halfway houses on the streets.

We opened up the OK Community dealing with offenders; people who are dysfunctional in our society and usually criminally oriented. We opened up a therapeutic community at the Durango County jail, which is the first one of its kind in the United States. If we have a problem with that community, it is simply because we do not have the people long enough. We do not intend to lean on judges to give them more time.

The remarkable thing is that people who are in the therapeutic community at Durango do not have to come to us once they leave jail. When they get out they do not in any way have to come to us. They are not sent to us by judges, parole officers, or probation officers. They come because they want to come. They come because it is a place where people understand them and where people have been in the same place they have been. When they run up against problems, they come in to us and we work them out.

We have group therapy 5 days a week. We have 1-on-1 counseling.

When our funding is complete in the State of Arizona, we intend to open up a women's program. The only one of its kind that I know of in the United States.

Senator HATFIELD. What is that?

Mr. MACKENZIE. We want to open up a therapeutic community for the women's division like they have at Fort Grant for men. We would like to open up a State women's therapeutic community. We would also like to open up a women's program with the Durango County jail.

We do not have all the answers. We have not even heard all the questions, but we do know that we are the best thing going.

I have tried every kind of rehabilitation program I have ever heard about in the United States that has been in penitentiaries. This is the only thing that has worked for me.

Senator DECONCINI. Why did it work for you, Monte?

Mr. MACKENZIE. One of the reasons it worked for me is because a therapeutic community is a 24-hour-a-day, live-in community where people can get to know you; who your wife is; who your girlfriend is; who your kids are; who your parents are; how you grew up; why you do what you do; why you react the way you do; and what games you play.

Then if you have a want-to to change, they can give you some support. Pardon the language, but this is the only way I know how to put it. They kick you in the ass, love you, kick you in the ass, and love you until your negative behavior slowly diminishes and is replaced by positive behavior.

Senator DECONCINI. How long did that take for you, Monte?

Mr. MACKENZIE. I guess it took 28 years for me because before I never found out why I did what I did. If you are talking about how long it took for me, it is still taking. I have been in therapy 6½ years. I am not sure when I will ever be, quote, "OK, OK." I will always need people. It does not necessarily have to be people in the therapeutic community. In the therapeutic community are therapists or counselors. It is someplace where I can go, when I need people, where I can talk about what is going on with me. I can talk about what is really hanging me up, why I have pain, why I am going through negative behavior, and so forth.

I know what to do for myself. I know how to handle myself. I just need somebody to share that with.

One of the things that I never did in my life before I went into the therapeutic community was that I could never tell people where I hurt.

Mr. MCPIKE. Could you tell us a little bit about the actual nuts and bolts of the techniques that you use in the community?

Mr. MACKENZIE. I beg your pardon?

Mr. MCPIKE. Could you describe specifically what types of techniques you use?

Mr. MACKENZIE. In therapeutic communities?

Mr. MCPIKE. Yes.

Mr. MACKENZIE. Probably the most valuable tool of the therapeutic community is total confidentiality. One of the reasons that having psychiatrists, psychologists, therapists, and counselors, has never

worked in prisons is that all the time you are talking to them they are making notes to the warden, the parole board, and the classification committee about whether you are going to get a parole, a furlough, a work release program, or whether you are going to be transferred to a lesser custody institution.

I am not going to talk in front of that kind of a person. How could I go in and say: I love to rob and steal, it's exciting; I don't intend to quit, it's big money; I can go to Las Vegas and drive Cadillacs around the country, and have a woman in each arm? I can't say I love to rape women. I can't say I love to shoot dope. I can't deal with the fact that I cannot get along with women and can't get along with authority figures or that I can't hold a job.

Therefore, I am going to go in and play the psychiatric game because the first thing you do when you go into the penitentiary is figure out how in the hell to get out of there.

You start playing the psychiatric game when you are in front of people like that. You say, "Well, I've really learned my lesson this time. I've really had it. I have taken all these good courses. I've got myself a trade. I've got myself a GE test. My mother is sick. I have a job on the streets. I am really ready. I have sure learned this time." You say it hoping they will write you a good report.

Therapeutic communities do not allow that. Therapeutic communities address behavior. If it is negative, as I say, they will kick you in the ass. When it is positive, they will love you and support you.

The therapeutic community at Marion, Ill. was my first family.

Senator HATFIELD. What do you say as to size?

Mr. MACKENZIE. Mr. Anderson addressed that. I think Bill Smith has done an outstanding job at Fort Grant dealing with way over 30 people. He has done a fantastic job.

However, I would say that 30 people is too many people for one therapist. Bill Smith can address that also, as well as Wayne Michael. I would say it should be 15 to 20 people. I think 20 people is leaning pretty hard on the therapist.

Senator DECONCINI. Mr. Chairman, maybe we could ask Mr. Smith to give us some background on his program and what he thinks about size.

Senator HATFIELD. Mr. Smith.

Your statement in its entirety will be made a part of the record.

[Mr. Smith's prepared statement follows his testimony.]

TESTIMONY OF BILL SMITH, DIRECTOR, ASKLEPIEION WEST, A THERAPEUTIC COMMUNITY, FORT GRANT, ARIZ.

Mr. SMITH. Good morning, Mr. Chairman and Senator DeConcini.

Originally when I came to Fort Grant and succeeded Monte MacKenzie we had 24 people. There was a hue and cry by other residents at Fort Grant that wanted a drug program. I was asked by the superintendent, Clifford Anderson, if I would take on this task. Such had never been done before. I agreed to give it what I had.

Therefore, we opened a second community of drug addicts or those with drug-related crimes. In about 6 months the number rose from

30 in each unit to 77, which is unheard of and which caused me to work 18 to 20 hours a day some days. A typical day was 15, 16, or 17 hours. Presently we have 41. Again, that is higher than any other such program that I know of headed up by one person.

The unique factor of how I am able to do that is we have an ongoing training program. We are not just a live-in, 24-hour-a-day place where people do things. There is ongoing training.

My training was initially started by Martin G. Groder at Marion, 9 years ago—for 4½ years. I also went to college. I went to Springfield Medical Center for a tour of duty of 1 year to learn how to work with various schizophrenics. I worked on the staff at Marion as a psychiatric aide for more training. After 4½ years I was given a clinical membership in the International Transactional Analysis Association, which permits me to train others as I had been trained and endorsed clinically by this organization.

I would also agree that 25 is a maximum number for one person, even though I am handling 41. I am hoping to handle as high as 60. The reason is that I have two clinical candidates who work with me who now, after nearly 3 years, are competent enough. While I am here—I have been away for 2 weeks—they are handling the community.

This addresses itself to staff to which I heard Mr. Carlson refer. That is in the bill.

I worked mainly as a staff member even though I was still serving my sentence, which allowed the position of a staff member to work elsewhere in the institution. It is a savings in dollars. That is important to the American public and to this committee. Space is not a problem.

The rehabilitation we speak about, the training, now extends itself to the street. Because of Mr. Simons and because of Monte MacKenzie and the O.K. Community, there are presently eight graduates of the Fort Grant program who are now working as counselors. They are making a decent salary and they do not have to rob banks anymore.

Our training program extends to the public, which is the lifeblood. We have people from all walks of life—psychiatrists, psychologists, teachers, parole officers, probation officers, et cetera—who participate in our 5-day training program bimonthly. We follow that with a day-and-a-half workshop.

The job situation for such trainees in this proposed bill is one of the blessings that I see in it. It is an opportunity for people to study and train knowing that they can be employed. For me it is a lifesaver.

I work with people each day and as Monte mentioned when asked when is it finished: It is never finished! It is finished with criminal behavior, but I do not know a better insurance that I could have than to speak as I am now speaking and to work with people on a daily basis, forever reminding me of what my life was like for 27 years.

I was 43 years old when I went to Marion. I had a life sentence. Because of the work I just described and because of filing for executive clemency, ex-President Ford granted me executive clemency. That cut my life sentence to 25 years and permitted me to receive a parole hearing earlier. Now I am a free citizen.

That is a little more than what you asked for.

PREPARED STATEMENT OF BILL SMITH

Gentlemen, my name is William (Bill) Smith, presently employed by the Department of Corrections, at the Fort Grant Training Center, Ft. Grant, Arizona, as a Correctional Program Officer III. My work is in the capacity of Counselor/Facilitator of the Asklepieion-West, Training Institute and Therapeutic Community.

Nine (9) years ago with a 5th conviction (ranging from robbery to kidnaping) and serving a life-sentence; I became one (1) of a (34) member experimental 24-hr (therapeutic-community) program; at the Federal Prison, in Marion, Illinois, which was founded by Martin G. Groder, MD.

To say the least, at this juncture in my life, I had become a very frightened and fragmented person; ready to avail myself to whatever treatment etc., simply to survive in some functional and meaningful manner.

The attached information can more eloquently, clinically and statistically attest to the valid need for such (way-of-life) programs * * * everywhere.

[From Marion Flyer, U.S.P., Marion, Ill.]

(The *FLYER* is an official publication of the United States Penitentiary, Marion, Illinois, published weekly as a means of disseminating information of policies, regulations, activities, and other matters of interest to all institution employees.)

FRIDAY, DECEMBER 14, 1973.

INMATE ATTAINS CLINICAL MEMBERSHIP

In an unprecedented move, the International Transactional Analysis Association convened an examining board at the U.S.P., Marion, Illinois this past week. Inmate William Smith passed an oral and written examination on Transactional Analysis, Psychopathology and group treatment procedures.

Serving on the examining board were Judge Lois Johnson, from Kalamazoo, Michigan; Jim McKenna from St. Louis, Missouri; Joe Vinovich and Gary Graham from Carbondale, Illinois.

Bill Smith's examination was the result of four years of training under Martin Groder, M.D., Jim Stuart, M.A. and Ted Harrison, M.A. Bill's period of training also involved a ten-month tour of duty as assistant to Dr. Tom Cornwall at the U. S. M. C. F. P., Springfield, Missouri.

Inmate Smith is the fourth inmate trained by ASKLEPIEION to attain this high level of certification. Bill Edwards is presently administering a T. A. program at the F.C.I., in Fort Worth, Texas; Harry Dalzell is presently administering a T. A. program at the U. S. P., in Terre Haute, Indiana; and Ken Windes has since been paroled and is working as Director of a Transactional Analysis Corporation in Alabama.

What makes this week's board unique is that it is the first time a Clinical Examining Board has been convened for just one person; and the first time someone has been examined behind the walls of a prison.

Inmate Smith is now recognized as a competent group therapist by the I. T. A. A., and will be listed in their directory of clinicians.

EMPLOYEE GREETING CARD—CHRISTMAS CHARITY FUND

This year as in the past, a large Christmas greeting card has been placed in the lobby. All employees are encouraged to sign this card instead of sending greeting cards to your fellow workers. Along with this Christmas tradition a donation box has been made available in the lobby for employees who wish to contribute in lieu of the cost of sending greeting cards to fellow employees.

All funds donated by our employees to this charity will be matched, both by Local 2343 A. F. G. E. and the Employees' Club.

A committee consisting of Mr. E. L. Uzzle, O. E. Hill and J. P. Henry has been selected to manage the fund. The donations collected this year will be donated to the hearing impaired children of the Williamson County Special Education Coop. Approximately 80 children from fourteen counties in Southern Illinois attend classes in the Presbyterian Church in Marion. The donations will be used toward the special purchase of learning aid equipment that is not state funded. A lot of

children will appreciate your thoughtfulness and you will also have that good feeling of knowing you are contributing toward a worthy cause.

SAFETY NEWS: STUDDED TIRES

Winter driving conditions in many parts of the United States have led many drivers to use snow tires or tire chains on the family car. But the development of the studded tire has provided a third alternative. Studded tires have captured 40 per cent of the winter tire market. Here are some dos and don'ts on the proper use of studed tires from the U. S. Department of Transportation.

DO

(1) Make sure that studded tires are legal for the time of year and region you wish to use them.

(2) Have any insertion of tire studs done by a qualified service man and only on new tires.

(3) Make sure to remove the studded tires at the season's end. Studded tires are not meant for high speeds or dry pavement.

DON'T

(1) Insert studs yourself.

(2) Have any tire re-studded.

(3) Exceed the recommended range of 100 to 150 studs per tire.

(4) Rotate studded tires from one wheel to another. (Tire studs are meant to wear at one angle only, and that angle is dependent on which side of the car they are mounted.

The National Safety Council has reported that, when new, studded tires on the rear wheels alone can reduce stopping distance on ice up to 19 per cent while studded tires on all four wheels can reduce stopping distance as much as 31 per cent.

USP–MARION, ILL., *July 25, 1975.*

J. S. Petrovsky, Chief, Classification and Parole
THRU: Val Nylen, Case Manager
C. Kenneth Bowles, Ph.D., Coordinator of Mental Health Programs

Recommendation for Section IX Award—SMITH, William, Reg. No. 01896–135

This recommendation is submitted under the provisions of P.S. 7300.05B, Section IX for outstanding performance regarding institutional assignment.

Resident Smith has worked as Psychiatric Treatment Assistant since August, 1974. Prior to that time he was a Psychiatric Treatment Assistant at Springfield Hospital (see attachment). Prior to then, he was Psychiatric Treatment Assistant under Dr. Martin Groder at USP–Marion.

While working in this capacity Mr. Smith has contributed objectively to the rehabilitative goal of the Bureau of Prisons. Among his various duties, Mr. Smith provided direct counseling and psychotherapeutic treatment to residents (under the supervision of Mental Health personnel). He has also served as a consultant to Mental Health staff. Finally, he has been a role model and therapist to the Asklepieion Therapeutic Community. He has consistently received excellent work reports and has received no previous special awards; he has received considerable praise and recognition from Corrections and Mental Health professionals who have worked with him. He works with a bare minimum of supervision in his capacity as Psychiatric Treatment Assistant, and has often set the needs of his assignment above his own personal needs. He has given up his night-time leisure periods to talk to residents seeking assistance. He has been most reliable and responsive in providing assistance to residents incarcerated in the Hospital.

It is noteworthy that this is the first Section IX Award to be submitted by the Mental Health Department at USP–Marion for over one and one half years. This memo is submitted by the above in view of Mr. Smith's dedication to the Bureau of Prisons and his continued outstanding performance. While his dedication and efforts have been his way of paying back to both society and to the treatment program (Asklepieion Therapeutic Community) through which he has gained his own treatment and rehabilitation, the financial value of the services he has provided is equivalent to that paid in salary to a full time Mental Health professional.

In conclusion it is requested that a Section IX Award be given to William C. Smith with a monetary award of $100.00. It is also recommended that the contents of this memo be considered during the preparation of Mr. Smith's annual review

Attachment.

MEMORANDUM

MARCH 6, 1972.

To: George Pickett, Warden.
From: Martin G. Groder, M.D., Staff Psychiatrist, Chief of Health Programs, U.S.P., Marion, Ill.
Subject: William Smith, #1896-135, Recommendation for transfer for program reasons to the F.C.I., Terminal Island, Calif.

William Smith has been in the ASKLEPIEION Program since July of 1969. He has handled all of our top administrative jobs and is currently a Chief Coordinator ex officio. In addition, he runs his own counseling program with inpatient and outpatient psychotics under my general supervision separate from the ASKLEPIEION Program. This is quite a magnificent and unusual achievement for an incarcerated inmate. He has attained such a high level of skill that he is able to provide primary treatment for severe mental disorders in an institution. His success with these cases is almost amazing and indicates a high degree of clinical competence. In addition he has demonstrated good administrative skills and has the ability to teach what he knows with great facility. He is furthermore very outgoing and he relates well to staff and inmates, both black and white.

Under the usual circumstances, with his life sentence and with only four years served, he would not normally be considered for transfer to a less secure institution. Also, the fact that the crime is one of the rape of a mature woman, would usually mitigate against the same. These are not normal circumstances. He was incarcerated this time after twenty odd years of chronic recidivism for a whole variety of crimes. In actuality, he presents more of a picture of the chronic "armed robber" than that of a sexual deviate, and there remains some question in my mind whether the crime he was convicted was in actual fact sexual intercourse without consent. In any event, the major disorder in Smith's case was an antisocial personality with alcohol addiction. Taking each item one at a time:

1. Antisocial Personality: This factor has disolved and resolved into the most stable, upright, ethical stance that we have in the program. Bill Smith has been the role model for generations of inmates in the ASKLEPIEION Program as to how to keep their life situation clean and how to maintain an ethical life style. There is, and has not been for a long time, no indication of antisocial or anti-authority trends. Secondly, the alcohol addiction, which of course inside the penitentiary cannot be tested so easily, appears however to be absent. There have been no episodes of drinking of local "home-brew" nor any indication of interest in it, and the typical personality dynamics of the type of alcoholic that he was have been resolved.

In summary, this is a forty-six year old man who even when he came to the program was close to "burning-out" as an antisocial personality. He has become through his involvement in the program an extremely strong, mature, and clinically competent man.

In terms of the needs of the N.A.R.A. Program at Terminal Island, this is a man, one of two, who could provide extremely strong leadership, and teaching and clinical skills at a level high enough to handle the situation on his own.

In terms of his own program a transfer to an institution of lesser security and a chance to demonstrate his skills, responsibility, and administrative capacity is crucial to him being afforded the opportunity for some reconsideration of the time that he would normally serve on such a lengthy sentence. In point of fact, at this time, he is personally able, ready, and competent to return to civilian life without liability to society. However reality dictates that there be a number of steps between this fact and eventual release. This proposed step is a crucial one for him and one I highly recommend.

MARTIN G. GRODER, M.D.,
Staff Psychiatrist, Chief of Health Programs,
Founder—ASKLEPIEION.

U.S. DEPARTMENT OF JUSTICE,
BUREAU OF PRISONS,
FEDERAL CENTER FOR CORRECTIONAL RESEARCH,
Butner, N.C., June 7, 1973.

WILLIAM L. CLAY,
Member of Congress,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN CLAY: Upon request of Mr. William Clinton Smith, Register Number 1896–135 B–A–3, I am writing you this short note. I gather he has been in correspondence with you while he was at the Federal Medical Center in Springfield, Missouri in the capacity of psychiatric Treatment Assistant. I have known Mr. Smith since 1969 when he entered my intensive rehabilitation program called Asklepieion at the U.S. Penitentiary in Marion, Illinois. During the course of this four years, he has matured in an incredible way and has become an extremely proficient, effective, competent and ethical practitioner of counseling skills with other inmates, staff people and with students from a variety of universities. He has the misfortune of having received a life sentence resulting in his current incarceration. I see this man as being a benefit to any community he would now enter but suffering under the severe detriments of a severe and lengthy sentence. I am personally involved in early efforts to eventually get him executive clemency vis a vis a reduction in sentence which would make him at least parole eligible or even just a change in sentence that would make him parole eligible and I presume he has attempted to enlist your aid in such a project. My intent in this letter is merely to let you know that others, like yourself, are interested in this man and feel that he needs some relief from the usual administrative procedures for relief from lengthy sentences and would encourage you to assist him in any way that you would see fit. If further information from me would be of any assistance to you or your aides, I would be very happy to provide same. Thank you for your attention to this matter and I remain

Sincerely yours,

MARTIN G. GRODER, M.D.,
Program Development Coordinator.

MEMORANDUM

F.C.C.R., BUTNER, N. C., *October 26, 1973.*

To: Larry Traylor, Pardon Attorney.
From: Martin G. Groder, M.D., Program Development Coordinator.
Subject: Smith, William Clinton, Reg. #1896–135.

Enclosed is the most recent complete review of Mr. Smith's extensive progress. Since that time, he has demonstrated fully all the strength, maturity and ethical stance that were outlined in the recommendation. Specifically, he spent a year at the Medical Center for Federal Prisoners, Springfield, Missouri working with Dr. Cornwall and setting up a very effective program for mentally disturbed offenders there. He demonstrated his clinical skills and administrative "know-how" in that endeavor. He was at all times above reproach and functioned in a staff-like position. Upon completion of that program, we had him returned to the Marion Asklepieion program in order to provide his skill, stability and loyality to that program. Once again, he demonstrated these qualities in his participation for recent months. My last personal interview with Mr. Smith was in August 1973 and I am, more than ever, convinced that he has, for some time, not represented a threat to society and should be enabled through a stepwise process, to return to the community. Specifically, at this time, I strongly recommend that he be positively considered for clemency with a reduction of sentence to 25 years which would make him eligible for parole in approximately three years. I plan to bring Mr. Smith down to the Federal Center for Correctional Research next year to help work with our mental health programs here as he is the most skilled inmate in the Bureau of Prisons working with mentally disordered offenders. His level of skill, in fact, is higher than that of most mental health professionals. I think that after a year or more of that kind of work, he will be fully ready to go before the Parole Board with a recommendation based on six years of intensive involvement in a highly effective program plus his prior two years of incarceration. I person-

ally feel that Mr. Smith represents the type of individual for whom the clemency procedure was devised having demonstrated over and over again his desire and ability to accord himself at the highest levels to society's demands, interests and good.

Thank you for your consideration of this matter.

U.S. DEPARTMENT OF JUSTICE—BUREAU OF PRISONS

M.C.F.P., Springfield, Mo., Special Progress Report "H–4"

Committed name: Smith, William; Reg. No. 01896–135; Date 4/9/73.

REPORT OF PSYCHIATRIC EXAMINATION REPORT OF PSYCHIATRIC STAFF EXAMINATION RECOMMENDED FOR TRANSFER NARRATIVE SUMMARY

Identification: This 47 year old black male came to the Medical Center for Federal Prisoners, Springfield, Missouri, on June 26, 1972, at my request to assist me as a therapist on our open psychiatric wards. He is presently serving a life sentence.

Laboratory data: Routine laboratory procedures were normal.

Physical examination: This was normal for the patient's age.

Mr. Smith initially worked with me in the therapeutic community I have established on 10–A–1 and then transferred with me when the therapeutic community was moved to 10–E. During that time his duties have been that of assisting me in running group and individual psychotherapy, maintaining the therapeutic milieu of the therapeutic community and coordinating the training of students and staff members. He has used my office from 7:00 A.M. until 12:00 midnight, seven days a week, for the purpose of treatment and developing new programs. He has run groups on his own in the evenings, five days a week for over six months and has assisted me in running daytime groups, five days a week, involving both students from the local university on training status and involving the inmates in the therapeutic community.

In performing these duties Mr. Smith has shown an exceptional ability as a therapist and as a person. He was able to overcome the inherent difficulties in being the initial inmate therapist used at the Medical Center for Federal Prisoners with the concomitant pressures from the custodial and other areas to such a change. During this time of great stress to the system here at the Medical Center for Federal Prisoners he has been able to use his therapeutic ability to avoid any problems whatsoever. I have worked personally with Mr. Smith now for nine months and find him an exceptional individual. He is able to work long hours in a difficult setting and maintain his mental well-being while working with individuals who are psychotic and require a great deal of a therapist's energies. He has worked effectively with student population, giving them lectures on transactional analysis and working with them in a group and in individual sessions. Some measures of this effectiveness are in the first semester. Five of the students successfully passed the 101 course in transactional analysis of the International Transactional Analysis Association. Another measure are that the students have come to a voluntary extra treatment group on Tuesday evenings for three hours. Some of the students from the first semester have come back to participate in the second semester.

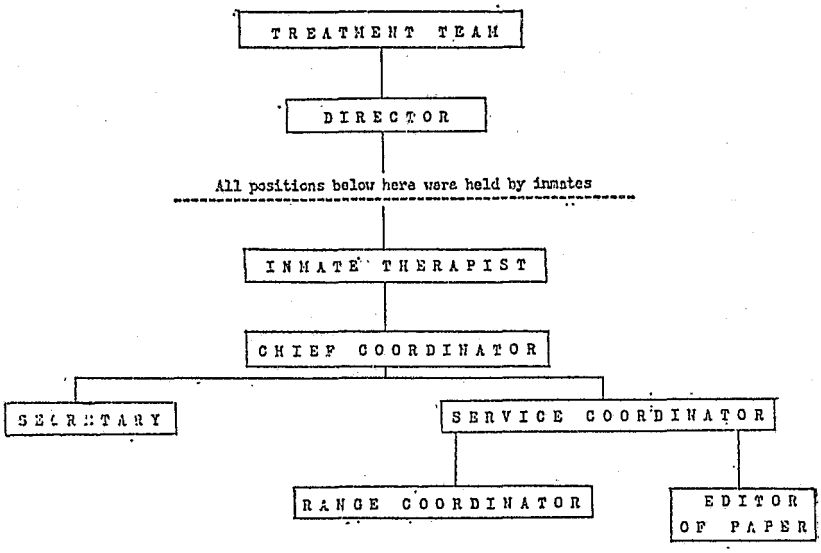
DIAGRAM # 1

Inmate Therapist Weekly Schedule

Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
7:15 Wake up session 8:30 Small Group 10:00 Student Training 11:30	7:15 Wake up session 8:30 Small Group 10:00 Student and Staff Training 11:30 101 Course	7:15 Wake up session 8:30 Program Planning 11:30	7:15 Wake up session 8:30 Small group with Students and Staff 11:00	7:15 Wake up session 8:30 Small group with Students and Staff 11:00	Weekend Marathon Sessions and	Weekend Marathon Sessions and
NOON	NOON	NOON	NOON	NOON	NOON	NOON
1:00 Individual Therapy 4:00	1:00 Student Training 4:00	1:00 Team and Staff Meetings 4:00	1:00 Student Training 4:00	1:30 Community Business Meeting 2:30	Other Therapies as scheduled on weekly basis	Other Therapies as scheduled on weekly basis
SUPPER	SUPPER	SUPPER	SUPPER	SUPPER	SUPPER	SUPPER
8:30 Evening Therapy 10:00	8:30 Evening Therapy 10:00	6:30 Student Group Therapy 8:30 Evening Therapy 10:00	8:30 Evening Therapy 10:00	8:30 Evening Therapy 10:00		

DIAGRAM # 2

Community Structure



STATE OF ARIZONA,
DEPARTMENT OF CORRECTIONS,
ADOBE MOUNTAIN SCHOOL,
Phoenix, Ariz., June 3, 1976.

Re: William Smith.

Mr. CLIFFORD ANDERSON,
Superintendent, Fort Grant Training Center,
Fort Grant Rural Route,
Willcox, Ariz.

DEAR MR. ANDERSON: I met today with Mr. Smith for a psychiatric evaluation which had been requested as part of Mr. Smith's appeal of the recent denial of his application for parole from the Federal Correctional System. Mr. Smith was very cooperative and verbal during the diagnostic interview, and presented himself in an open, honest, and appropriate manner. We spent considerable time together, and discussed in as much detail as possible his family origins, the psychological process that appeared most significant in his growing-up years, his social behavior as a child and as an adult, his involvements in the Criminal Justice System, and the course of personal development and overall functioning during the past eight years since his incarceration for the offense of Kidnapping, Rape, and Assault with a Deadly Weapon. Mr. Smith appeared quite frank in relating the details of these situations, and, in my perception at the time, was an accurate and reliable informant.

Mr. Smith described a conflictual growing-up period during his preschool years, in which his biological father died when he was age one and his care over the next several years was shifted between his biological mother, his maternal aunt and uncle, and his maternal grandparents. He reported that he was treated with great affection and a high degree of specialness and indulgence by his relatives and with appropriate nurturing by his mother; but that when he rejoined his mother and two older brothers as a family unit in his early grade-school years he no longer was treated in the indulged and special way that had been true in the other households, and that he began to rebel and protest against what he, in retrospect, can say was equal and fair treatment with his mother and siblings.

Mr. Smith is able to share a great deal of detail and richness of the emotional and psychological processes existent for him and his family during these early

years, with a degree of psychological sophistication that would reflect his training and experience over the past seven years in psychology, counseling, and the operation of psychological/social rehabilitation programs. He describes himself as becoming a rebellious, exploitative, and acting-out young person, who gradually developed the reputation of being the "black sheep" of his family. Nonetheless, he feels that, amongst his close relatives, he retained his special position and continued to be a very positive and indulged person with them despite his increasingly overt antisocial behavior.

Mr. Smith stated that his mother married his current stepfather when he was thirteen, but that he never developed a mutually strong, affectionate relationship with this man; and that he is now aware of how much he also wished for a father throughout all his growing-up, and even his adult years. He said that he had never been in a position to call any man "Dad" throughout his whole life.

As a result of his therapy experiences during recent years, Mr. Smith has come to understand his earlier emotional/psychological position as being one in which he expected all people who cared about or for him to treat him in the very affectionate and indulgent and giving manner that he experienced with his aunt and grantparents during his first five years of life. When this didn't occur within his unclear family unit or, as he grew older, with other adults with whom he interacted, especially women, he would feel rejected and would then distance himself from those people. He is now aware of how impossible his expectations of others were, and feels that these expectations are no longer operative with him, but does view them as a major determinant in his negative, manipulative, and acting-out behavior of the past.

Mr. Smith reported that he spent considerable time in Prison for offenses such as robbery and burglary, but that, at the time of his most recent offense in 1967, he had made an existential decision to radically change his life style and develop a socially positive and appropriate life for himself, with a focus on social productivity and intellectual and academic achievement. He said that he knew he did not want to be further involved in any antisocial activity, and did not want to return to Prison, and had begun to establish a more normative social existence by obtaining employment at Barnes Hospital in his hometown of St. Louis and by demonstrating his competence in that setting very early so that he felt that he was in a position to progress rapidly within that setting at that time.

He described the situation surrounding the offense for which he was arrested in a very different way than he said was reported by the young woman who filed the complaint against him. He admitted to sexual relations with this woman, but insisted it was with her consent, although he was aware that the emotional circumstances at the time may have led both of them in becoming involved sexually in a manner that might not have been true under other circumstances. He denied any criminal intent or activity in this situation, and felt that the woman's story was influenced by her family circumstances at the time, and that his conviction of the offense was influenced by his being Black and the woman being Anglo. Mr. Smith stated that his case was appealed as far as the Supreme Court, but this court refused to review it. When that avenue of appeal was no longer available, Mr. Smith sought and obtained a Presidential Clemency, which then reduced his life sentence to one of twenty-five years, and, as a result of that reduction in sentence, he has now become available for parole.

During the period of time since 1968, in which he has been incarcerated in the Federal Correctional System, Mr. Smith describes how he has become involved in psychology and rehabilitation, and has obtained substantial achievement in the Mental Health field through his gaining clinical membership and then a provisional training membership in the International Transactional Analysis Association, and by his participation in and development of therapeutic communities within Correctional Systems. Mr. Smith's therapy, training, and clinical experiences during this time have been very extensive, and have brought him to a position of high reputation in the Correctional Rehabilitation area.

During my evaluation with Mr. Smith, I observed no evidence or suggestion of any psychotic mental processes, of any neurologic or other organic impairments, or of any significant or relevant psychological or emotional dysfunction or psychopathology. Mr. Smith related to me in a direct, warm, and appropriate manner, and his attitude, mood, and affect were congruent with our situation together. He is a very intelligent and expressive person, whose vocabulary and

conceptual thinking reflect his obvious basic abilities, his higher education within the Correctional System, and the intensive training he has received as the result of his work in Mental Health and Rehabilitation. His self-esteem and self-confidence appear very strong at this point of time, and his sense of competency and accomplishment is mature and appropriate. He obviously is strongly desirous of being released from Prison, and the hurt and frustration of being denied his parole application is evident. Nonetheless, I feel he is coping with this psychological trauma in an effective and mature manner, and that he certainly demonstrates the capacity to postpone gratification and to abstractly plan for his future to a degree that would strongly indicate mature and healthy adult adaptational processes.

I feel that an important element in this at this time is his high enthusiasm for his work and the rewards and gratifications which he has received as a result of it over the past several years. Success, acceptability, and respectability appear to be very important to Mr. Smith, but I do find that he is able to acknowledge his need and want of these and to then obtain them in socially appropriate and productive ways, which would represent a very major change from his psychological functioning as he relates it during his childhood, adolescence, and young adult years. There is no indication at this time of any handicapping characterological disorder, which may have been present in the past, and I do not feel that Mr. Smith presents an antisocial personality construct as I experienced him today. I do not feel that he was manipulating me with his information about himself or his responses to my questions and comments, and I do feel that my impressions of Mr. Smith, as stated, are based on reliable information and observation as obtained in this diagnostic interview at this point of time.

In direct reference to his committing offense that resulted in this recent period of incarceration, I can find no evidence of emotional or psychological processes which would indicate that Mr. Smith might act in any dangerous, violent, or sexually assaultive way were he in an environment in which this would be possible. I am aware that predictors of dangerousness and violence are very difficult to define and confirm, but I do feel that, with the type of characterological and personality constructs that I observed with Mr. Smith at this time, I can with confidence, state that such antisocial behaviors would be extremely unlikely under any circumstances, including high stress and frustration. His coping and adaptational styles, even in the past, have not been congruent with behavior involving sexual senses, and the degree of maturation that has obviously occurred since the time of his conviction for rape in St. Louis would certainly further minimize or eliminate any potential for this type of antisocial behavior.

Furthermore, on the basis of my evaluation with Mr. Smith, I do not believe that there is any indication of his becoming involved in further antisocial or socially unacceptable behavior in the future. It is my strong impression that Mr. Smith can and will become a socially responsible and productive person who will continue to use the mature judgment and adaptive processes upon release that he has demonstrated while under confinement in his work with rehabilitative and treatment programs and in his overall adjustment to incarceration over these last years.

Therefore, I would strongly recommend and urge that Mr. Smith be released from incarceration as soon as is legally possible so that the Correctional System can appropriately respond to and reward what, in my opinion, has been a superlative rehabilitative outcome for this man. It would be my opinion that unwarranted delay in release would certainly accomplish no positive results and would run the high risk of becoming increasingly detrimental to the continued mature functioning of Mr. Smith by creating undue discouragements which could result in feelings of failure and depression, which would then interfere with and detract from the very satisfactory outcome already obtained. I find no psychiatric contraindications to release to parole status, but rather, from an emotional and psychological point of view, Mr. Smith has obtained maximum benefit fom his rehabilitative experiences and now is very psychologically ready to function productively and adaptively as a member of society.

Sincerely,

ROBERT COTTOR, M.D.,
Consulting Psychiatrist.

PRELIMINARY PSYCHOLOGICAL ASSESSMENT

Name: William Smith.
ASP No.: 35010.
Date: April 19, 1976.

ASSESSMENT RESULTS

William obtained a Shipley-Hartford I.Q. score of 102, placing him in the Average range of intellectual functioning. His overall performance level on the General Aptitude Test Battery is generally consistent with this impression and is thought to represent an accurate estimate of his current level of intellectual functioning, as well as his potential for future performance. Additionally, there is no firm evidence of gross perceptual-motor coordination dysfunction present, or signs of intellectual impairment due to neurological factors, based upon case history material, interview data, and preliminary assessment results. His overall academic achievement level, as measured by the California Achievement Test, is approximately equal to his reported 12th grade educational level.

Taken together, these findings suggest that William has the intellectual ability and degree of perceptual-motor coordination necessary to profit from Vocational Rehabilitation services at this time. However, it is questionable if such services are necessary in his case, as he has been functioning at an apparently successful level as a therapist at the therapeutic community at this facility and appears to be assured of employment upon his release. Of course, the provision of such services will depend upon the decision of the Vocational Rehabilitation Counselor at this facility. With sufficient motivation, William is likely to be an acceptable candidate for beginning college-level academic study, but is likely to experience a considerable degree of difficulty if he seeks to pursue an advanced college degree. From all reports, his present vocation as a therapist appears to be a suitable one for him to follow.

Personality assessment, consisting of the Minnesota Multiphasic Personality Inventory, Lanyon Psychological Screening Inventory, and a clinical interview, reveals no evidence of psychosis or serious psychoneurotic dysfunction present at this time, with most aspects of personality functioning clearly within normal limits. In particular, there is no evidence present of a continued alcohol dependency which has been reported in past psychological evaluations. There are, however, residual traces left of a chronic character disorder, but such behaviors are clearly not of a psychopathological nature at this time. William is a rather friendly, cooperative, outgoing, and engaging individual who appears to have worked hard to attain his present level of treatment success. He still remains a bit guarded and defensive, but such behaviors are to be expected after a lifetime of criminal involvement and cultural deprivation. While still a bit rebellious and socially unconventional in his thinking, such thoughts are well-controlled by more mature behavioral patterns. His impulsivity has been converted into a high energy level which aids productive work, as well as assisting in maintaining satisfactory interpersonal relationships. Apparently largely self-educated, his interest tends toward the cultural and esthetic. At times, his anger is likely to be discharged through passive-aggressive defense mechanisms, but again, this characteristic is certainly not in a severe form. He appears to possess a healthy level of self-esteem and a relatively positive self-concept. At present, he reports little emotional discomfort and shows few signs of manifest anxiety. He expresses no interest in receiving personal therapy for himself at this time, expressing that his past emotional problems are apparently behind him. Indeed, this seems to be a fairly accurate statement on his part. He possesses a fair degree of insight into his own behavioral dynamics at this time.

RECOMMENDATIONS

Overall, William is apparently not in need of psychotherapeutic involvement at this time. He has done well to this point in time in reducing the severity of his past emotional problems. If he wishes, some additional therapy work could prove helpful in reducing his degree of defensiveness and use of passive-aggressive coping mechanisms, but such therapeutic work is not critical at present. It is

likely that he does a credible job as a therapist at the therapeutic community program at this facility and such work should be encouraged in the future. Meanwhile, his past history of severe dyssocial behavior may present a potential vocational handicap, although, given his present situation, it is unlikely that his criminal experience would be considered an asset in his role as lay therapist with other felons. Consequently, little severe vocational disability appears to be present at this time. His adjustment to this present setting appears to be entirely satisfactory. At present, he appears to represent a better than average risk for successful rehabilitation, with a favorable prognosis for significant future behavioral change. It is quite likely that his conversion to transactional analysis has kept him from repeated criminal involvements, and, as such, continued treatment involvement should be strongly encouraged for him.

DIAGNOSIS

318.00 No mental disorder.
316.38 Dyssocial behavior, severe, by history and self-report.

JAMES W. SAURBIER, Ph.D.,
Clinical Psychologist.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., January 25, 1977.

Mr. WILLIAM C. SMITH,
Correctional Program Officer,
Fort Grant Training Center,
Fort Grant, Ariz.

DEAR BILL: I was pleased to receive your letter and to hear the good news about you. Keep up the good work.

I am enclosing a letter from Norman Carlson regarding the Asklepieion program. You will note there is no intention of cutting it out—simply cutting back. Training has been scheduled through 1977 in it.

I trust this will suffice; however, if I can be of further help, please call on me.

My best wishes.

Cordially,

PAUL SIMON,
U.S. Congressman.

Enclosure.

U.S. DEPARTMENT OF JUSTICE,
BUREAU OF PRISONS,
Washington, D.C., January 14, 1977.

Hon. PAUL SIMON,
House of Representatives,
Washington, D.C.

DEAR CONGRESSMAN SIMON: We have your recent letter regarding Mr. Joseph Vinovich's concern about the current status of the Asklepieion training institute at the U.S. Penitentiary in Marion, Illinois.

In checking with the personnel at the U.S. Penitentiary in Marion, Illinois, it was learned that while there are some modifications being suggested by the new warden at this facility, there is no intention of phasing out the program. Indeed, training institute sessions have been scheduled through June 1977.

Further, there are several programs within the Federal Prison System which are modeled after the Asklepieion program; for example, programs run at the FCI, Oxford and at the U.S. Penitentiary, McNeil Island. In addition, many Bureau staff have been trained in the techniques used in the Asklepieion program and employ it in a number of institutions throughout the prison system. The Bureau of Prisons encourages the use of a wide variety of therapeutic approaches. If a recognized therapeutic technique appears to be helpful to some inmates, then individuals trained in this technique are free to develop appropriate programs. To reiterate, there is no intention within the Bureau of Prisons to bring about the demise of this or similar programs.

I trust that the above is responsive to your concerns in this matter. Should you have further questions, please feel free to contact this office at any time.

Sincerely,

NORMAN A. CARLSON,
Director.

CONGRESS OF THE UNITED STATES,
HOUSE OF REPRESENTATIVES,
Washington, D.C., January 25, 1977.

Mr. WILLIAM C. SMITH,
Correctional Program Officer
ASKLEPIEION–West,
Fort Grant Training Center,
Fort Grant, Ariz.

DEAR MR. SMITH: This will respond to your recent leter regarding the penal program which you direct.

Be advised that I am in total sympathy with persons who are less fortunate and I consistently support legislation which would benefit them and improve their quality of life.

Good luck to you and your program participants.

Sincerely,

WILLIAM L. CLAY,
Member of Congress.

U.S. DEPARTMENT OF JUSTICE,
OFFICE OF THE PARDON ATTORNEY,
Washington, D.C., July 3, 1973.

Hon. THOMAS F. EAGLETON,
U.S. Senate,
Washington, D.C.

DEAR SENATOR EAGLETON: This is in reply to your memorandum of May 25 and your letter of June 19, 1973 concerning Executive clemency for William Clinton Smith, who is serving a life sentence for kidnapping and who is presently confined in the United States Penitentiary, Marion, Illinois. The enclosures are returned herewith as requested.

We have not received a petition for Executive clemency from Mr. Smith. He is eligible to apply for a commutation of sentence and the application forms are available to him at the institution. He is not, however, eligible to apply for a pardon as the rules governing Executive clemency require that he wait until at least five years after his release from prison before making application.

If Mr. Smith should apply for clemency, his petition will receive careful consideration.

Sincerely,

LAWRENCE M. TRAYLOR,
Pardon Attorney.

U.S. DEPARTMENT OF JUSTICE,
PAROLE COMMISSION,
Washington, D.C., June 1, 1976.

Re: William C. Smith, Reg. No. 01896–135.
Hon. THOMAS F. EAGLETON,
U.S. Senate,
Washington, D.C.

DEAR SENATOR EAGLETON: This will acknowledge your referral dated May 10, 1976.

Please be advised that action was completed by the National Appeals Board on May 21, 1976 which resulted in a decision to continue for an institutional review hearing in April 1977. A current psychiatric examination and evaluation has also been requested for that review.

Sincerely,

CURTIS C. CRAWFORD,
Chairman, National Appeals Board.

Senator HATFIELD. Mr. Simons, do you want to give us a few comments?

TESTIMONY OF YALE SIMONS, ADMINISTRATOR, OK COMMUNITY, AND CONSULTANT, NATIONAL SEVEN STEP FOUNDATION

Mr. SIMONS. Yes, I would, Mr. Chairman, thank you.

I would like to address my remarks to the role of prisons in our society. Some of the questions I would like to address are:

One: What can we do to change the alarming recidivism rate that we have lived with since the inception of prisons?

Two: Who can help us find some of these answers?

Three: Should prisons serve as a place for punishment, rehabilitation, or both?

For the past 15 years, I have had an insatiable desire to learn how we can help men and women not to return to prison. I would like to share with you some of the things I learned in these 15 years by visiting prisons—almost on a weekly basis as a volunteer and businessman—dealing with hundreds of people on a 1-to-1 basis and with them in prison and after their release from prison.

I started out believing getting an ex-offender a job, a place to stay, and teaching him a trade would keep him out of prison. I don't believe that now. These things are important but, unless a person knows and understands what got him into a juvenile institution or prison in the first instance, and why he keeps repeating the same mistakes, he is going to continue returning to prison.

When and how can he learn this? Why is his thinking different from those of us who don't go to prison, and what does he need to learn to stay on the streets? Can therapeutic communities in prisons help him to accomplish this? The answer is yes, if he had the "want to."

We need to impress prison administrators—that is, most prison administrators although we have some such as those you have heard today, Cliff Anderson and John Moran—to take responsibility for our public protection by making available treatment programs for those who want to change while incarcerated and, thus, slow down the revolving door to prison. We have no better place than a jail or prison for people to change negative behavior to positive behavior.

We have been missing this opportunity mainly because we do not understand the different thinking patterns of people who go to prison. Most of them are scared, confused, character-disordered people who don't understand why they can't make it in the "free world."

I had been going into prisons for 11 years before I knew about the therapeutic communities to which Monte MacKenzie introduced me. I did not know, for example, that people cried in their cells at night. They cried in their pillows so that their cellmate would not know.

Why wouldn't I know that going in there on a weekly basis? Why didn't I know that people are walking around the penitentiary scared? I thought if you were a tough, macho dude that you weren't scared of anybody or anything. I got to the therapeutic community and I don't know of one man that I have met yet who has said that he wasn't scared all the time he was in the penitentiary. Why didn't I know that? I didn't know it because they didn't share that with me.

Most of the people do well for short periods after release. Frustrations easily trigger old thinking patterns and questionable behavior. Some need a street community, such as we have, to reinforce what

they learned about positive behavior while in prison. We also need to teach them while in prison how to cope on the streets without going "dingy" and landing back behind bars.

We can do this. We have enough information that we take back into the penitentiaries to tell them what they can expect. We need some books written about this. We need some movies made about what they are going to see when they get out.

Right now they have a lot of fantasies in prisons about how they are going to drive the Cadillac and how they are going to get back with their wife. Even in therapeutic communities they have these fantasies. Some of the things we can do is to get this information back to them.

Who can help us find some of the answers to recidivism? One of the valuable resources we have is to listen to the ex-offenders who you see before you today. In my opinion, these are the "experts" who, like the folks in Alcoholics Anonymous, understand how a person can straighten out their life.

I want to give Senator DeConcini special thanks today because I know of no other panel that ever had these kind of people come before them. They have people such as myself, so-called experts, and some of these other so-called professional experts. They really aren't. The only one who knows what is happening in penitentiaries and how to straighten their lives out are these people you see before you.

Big strokes to you for listening. I hope these people will continue to be heard because if anybody is going to help us straighten out, they are going to have to do it from within the prison system.

As to my last question, prisons do serve as punishment. I do not care what they call them. They could lock you up in this room and feed you fancy meals, just stay in this room and not be able to get out, and see if that isn't punishment. Of course, prisons are punishment no matter what they are or how nice they are.

It has been said by many that rehabilitation is dead. That's not true. Rehabilitation has never been born. For the first time in my memory, communities are becoming open to finding solutions other than building more and more prisons. It's exciting and refreshing to see that local and national governments are deeply involved in searching for the answers that I am confident we will find.

Our appearance before your committee with these ex-offenders today would not have been possible without Norm Carlson giving permission to start the first therapeutic community in the Federal system at Marion, Ill., where the three ex-offenders who are here today were trained. I would like to thank Mr. Carlson for all his help and cooperation.

Also my thanks to this committee, especially Senator DeConcini, for your care and concern in doing what you can for our country by allowing us to share our concerns with you.

As a businessman, I think about the millions of dollars that will escalate into billions nationwide in building and maintaining prisons in addition to wasted manpower of unchanged bitter prisoners.

We have the means to turn some of these people from liabilities to assets for our Nation. We will find a way because there are people like us out there and like you who are concerned.

I have traveled to many prisons in foreign countries and visited their prisons, including Turkey. I can tell you that I think America has been the most backward of all the countries in trying to do anything with the system. That is the reason we are in the shape we are in.

I have just two final comments. I know of no one who has come out of a penitentiary and made it on the streets like these people. Hundreds of these people have made it by themselves. They need people such as us. We need to open up our prisons.

I would like to talk about the philosophy of our prisons. These walls keeping people out are crazy. We need to let people come into the prisons. We have to let them interact.

When I go into a prison, it doesn't seem like a prison. It seems like a hospital to me. There are a lot of sick people in there. When I go in there, I go in and talk to them as I would go into a hospital, with love and care. This has worked.

Do we have people who want to change in prisons? Yes. We have these people that you heard about with the "want to." It is really mind boggling. We think that number is somewhere around 60 percent.

When we talk about the 300,000 or 400,000 people incarcerated in this country, we have an opportunity to reach 60 percent of those people who are ready now. All we need to do is to find a way that has to excite your imagination as it does mine. I want to tell you we will find a way.

Thank you.

Senator HATFIELD. Mr. Michael.

Your statement in its entirety will be made a part of the record.

[Mr. Michael's prepared statement follows his testimony.]

TESTIMONY OF WAYNE MICHAEL, INMATE, STILLWATER, MINN.

Mr. MICHAEL. I want to thank everybody for my being here, too. I came here from the maximum security penitentiary at Stillwater, Minn.

I am here to talk about this bill and to support it. I see it as a potentially lifesaving bill.

For me, if a therapeutic community had not been at Marion when it was, I might not be here talking to you today. When I saw that I needed to do something else, it was there. Without reservation, I can state that I would more than likely be dead, either on dope or stabbed by somebody, or I might have been a part of one of those riots we hear about every now and then.

I have been out of the penitentiary for 8 months in the past 12 years. I got out about Christmastime in 1969 on a parole from Georgia. I stayed out about 8 months. I was out long enough to get a life sentence I received here, in this city, as a matter of fact.

Like Monte MacKenzie, if you had 2 weeks, I could talk for 2 weeks about therapeutic communities, their worth, problems, and the mechanics of their operation in maximum security prison settings.

One point that has been talked about by Mr. Moran and Yale Simons I think is important. That is about our not being willing, as convicts, to talk. I am very reserved even here today. Because of the mentality and thinking of prisoners, you learn quickly that to keep

your mouth shut is the safest. You have a better potential of surviving if you keep your mouth shut. Therapeutic communities—clean therapeutic communities—are places where an inmate can talk.

I am here because Mr. Carlson agreed to let me come up here. I don't want to say anything bad about Mr. Carlson. I do question the therapeutic communities he has in existence.

I heard Senator DeConcini allude to the fact that maybe some of you folks would be going to one of those penitentiaries to look at one of those programs. It is just like when I was in the Navy—we knew when inspection was coming and we looked damned good.

I do not know of any existing therapeutic communities, other than our own at Stillwater and a few more like Ft. Grant and St. Cloud, Minn., that can be considered clean. What I mean by "clean" is where there is no violence, no threats of violence, and no going down to the gym or out to the yard to smoke some dope or shoot some dope. We deal with that every day—keeping our house clean. That is what Cliff Anderson ran into when he came to Marion. He was talking about our screaming at him. That is how we keep our house clean.

If Monte came down and sat in my house and was high, I would know it. If Monte came down and sat in my house and told me a lie, I would know it.

When you have about 16 other convicts sitting around in a circle there and one guy is trying to run something by them, the chances of doing that are very slim. Even those who get very, very sophisticated and can do that in one session, over a number of sessions it is going to emerge. I learned that from Bill Smith. Bill used to tell me it will emerge, and that is a true fact. Whatever a guy is doing, it will emerge.

However, when it does emerge, it needs to be in a place where people will confront that with care and concern instead of with discipline and sending them to the hole.

That stuff that happened in Illinois the other day and down at Georgia State Prison—and I was down there for a couple of years, too—where those guards got killed, that stuff does not have to go on. I know if I had not been in the therapeutic community, and if I had been at Reedsville, Ga. [Georgia State Prison], or at Pontiac, Mich. [State Prison], I would have been right up there with the best of them because, like Yale Simons said, I ran scared every day. Being slight of build, I have to act even a little more crazy. That is all survival stuff.

Personally I would like to talk a little bit about where I am now at Stillwater Prison. The director of the Minnesota Department of Corrections, and you may have heard about him, Mr. Kenneth Schoen—I hope you have—and the warden of our prison, Frank Wood, both endorse and support the therapeutic community concept. Commissioner Schoen himself participated in a 1-week workshop at the therapeutic community at USP Marion, Ill. Warden Wood is familiar with our basic theory of personality [transactional analysis] and in my opinion has shown his knowledge of the structure and dynamic of groups and organizations by the way he administrates the prison at Stillwater, a prison where, when I first arrived from Marion in January 1976, was extremely unsafe.

We do not just work with ourselves. Every month a part of their training academy is for new officers to come down there. They spend a week with us. That is a required part of their training. Anybody who

is going to be an officer there has to come through that training. I brought documentation with me about that from a training officer there.

Most of those guards who go through those 13 weeks of training will tell you that the week they spend with us is the most important part because one of the things we teach them is how to stay alive and how to keep from having to be up on the bench telling somebody why they had to beat somebody in the head. Most situations in prisons can be dealt with without beating somebody in the head or getting beat in the head.

A couple of Bureau of Prisons personnel brought me over here. One of them is a training officer. He explained to me that he has been around. He has been stabbed as a guard at other institutions. He has found out that that does not have to happen. Now he is in the training aspect of it where he can show other guards that you do not have to get stabbed to do your job and you do not have to beat them in the head to get them to toe the mark.

I also want to talk about the point made about a separate kind of administration. I know one reason we need it. That is because the Bureau of Prisons has a mission, and that is to carry out the judges' orders.

Based on the behavior of thousands of past prisoners, and I understand them, it is pretty easy to predict what guys will do. We are a new breed.

My director comes up and says, "It is OK to transfer this guy over here to El Reno; he can help them with that program over there." I do not know if you are familiar with that hierarchy but he is a unit manager. Then it has to go through up to the caseworkers and all the way up the line. All those fellows get to see is that record.

Just like the marshals when they come to pick me up they are looking for some 6-foot-four-inch, 200-pound monster that they are going to have to chain down and everything because that is the way my behavior has looked. I understand that. But they don't know me now.

Mr. Carlson does not have the opportnuity to go down and watch old Wayne Michael for a few weeks or a year. I understand that.

The unit managers who are involved at Marion right now, both of them that I know, are not with the Bureau anymore. They will have to tell you their own personal stories as to why they are not with the Bureau.

I know one thing. It is hard for them working with us. We will sure drain the energy off of them.

Senator DECONCINI. Excuse me, Wayne. How many people are in your program?

Mr. MICHAEL. Today the count is 14.

Senator DECONCINI. How long has that program been operating?

Mr. MICHAEL. It has been there about 3 years now.

Senator DECONCINI. How long have you been there?

Mr. MICHAEL. I have been there 2½ years.

Senator DECONCINI. For 2½ years?

Mr. MICHAEL. Yes, sir.

Senator DECONCINI. Can you tell the committee a little bit about how it operates? Tell us the day-to-day operation. When someone comes

in and wants to get in, how do you handle them? What do you do with them? How do they get in? Then what happens to them?

Mr. MICHAEL. Everybody in the institution knows what is going on everywhere else in the institution. However, they have a receiving unit. Once a week we send somebody up there who talks to all the new guys who came in that week to let them know we are there. Then all they have to do is send what is called an MA request form down, and we will assign them to an outresident list.

Every evening from 5 to 6:30 people from other cell blocks come down and participate in some of what we do. It gives them a chance to look us over and gives us a chance to look them over. Especially what we do is watch them to see if they are in any dope activities or gambling activities or those kinds of things, so that those things cease.

Sometimes a guy can be on that outresident list for about a month. It takes some guys 3 or 4 months to get in. It is up to him how he wants to change back. Then we move him in.

The daily routine starts at about 7:30 every morning and goes until about 6:30 every evening.

Senator DECONCINI. What is that routine?

Mr. MICHAEL. Everybody gets up and does all the jobs, such as cleaning the unit, clerks type up memos or minutes, and whatever has to go on during the day.

Then they have a group called morning assembly. Generally somebody will share what the current events are. It is like some of the things that went on when you were a kid in school. Somebody will read off the news. Somebody will read off the current events. Somebody will give an editorial about something that has happened recently. It is about a 30-minute or 45-minute warmup session.

Guys present possible problems they might want to deal with during the day. Generally you get a feel for each other and how the day is going to go.

Then there are various structured activities from then on. It may be teaching a TA class. If someone is donating some time, somebody might come in and do some bioenergetics or teach some creativity classes or whatever. Of course, there are the games.

Senator DECONCINI. Give us an example of a session where you are going to have the games—where you are going to get at someone's problems or they are going to get at your own problems? Can you depict that for us?

Mr. MICHAEL. Sure. We put the chairs as much in a circle as we can get them. All our community members are required to be there. The old convict code gets thrown out the window.

I will say something to Monte, for instance, like, "You didn't do your job last night. You didn't do your job this morning. I want to know what is going on and why you didn't do that." Then the rest of the circle will support that. That is called an indictment.

Senator DECONCINI. Then what does Monte do?

Mr. MICHAEL. He will have all kinds of reasons why.

Senator DECONCINI. Then Monte or the person would respond with his defenses?

Mr. MICHAEL. Yes. He will defend himeslf.

Senator DECONCINI. Then what happens. Do you keep on that subject matter?

Mr. MICHAEL. We sure do. I know that if Monte didn't mop his floor this morning, he might tell me he had a bad transaction with his girlfriend yesterday, but that doesn't incapacitate him. He can still swing a mop.

His position would generally be, "Well, I had a bad transaction with my girlfriend yesterday so I just didn't feel like it."

We will pursue it like this, "Hey, we understand you had a bad transaction with your girlfriend. However, that does not incapacitate you. If you were in another unit and you did not do your job, they could put you in the hole. We understand you had a problem with your girl but that is no reason to lose."

His reaction to that bad transaction with his girlfriend is to get into losing behavior. We point that out to him in a number of ways.

Senator DECONCINI. Normally during the course of that game the person will respond positively, I presume or at least take some corrective measures?

Mr. MICHAEL. Ideally he will.

Senator DECONCINI. He will say, "Yeah, man. I should have mopped that floor even though I had a bad experience."

Mr. MICHAEL. They will say that, too. That does not necessarily mean——

Senator DECONCINI. How do you get to know when they are really not just conning you?

Mr. MICHAEL. One of the ways is because we all work and live in the same unit together. We know each other 24 hours a day. That is what Bill Smith talked about when he said it will emerge.

You don't know me but, after you get around me a while, then there are things you can tell without my even saying to you what is going on. You can pick it up. That is one of the ingredients.

Senator DECONCINI. What if the person gets by that game? What if he gets through that hour or 2-hour session without ever really coming to grips with the problem? What do you do? Do you drop it until the next session or do you take it up during that day? Do you give him a hard time for the rest of the week until he comes around? What do you do?

Mr. MICHAEL. I cannot specifically say. Each individual situation is worked with based on its own merits.

Senator DECONCINI. Do you ever have long, extended sessions?

Mr. MICHAEL. Yes.

Senator DECONCINI. Where they will go all night or something such as that?

Mr. MICHAEL. No, not all night.

Senator DECONCINI. Will they go many hours?

Mr. MICHAEL. Yes, we have had them that go many hours.

As you are asking that question, I keep thinking about the people out there who want to take care of me. One of the bad things that happens is, although it is nice that people out there care, I have seen people get killed because people out there cared, because they start raising their voices trying to tell people what it is I need. You read about it in the papers. They are big uproars.

Then inside you have a bunch of guys who will believe that. Then they are going to tell the warden or his officers, "You don't know what I need. Don't you read the papers?" So you have wars. I know what I need.

I know one thing. They talk about physical stuff. I certainly wish that Monte MacKenzie or somebody had been around in Washington in 1970 when I was thinking about doing what I did. I would be glad if they had yelled at me for 5 days if that is what it took to get me not to stab that policeman.

Senator DECONCINI. Have you had people go through your program and be paroled?

Mr. MICHAEL. Yes.

Senator DECONCINI. Where do they go from there? Do you get them into training or into TA or anything such as that?

The ones up front right now, we have about eight or nine that I talk to maybe every week who are counselors in various programs.

In Minnesota they hire within. A lot of the guards who are working there used to be inmates. We have guys who graduated while I was there and worked while I was there who are counselors at halfway houses.

Senator DECONCINI. I would like to ask Mr. Smith that same question. How do you cope with those games or the session that you are having when you do not feel as though you are getting across to the guy or he is not getting his act together? What do you do with him?

Mr. SMITH. Normally I follow two approaches: the humanistic and the clinical approach.

The humanistic approach is to let it go for a while. We are in a different situation where we can go all night and all day and several days, if it takes that. We often do that even though nothing is happening.

Periodically I have what is called a marathon. That will last 3 days. There is very little sleeping during that period. That, of course, is to tear down defenses and deal with negative behavior. That is humanistic and it is also clinical.

In a given, specific act we issue what is called a prescription, the same as if you had a headache and you would take an aspirin. That prescription could be researching material. It could be doing some menial job. It could be silence, which West Point found effective, to allow that person to think about what he did and to think better of it. Usually that works. That is how we maintain a clean environment.

We have had situations where several people were in on some covert action, such as smoking marihuana or having gotten hold of something that they could shoot or chew. Of course, we then expel them for a given period of time. They can come back when they decide.

If it is minor where it is disciplinary action at the institution, I normally match that if not double it. If the institution should place him on a 15-day restriction, normally I will increase it to 30 or maybe 60 days. The idea is not punishment but a prescription so that that person can think about what they did and how that same action brought them to the prison in the beginning.

Senator DECONCINI. That is the discipline imposed upon them. How do you get them to turn around? Do you do it by marathon? Is that what you do? Do you finally break them down?

Mr. SMITH. We can do it that way. There are many other means. One is what we call a haircut, where the best, the most expertise game-players will go in a given room. This person can talk back but he has seven people talking to him so that it is pretty difficult for him to talk back.

Senator DECONCINI. You are breaking him down?

Mr. SMITH. Sometimes I take him in my office and I will talk with him. That is part of the training.

One of the things that happened for me with Martin G. Groder is that he promised, and did do it, to ask me questions that I had never asked myself. Because I was looking for answers, that is one of the ways I found to stop what I was doing.

Senator DECONCINI. What kind of questions would you ask someone who you had in your office?

Mr. SMITH. Initially, we talk about whatever it is that happened. Then he can offer his explanation. I calibrate that as to how truthful that might—the ring of sincerity, the self acknowledgment.

We use Emerson's self-reliance. If he is into owning what he did and has a reasonable explanation for that, that can be understood. We can say, "OK, that happened. How about no more?" He can take a contract out. We work on a contractual basis. His contract would be that he won't do that again. That is learning social control, which is very necessary to live an upright life.

Senator DECONCINI. Being responsible for his own actions.

Mr. SMITH. That is right, and being responsible for his brother.

Mr. MCPIKE. Mr. Smith, you have used several terms here that deal with certain types of psychological therapies. I wonder if you could describe to us what types of modalities you use.

You have looked at the bill. I wonder if you think the bill is drafted broadly enough to include the kind of therapies that you consider effective.

Mr. SMITH. Each one that is mentioned in the bill we use. Our motto is that we use what works. That is discretionary, of course. It is tried and it is proven.

This weekend I will be taking the EST training. What I will get out of that personally I will carry back to my community. Wherever I hear of lectures or information given about a specific modality, I will go there. Whatever I can extract from that I will take back to my community, such as reading books and the like.

The bill is broad. We do not know what is going to come up in the future. I read into that that it would be permitted to happen also.

[Mr. Michael's prepared statement follows:]

PREPARED STATEMENT OF WAYNE J. MICHAEL

I wish to express my appreciation to this committee, and all others instrumental in my being invited to present this statement and to testify in SUPPORT of "The Therapeutic Community Act of 1978."

Taking into consideration my own situation, and in light of the most recent life claiming riots (Pontiac, Illinois—Georgia State Prison) as well as past ones, it is appropriate to consider "The Therapeutic Community Act of 1978" a potentially life saving bill.

In my own case, without reservation, I can testify that my good fortune of being alive this day can be directly attributed to the existence of a Therapeutic Community, in 1973, at the United States Penitentiary at Marion, Illinois. At the risk of being discarded as drama, I will venture to say that I was reborn at the Marion Federal Penitentiary and did a lot of growing up there. A man whom I have adopted as a surrogate father, William Clinton Smith, and another I have similarly adopted as a brother, Monte Mc Kenzie, who will be testifying before this committee are prime examples of how therapeutic communities can and do work.

Presently, I am serving a life sentence (concurrent with this are four lesser sentences stemming from the same offense) for Assault with Intent to Kill a Police Officer on Duty. I have been incarcerated as a result of this crime since October 1970. I have been out of prison eight months in the last twelve years. The first time I was in a prison environment I adopted the attitudes and thinking that result in the type of crime I committed to get in this second time. I was twenty years of age at the time of my first offense, twenty-four years of age at the time of my second offense and I am thirty-two years of age now.

Inasmuch as I am an inmate, I would like for this committee to regard my testimony as not only representing that segment of prison populations who are into doing something about their situations, and making things better for inmates, but that I am here to endorse a bill that I believe has the potential of significantly and positively enhancing the mission of humane incarceration and safe and productive working conditions for those taking on the job of carrying out such a difficult task.

I am eager to share with this committee how I have experienced the past four and a half years of participation in a therapeutic community. I want to take this opportunity to point out the ways in which a therapeutic community is a viable alternative to traditional approaches of medium and long term incarceration. And, I would also like to express my views and examples of how therapeutic communities address economic problems incurred in our mission.

I am enclosing with this statement a letter (marked E–1) from the Director of Staff Development at the Minnesota State Prison at Stillwater, Minnesota. This letter is an example of the contribution therapeutic communities are capable of making to the overall mission of the Institution.

Another enclosure (marked E–2) is only one of many letters addressed to the Warden, Frank Wood, of the Minnesota State Prison. This letter illustrates how the therapeutic community reaches beyond the walls of the Institution and contributes to the essential follow-up necessary in our business. Stated simply, Therapeutic Communities are a part of the total solution by involving itself in community corrections, parole and probation areas, and keeping the public informed.

Since my obvious reason for being here is to be the example of a current resident of a therapeutic community, I have added two more enclosures (marked E–3 and E–4) which are psychological evaluations of myself. The main reason I present these here is to point out that even when a man is sometimes diagnosed as a "poor risk," or poorly adjusted or having disorganized thinking, doesn't mean he cannot be reached or help himself.

For this reason alone I want to emphasize to this committee the importance of maintaining therapeutic communities in penal institutions. In this day of recycling trash into saleable and useful commodities after so many years of not even envisioning the possibility of doing so, I'd like to see us be prepared for that portion of prison inmates that find out they themselves are salvageable and that their lives can be turned around and put to better use for themselves and their families and loved ones.

On that account, I think it important that this committee consider that most of the men currently have little idea that they can do anything different. If we don't continue to let therapeutic communities thrive, then those who have not as yet been motivated will not have examples set for them. And, those that work with them will have little evidence that their job is anything but warehousing.

In summary, I present myself to this committee prepared to answer any questions you may have concerning me now, my past, my affiliation with therapeutic communities, and my penitentiary educated predictions on the future of penology and corrections.

To close, I want again to thank you for this rare privilege and to let you know that my being here is a part of the therapeutic process that continues to bolster decisions I have made in my life. That is, I can continue to believe and trust that positive things can be made to happen. Thank you!

E-1

MINNESOTA STATE PRISON,
DEPARTMENT OF CORRECTIONS,
Stillwater, Minn., July 27, 1978.

TO WHOM IT MAY CONCERN: Dale Irestone, Director Asklepieion Therapeutic Community, has requested this letter explaining the role ATC plays in training prison staff.

The Correctional Counselor Training Program is a thirteen week experience designed to give prospective officers a complete understanding of the mission, organization, policies and procedures of the Department of Corrections and Minnesota State Prison, as well as to teach officers the skills and abilities required of Correctional Counselors. To accomplish these goals, Correctional Counselor trainees receive specific job skill training and are also exposed to a variety of treatment methodologies so that graduates have been introduced to as many phases of corrections as possible.

The Asklepieion unit has been working with the Staff Development unit almost since the training program began three years ago. Trainees participate, with inmates and community participants, in the ATC forty hour regular workshop. The workshop provides trainees an opportunity to have "hands on" experience dealing with "games" they may encounter on-the-job prior to having to handle similar actual experiences. The role play situations show trainees possible alternatives to use when handling specific job situations.

The ATC experience composes an important portion of the thirteen week total training session, and is one of the many programs participated in by trainees.

In addition to regularly assisting with the Correctional Counselor Training, this department has called upon experts in ATC to assist with specific training needs. As an example, a former resident of ATC had been an inmate at Attica during the Attica Riots. He met with groups of prison employees when the film *Attica* was shown, narrated parts of it, recalled his experiences during the riots and answered questions.

During the past three years the ATC staff and residents have been conscientious in providing training to Minnesota State Prison staff.

Sincerely,

GENE A. WOODKE,
Director Staff Development.

MINNESOTA STATE PRISON MEMORANDUM

APRIL 10, 1978.

To: Dale Irestone.
From: Gene A. Woodke Director of Staff Training.
Regarding: Correctional counselor pre-service training.

This memo serves to acknowledge your contribution to the current Correctional Counselor Pre-Service Training which was conducted.

Your cooperation in finding time out of your busy schedule to devote toward familiarizing new employees with the institution is genuinely appreciated. Your continued cooperation, as well as that of other persons in the organization who have particular pertinent areas of knowledge and expertise to share, will ultimately contribute toward greater efficiency in institution operation.

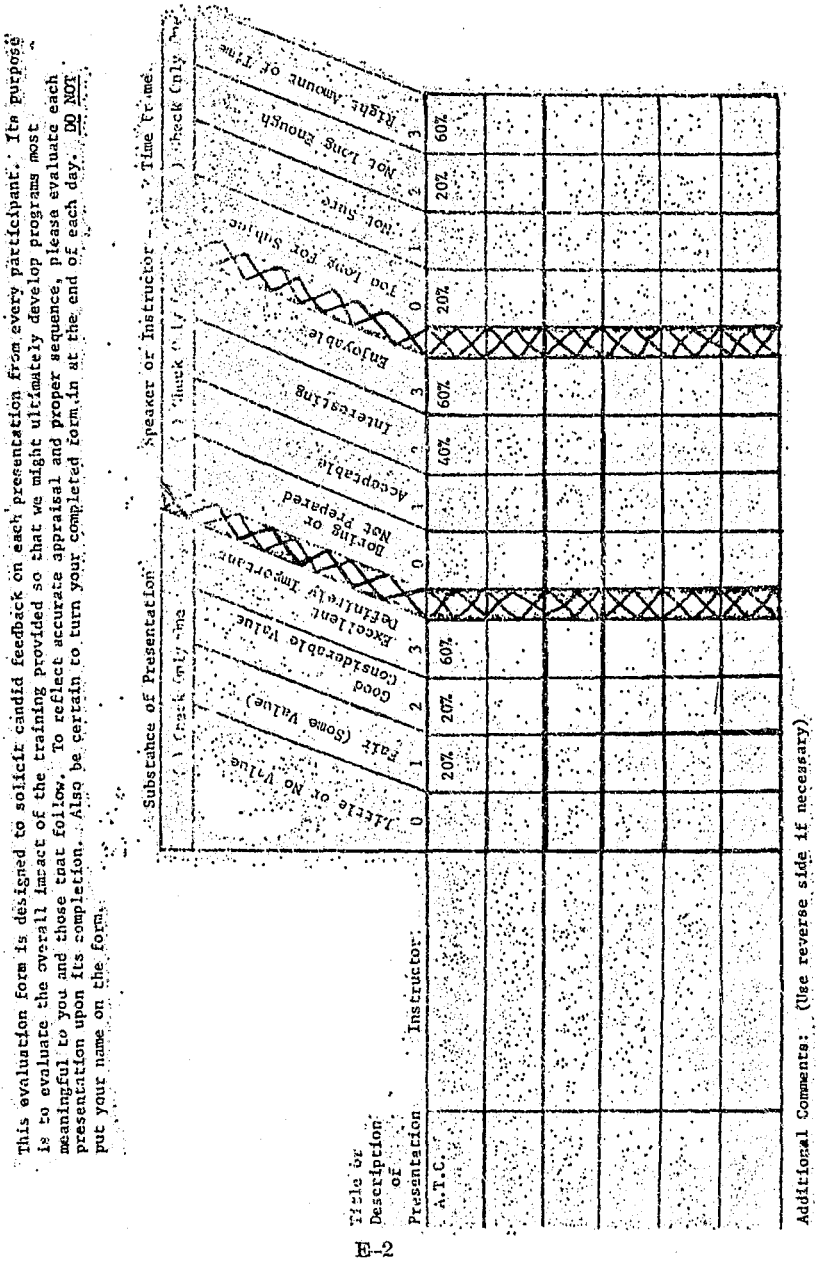
It has been my experience that most resource persons or individuals involved in any element of training and education process are generally concerned and curious as to the reaction to their presentation by the recipients. It is with this in mind that I am enclosing a composite of the comments by the trainees in reference to your particular segment of the orientation program of * * * for your perusal. (See Attached). Thank you again for your contribution.

Comments made by trainees:

I think that all the new Guards coming in should go through it.

Every Class of new Correctional Counselors should have this T.A. It should be done in the way we had it. (In the Units).

I think all New Officers should go through A.T.C.



E-2

NORTHERN ILLINOIS COUNCIL ALCOHOLISM DRUG DEPENDENCE,

March 9, 1978.

MR. FRANK WOOD,
Warden, Box 55,
Stillwater, Minn.

DEAR MR. WOOD: I would like to take this opportunity to both thank you for making the Asklepieion Training Institute available as well as acknowledge that it is indeed a very high quality program.

It was my pleasure to have attended the December, 1977 Institute. I am contemplating a return to a special workshop being presented at the end of this

month. It was truly a great surprise, much to my delight, to see such a high level therapeutic program operating within your facility. A great deal of consolation is attached to this fact, particularly during a time when the issue of rehabilitation in prisons is such a live and important one. My hope is that the work that is going on there will continue in the future.

Much credit must go to Dale Irestone and Wayne Michael for their dedication and enormous investment of work energies into making the program as successful as it is. Thank you again.

I am sincerely yours,

MARK S. FISCH,
Director.

E-3

U.S.P.-Marion, Ill.

Ron Thompson, Case Manager,
THRU: J. S. Petrovsky, Chief, Classification and Parole.
Kenneth G. Wilson, Ph. D.
Michael, W. J.
Reg. No. 95417–131

CONFIDENTIAL

PSYCHOLOGICAL EVALUATION

I. General impressions

Wayne Michael is a 29 (January 15, 1946) year old male caucasian of slight build, 5'9" tall weighing approximately 120 pounds.

Wayne Michael is an extremely open and candid individual not evidencing any psychiatric symptoms or defenses at this time.

Mr. Michael indicates that his early family life was characterized by a lack of close meaningful contact with his mother and father. He felt that he was only tolerated, a responsibility that they had to contend with. Family financial circumstances were reported as upper middle class. His father earned a good income as a glass contractor. Due to the good circumstances Mr. Michael experienced no material deprivations during childhood and adolescence. The feeling of not belonging was sufficiently pervasive that Mr. Michael ran away from home at age 13. The early familial adjustment is best characterized as cold and impersonal.

Mr. Michael's school adjustment is reported as good up to the sixth grade. His own analysis is that as long as he was in the highly structural parochial school environment he did well, when placed in the public school with limited supervision his academic behavior deteriorated resulting in only nine years of formal education.

Mr. Michael's work and military history follow the same pattern as that noted for education. Spotty, irregular and disorganized.

In summary, the history is one of poor adjustment, disorganized thinking, impulsive behavior and a characterological adjustment. All things considered, he looked like a poor risk for treatment. This perception was inaccurate.

II. Intellectual and personality factors

Mr. Michael is functioning intellectually in the superior range (Revised Otis Beta). His intellectual capacity is such that any career he embarks upon he can succeed at. This tested capacity has been verified by his performance in the therapeutic community. In only nine months he obtained the knowledge required to become a credible therapist and was promoted to the position of community chief coordinator. He held this position for six months and gave it up voluntarily—a feat accomplishable only by someone who has an excellent grasp on reality. This brings us to the personality factors.

Initial testing of Wayne Michael depicted a very defensive hostile individual who evidenced bizarre thinking with characterological and depressive components (MMPI). His last test is valid and well within normal limits. The only deviation is the scale which assesses previous deviant acts. Had this scale dropped below normal limits faking would have been suspected.

Testing on the C.P.I. reveals a picture encompassing a much improved self image, strong reliable emotional controls, strong socially appropriate achievement orientation and good tolerance and flexibility. It is an extremely healthy profile.

The magnitude of the changes Mr. Michael has made is a tribute to his desire to give up the self destructive life path he had chosen.

III. Summary

Based on the initial interviews and early behavior this subject appeared to be a long term intensive treatment case. The term marked improvement is such an understatement that exceptional would be more appropriate. This person does not resemble the Wayne Michael I encountered over a year ago. Any consideration we can give this individual is appropriate. He is definitely one of our cures.

U.S.P.-Marion, Ill.
September 16, 1975

Ron Thompson, Case Manager.
Thru: J. S. Petrovsky, Chief, Classification and Parole.
C. Kenneth Bowles, Ph.D., Coordinator of Mental Health Programs.
Periodic Report on Michael, Wayne J.—Reg. No. 95417–131.

Mr. Michael has functioned as a Psychiatric Treatment Assistant for the Mental Health Department since early in June of this year. He was one of two residents who has qualified for and been appointed to this position since its inception approximately three years ago. Mr. Michael is a trained lay-therapist and a candidate for Clinical Membership in the International Transactional Analysis Association. He has been an active participant in the Asklepieion Therapeutic Community for approximately one year, and has received therapy, training, and supervision on a daily and weekly basis from the Mental Health staff and consultants to the Mental Health Department. During five months of that time he functioned as the Chief Coordinator (resident in charge) of the Asklepieion Therapeutic Community. He has also been an active participant in the Transactional Analysis group psychotherapy program at USP-Atlanta prior to his transfer to USP-Marion for the Asklepieion Therapeutic Community program.

During his appointment as the Psychiatric Treatment Assistant for the Mental Health Department, Mr. Michael has been under the direct supervision of Drs. Robert Carr, Kenneth Wilson and myself. Throughout that time he has displayed a very professional attitude in relationship to the responsibilities of his job. He has further demonstrated his skill as a Mental Health para-professional, and continues to do an outstanding job.

Based on information from his Central File, the history he gives of his early development, and the original psychological test information available on Mr. Michael, it is quite apparent that he had belonged to that group of individuals who have repeated difficulty in society as a result of eccentric thinking as well has hostility toward authority figures. It is also quite obvious from recent psychological testing and in-depth observation by myself, other Mental Health professionals and correctional staff, that he has received effective treatment and has resolved the major social and psychological difficulties that led to his incarceration. He is a very intelligent individual with a high potential for achievement, who can be expected to continue in this new-found winning life style.

E–4

MINNESOTA STATE PRISON,
DEPARTMENT OF CORRECTIONS,
Stillwater, Minn., February 23, 1978.

MR. NORMAN CARLSON,
Director, U.S. Bureau of Prisons,
U.S. Department of Justice,
Washington, D.C.

DEAR MR. CARLSON: I am writing to you at the request of and in support of Wayne Michael, an inmate at Minnesota State Prison in Stillwater, Minnesota. As Prison Psychologist, I have frequently been in contact with Mr. Michael over the last year. I have had occasion to observe his behavior and overall functioning in a variety of situations, from social occasions to those of extreme stress. In all cases, his behavior has been consistently appropriate and stable: he has acted intelligently and in a manner befitting individuals in good control of their behavior and themselves.

My overall impression of Mr. Michael is that he has become a competent Asklepielon therapist, able to deal with complex, often tense situations, and extremely capable of sustaining himself psychologically, emotionally, and behaviorally as a productive member of society. I would actively support any activities to review his case, since I feel he is no longer the same person who was convicted seven years ago.

Sincerely,

STAN ROSENTHAL, Ph.D.,
Clinical Psychologist.

Senator HATFIELD. Mr. Tucker, we do not want to leave you out. Would you care to make a statement?

Your statement in its entirety will be made a part of the record.

[Mr. Tucker's prepared statement follows his testimony.]

TESTIMONY OF KARL TUCKER, ADMINISTRATOR OF TREATMENT PROGRAMS, ARIZONA DEPARTMENT OF CORRECTIONS, AND PRESIDENT, BOARD OF CORRECTIONAL PROGRAMS AND STAFF DEVELOPMENT

Mr. TUCKER. That is all right. I am used to being left out while being with these people. It is much more interesting to listen to a Monte MacKenzie, a Wayne Michael, or a Bill Smith than it is to a straight administrator of a corrections program.

I am here today because I am administrator with the Arizona Department of Corrections for treatment programs and staff training. Also, I am president of the board of OK Community, which is the street program of which Monte MacKenzie is executive director. It is a followup program to Bill Smith's program for Fort Grant.

I would like to quickly address a few points and then answer any questions you may have.

First of all, as a therapist and treatment programs person, I am looking for programs that work with anybody—even part of them part of the time. It has been a difficult search.

When Monte came to Arizona 4 years ago, he told me about Marion. Like Cliff Anderson, I went back to the Marion Institute, May 1975. I found not a panacea but it sure is effective for those who will participate.

I agree with Yale Simons that 50 percent of those whom we see in Arizona, if they reached the point of "want to," could benefit greatly and not go back.

Senator HATFIELD. Is the OK community completely in the institution?

Mr. TUCKER. The OK community is a foundation, actually an umbrella, Senator, that has the capability of initiating and operating various programs. One piece of the program is the Durango jail program, which is a therapeutic community but it is short term because it is a jail with sentences of less than a year.

We also have a clinic, which is an outpatient, counseling program. There are groups at night. There is individual, one-on-one counseling.

We hire a number of the ex-offenders at Durango or Fort Grant who work as counselors. They go out and make a tremendous number of speeches every year to schools, to communty groups, et cetera.

There are various resources operating in the community. The most vital one, of course, is that it is a place where individuals who have that "want to" can go, whether they have participated or not. We have a number of individuals come to the clinic and participate in programs who never went to an institutional therapeutic community. They hear about it, one way or another, they come to the community and say, "Hey, I need something. I do not intend to continue the way I am." They come in and enter in to the best of their ability on their own.

One of the most important things that I have heard here today—and Mr. Carlson mentioned this as did John Moran, Monte Mac-

Kenzie, Bill Smith, and Wayne Michael—has been this training aspect of the program. Sure, it is a treatment program but the key, if there is any magic at all, has to do with people such as Wayne, Monte, and the like. They are committed.

I went through the Marion Institute. I found that I want staff on my treatment programs who can do this and who will replicate it.

As an individual, I would maybe aspire to be a director and run a program such as this because it is a winner, but I don't think I could keep up with them. I am not as dedicated as they are.

As Yale Simons mentioned, I am not nearly as perceptive or creative. I have never been in jail. I am not an ex-offender. I find myself one down, to a certain extent, in that area. Working with them, I think that I could be effective.

I constantly see the need to recruit from those who are graduates of this type of program in order to give them as much opportunity as possible to continue their training and have opportunities to run programs. Right now that is missing except in the case where they go to Monte and they work on our staff.

I would see as one of the components to be built into this bill, either as a satellite or whatever, the capability of picking up and continuing the training of those who are graduates of the program who wish to become future directors, therapists, and counselors.

Senator HATFIELD. You are the administrator. The bill provides for separate administration. Do you see a need for that?

Mr. TUCKER. I certainly do. There is a need for continuity, as Senator DeConcini mentioned. It is a need in any correctional program. I am not talking about continuity from day to day but from year to year to year.

We are missing something constantly. I sit down and write a proposal for a new program. They say, "OK, what success have you had in other programs?" You will find little, fragmented pieces of information, such as, "This program lasted for about 6 months or so," but where is the longitude here? Where is the followup? How do you know it really works?

If you sit down with a tough evaluator who knows his data, he can poke holes in any piece of data that we have.

Just for reaching a point of sophistication in the program in corrections, we need that continuity. That alone is enough to justify an administration that can assure that.

Also, the problems can easily magnify beyond reality as to the type of program this is as a part of any one of the prison programs, State or Federal, in that we actually accentuate the operation of the prison; we complement it.

I see the administration as in the bill not having a whole lot of trouble in troubleshooting—coming in and having big flaps and so forth.

Also, the bill does specify that the warden will participate. It is his choice as to whether the program is going to be in his prison. Those who would allow that are going to be enlightened, hopefully.

As Cliff Anderson mentioned, before a warden will participate in a program, he should get involved and go to an institute, one of these 5-day institutes such as I participated in, and as Cliff and others

did. That would be a big step in the direction of not having the difficulty of separate kinds of programs.

[Mr. Tucker's prepared statement follows:]

PREPARED STATEMENT OF KARL W. TUCKER

As an administrator of correctional treatment programs, I have diligently been in search of a correctional treatment program that will work consistently for at least some of our clients. Three years ago, I discovered such a program. I attended a five day institute in the Asklepieion Therapeutic Community, Marion, Illinois. I discovered that for those inmates who have a "want to"; i.e., want to change; want to be; want to take charge of their lives; this is a correctional program that really works. Working with Monte McKinzie, Yale Simons and others, we have established two institutional programs similar to the Marion Community and a street program that provides follow-up support in the community. At the present time, I am the President of the Board of Directors, O.K. Community, Inc., a private foundation that operates institutional and street treatment centers in Phoenix, Arizona.

S. 3227 is an exciting next step in expanding this successful program to ten Federal prisons, so that at least 250 men per year who have a "want to" can become winners.

Section 4063 (b) provides for the expansion of the original ten communities by the training of future therapeutic community directors as one product of this program. To date, Asklepieion Therapeutic Community directors have been graduates of treatment programs utilizing the Asklepieion model as well as traditionally prepared professionals. The ex-offender directors are successful for the following reasons:

As a member of a therapeutic community for one to eight years, the graduate has (1) reached a high level of psychological health, (2) has incorporated the day to day therapeutic community regiment into his personal time structuring, (3) has been trained and interned in a wide variety of therapeutic modalities and program process within the same basic setting that he will function as therapist and administrator, and (4) as an ex-offender and graduate of the very program that he administers, the inmate members of the program tend to give him a high level of potency.

Conversely, this training and orientation, while incarcerated, does not provide the graduate and potential director of a therapeutic community with:

(1) Six months to a year to reestablish himself back in the straight world; i.e., family, community, etc.

(2) Experience and confidence in working with correctional staff as a peer rather than inmate to correctional staff.

(3) Administrative training and experiences concerning those aspects of the operation of a correctional program, that could not be handled by an inmate; i.e., community relations, budget, personnel, etc.

(4) Treatment program development, management, and evaluation skills that are unique to each individual therapeutic community established by S. 3227, as well as other correctional programs that the new director did not experience as an inmate.

Traditionally prepared, non-ex-offender directors have the same problems as the ex-offender, only in reverse. A mixture of ex-offender, straight director trainees would be productive for exchange of knowledge/experience during training as well as flexibility in the operation of the therapeutic communities proposed by S. 3227.

I propose that a twelve month training program be established to graduate ten therapeutic community directors per year for the duration of S. 3227 (September 1, 1986).

I would like to thank the Subcommittee for hearing my testimony and especially thank Senator DeConcini for believing that people can change, and caring so much that he would introduce this bill. Thank you.

Senator HATFIELD. Wayne, you said you thought there should be a separate administration. Would you elaborate a little bit more about why you think that?

Mr. MICHAEL. Yes. I will give you an example. That is why I am here. I am a good example.

The years have shown that wardens and other people who evaluate people with certain behaviors over a period of years can predict certain behaviors in the future. I am different than that. They cannot predict my future behavior. I have been consistent for 4½, going on 5 years now. Anybody who would look at my record prior to that would say there is no way. Psychological evaluations have said that I am a poor risk for treatment. It turns out that that is not accurate in this case.

I wrote and received a $50,000 grant in Minnesota to establish a program at the reformatory there. One of the parts of that was for me to go there as the role model inmate for those younger guys. The State of Minnesota was very comfortable with my being moved to that other institution because its security is as good as the one I am in, but permission for that to happen had to go to people who have no idea about me and my change. All they have is that record to look at that says this guy has behaved this way for so many years. Then the existing attitude is that it is doubtful that he has changed, or they think that he has conned somebody.

It was suggested that they just give me a 3- or 4-day furlough and let me come up here and testify and go on back. I agree with the hesitancy. I know that I would have come up here and would have been back to Stillwater when they said to be there if the plane got there on time, but it is hard for them to believe that. I understand that.

If we have this separate committee, evaluative board, or whatever, that could at least influence when one of our unit managers says this guy is ready, then this committee can influence the powers that be to go ahead and, if it is a risk, take that little risk and move the guy so that he can start the next program, work at the next program, or whatever it is they want him to do. That is where I am seeing an extra administration. That is my idea of it. They would have that kind of influence.

I am not saying that it should necessarily be pure power to do something but at least they should have that kind of influence.

Senator DECONCINI. I have a lot of questions. I have talked with these gentlemen before, except for Mr. Michael. I could go on for weeks, too, but the record is fairly well put here.

However, I would ask that the chairman permit any additional information that they might want to send to us within the next week, or whatever the time frame may be for the committee, in order to include some information about their rules and regulations and even other participants.

Senator HATFIELD. Without objection, we will certainly be glad to get any additional information.

Mr. MACKENZIE. Mr. Chairman, I would like to say one thing which I forgot. I get so carried away with what we are doing that sometimes I discount people who have been valuable to us.

We are a little program that functions in Arizona, Minnesota, and wherever little programs such as ours can establish themselves. We are not able to expand. We are not going to be able to change directions without people like Dennis DeConcini who takes an interest, goes to see the program, goes and participates in it, becomes involved, and convinces people such as you, Senator Hatfield.

If you people do not hear us, we are not going to go anywhere. We can change corrections but we can't do it without your help.

Senator DECONCINI. I thought you would never get around to that, Monte. [Laughter.]

Senator HATFIELD. There is one question that has not been brought up here. Judge Collins is interested in juveniles. I am aware that this has been attempted to some extent in juvenile areas.

What is your experience or knowledge of how effective it has been with juveniles?

Mr. MACKENZIE. I would like Bill to address that.

Judge Collins and I are friends. We are involved and have discussed my going to Tucson and getting involved in some juvenile programs.

I am not a juvenile counselor. I am not equipped. I would like to talk to some of the people who would know more about juveniles.

Perhaps Bill could address that more than I. I really cannot answer your question.

Mr. SMITH. I have not worked specifically with those under 18. I have worked with 18-year-olds and college students in that same age category.

I do plan to enter that area. Nine years is an infancy and I am just permitted now to start doing some of the things I would like to do. I have no hard data to share of any accomplishment with juveniles.

Senator DECONCINI. You do not have any reason to think it would not work, do you?

Mr. SMITH. On a personal basis, I know of children that TA clinicians have worked with and they have been successful. The opportunity has not presented itself for us.

Mr. MICHAEL. In Minnesota right now we have the Asklepieion Northwest Foundation. There is Centennial Junior High School. That is kids who I believe are in sixth, seventh, and eighth grades. We did two quarters of work with what they call their SWAT classes. It is kind of like that TV program. They really like it.

Unfortunately, our director is the guy who has been putting a lot of time out there and he cannot put enough time in there to suit them right now. They are really having what they say is fantastic success with our model of dealing with people. They want more of it.

Senator HATFIELD. Thank you all.

I agree with what Senator DeConcini says because I could certainly go on all day talking with you, too, without any trouble at all.

Thank you all so very, very much. We would appreciate any additional information you wish to put into the record.

The next witnesses are Doug Perasso and John Williamson. Doug is from Washington, D.C., and John is from San Rafael, Calif., from the Lifespring Foundation.

TESTIMONY OF JOHN WILLIAMSON, LIFESPRING FOUNDATION, SAN RAFAEL, CALIF.

Mr. WILLIAMSON. Thank you, Mr. Chairman and Senator DeConcini.

Doug came down with the flu this morning so I am here alone.

I appreciate the opportunity to be invited here. I have been invited as a representative of an organization that conducts large-scale, personal awarness training to the general public. Also, we have been involved in several prison trainings in the State of Oregon.

As Senator DeConcini mentioned earlier in his opening remarks, the approach that organizations such as ours tend to use is somewhat different than the therapeutic orientations that you have heard about this morning. The trainings with which I am associated and which Lifespring conducts are intensive trainings for large groups of people, meaning groups of people that generally range between 50 and up to 200. Other organizations, such as EST which you will hear from tomorrow, have trainings designed for up to 300 people.

I have prepared some formal remarks and have included some background information for you that go into some depth on what these trainings are about, the theory behind them, and the approaches that we use.

Also, I have put together the research that we have about their effectiveness in areas that are of importance to this committee.

I would like not to dwell on those today, but to confine my remarks very quickly to some points that may be of assistance in considering the draft of this bill.

Senator HATFIELD. The materials you have submitted will be made part of the record.

[Mr. Williamson's prepared statement follows his testimony. Material submitted by Mr. Williamson will be found on p. 183 of the appendix.]

Mr. WILLIAMSON. There are four general areas on which I would like to comment in the bill. These have to do with the use exclusively of the therapeutic language in the bill, the limitation of the programs to the training of inmates in the community, the possibility of using outside resources in intensive ways, and the idea in the bill of forming small, segregated communities and the fact that that may not be necessary in all cases.

As Senator DeConcini has mentioned, there have been major advances in therapy and in other areas associated with what is called the human potential movement in the past two decades.

The last 20 years have really been very confusing ones because we are in an era now where the conceptual and territorial boundaries of what we mean by therapy are really very ambiguous.

As the bill acknowledges, there have been major advances in therapy. These generally have been major advances in therapy. These generally have to do with utilization of small group processes and expansion of some of the theoretical orientations to therapy.

What has also happened and what makes all of this confusing is that over the past 20 years there has been a great deal of advance in nontherapeutic approaches to emotional development and behavioral changes. These orientations tend to be more educational. There are some orientations that come more from the arts. There are some orientations that end to have more of an eastern flavor to them, such as meditation techniques and other spiritual types of practices.

Therefore, it really is not accurate to think that all of the advances that have been made are exclusive to therapy. Although therapy as a

word is being used pretty loosely today, when it is given a technical meaning in legislation, it might tend to restrict the application of some of these other approaches beyond what the purposes of the bill intend.

I know that the trainings that Lifespring conducts and those that EST conducts, and other such organizations that do these large-scale trainings, it really is not accurate to call them therapy approaches. There is nothing inherent in the approach that assumes that there is any sickness or any deficiency from a medical point of view. The emphasis of people and their unlimited capacity to grow, no matter what situation they are in.

One of the unfortunate things that I think has happened in our society over the past three quarters of a century as psychology and therapy have gained prominence, is that we assume that any orientation toward a person's emotional development is necessarily therapy. It is interesting to note that traditionally in our society and in western culture emotional development and behavior changes have been the domain of education and not of medicine.

I would recommend that the committee do look at the possibility of broadening the scope of the language to include nontherapeutic approaches.

Another limitation of the language of the bill—and it has been mentioned several times in other people's testimony this morning—is the limitation of the trainings to the inmate population. What we have found in our experience in prisons but also in the general public is that what we are dealing with here is just not one person's dilemma. We are dealing with that person in a family, that person in a community, that person within a prison environment.

Particularly, if we can take the therapeutic connotations out of the program, then I think it would increase its value if we can talk in terms of prison officials, prison families, followup outside of prison, and so forth.

Another recommendation that I would make is the possibility of including at least the possibility in demonstration projects that there might be others besides just prisoners involved in this kind of program, including prison officials.

From our experience, I know that once a person is able to get through the feeling that if he enters a program such as ours it is because he is somehow sick or needs help and realizes that it is just a commitment to himself to grow emotionally and personally, then he becomes very committed to doing that. It takes the sickness orientation out of it.

The third comment is that it appears from my reading of the legislation that the language of the legislation right now restricts the use of resources to the type of program that might be conducted by the director of the program with a small group of prisoners. In other words, it does not seem to permit the employment of outside intensive resources, such as organizations like Lifespring, EST, or other organizations that are competent in short term, intensive kinds of training.

I would just recommend that the committee do take a look at that as a possibility of coordinating that with the longer-term approach that is implied in the bill.

Finally, the notion of segregated communities, therapeutic communities, might be expanded in the bill. If you assure that the ap-

proach is going to be used is therapeutic—in other words, a small group over a long period of time—the notion of a segregated community that is relatively stable over a long time seems to be the only way out.

On the other hand, if you think that there are other approaches that might involve larger groups of people—50, 100, or 150—in a smaller span of time, then it seems to me that what we might be talking about in terms of therapeutic communities could be made more flexible, depending on the particular program that a prison chooses to employ. In other words, we might be able to assist more of the inmate population if we do have a program that flexibly uses these large group strategies.

That pretty much is what I have to say about the content of the bill.

Again, I appreciate the opportunity to be here. Anything that I or my organization might do in furthering the work of the committee, we would be glad to assist you in any way. Thank you.

Senator HATFIELD. Senator DeConcini?

Senator DECONCINI. Your programs are mostly involved outside of institutions?

Mr. WILLIAMSON. That is right. Our organization is primarily a training program for the general public. We have a private corporation and then an associated foundation. I am president of the foundation. The purpose of the foundation is to conduct similar trainings in areas of social importance, such as prison reform.

Senator DECONCINI. Have you been awarded contracts or are you presently under any contracts to work with any institutions?

Mr. WILLIAMSON. In prisons in the last 3 years, between 1974 and 1977, we have worked with the Oregon State penitentiary system. We are not currently under any contract.

Senator DECONCINI. What did you do with them? Is that in your statement? If it is, I will let that question go.

Mr. WILLIAMSON. Yes.

Senator DECONCINI. The training that you do give or the program that you do have—say, the program that you had in Oregon—how does that differ from therapy?

Mr. WILLIAMSON. Like I say, there are several differences actually. One is the underpinnings do not assume that there is any sickness involved here. We are not involved with people who necessarily have anything diagnostically wrong with them. Their negative behaviors and negative attitudes are based on really a life script. What is important about our orientation, and what the participants of the program seem to experience during training, is that they realize that they literally made up that life script and that they are fulfilling it in their behavior.

In contrast to some of the other statements that you have heard this morning, we tend in our training to take them out of their everyday life and put them into a 4-day essentially simulation, so that they can get past the beliefs that have to do with particular day-to-day dilemmas and realize that there is an underlying pattern to it all that they made up.

What happens is that the trainings that we conduct and which other organizations conduct are not focused on particular problems that a prisoner might have or that anybody might have, but really the real-

ization that what controls their lives is a script that they have made up, and it is not necessarily true.

Senator DeConcini. You leave me with the impression that you think there are some connotations from the term "therapeutic community" of illness. How do you come to that conclusion?

Mr. Williamson. In its traditional use, therapy has been associated with the medical notion of sickness. What I am concerned about is not your particular interpretation of it, because in your floor comments and other things that I know about it, that is not necessarily true for you. However, there is a good deal of feeling in the country that the traditional use that we mean of therapy connotes sickness.

Senator DeConcini. Is there a better word?

Mr. Williamson. I think personal growth or personal awareness is better.

Senator Hatfield. I really do not have any specific questions.

Mr. McPike. Mr. Williamson, could you tell us how the trainings that you give in prison would differ from the trainings that you give on the outside?

Mr. Williamson. What we do on the outside is the timing of the training conforms with people's everyday lives. One of the things that we do in the prison is to focus it more intensively on 3 full days rather than spread it out over the normal 5 days.

The training was essentially the same as the public training because we do not focus it on particular problems that people have or their particular lifestyle. We concentrated the training in a more intense period of time.

Mr. McPike. We have heard some of the terms used by Mr. MacKenzie such as bioenergetics and transactional analysis. Can you tell us what types of modalities you use in your training?

Mr. Williamson. These personal awareness trainings use a variety of approaches. Again, our approach is quite a bit different than the EST approach about which you will hear tomorrow.

Ours tends to be more eclectic and more involving the participants. About 25 percent of our training generally is the trainer lecturing about some concept. About 50 percent of the training is participatory. That would include everything from fantasies, closed-eye subjective processes, to one-on-one what we call dyads which just explore people's feelings in different simulated situations. We use some games, some role-playing situations, group discussion, and a considerable amount of group sharing not only with the trainer but among the participants.

Mr. McPike. In the prison trainings you conducted have you done any evaluation of the results?

Mr. Williamson. The evaluation data that I have submitted with the testimony is primarily data that has to do with the effectiveness of public trainings. That is a rather considerable evaluation study that we have conducted.

As far as prison trainings are concerned, there was no formal followup so we do not have objective data. We have a considerable amount of anecdotal data, voluntary statements from prisoners, and so forth which seem to indicate that the results are at least consistent with what we have gotten from the general public. Our general public results seem to be that the effects are quite long term and lasting.

Mr. McPIKE. I have no further questions. I would like to thank you for being here.

Mr. HART. Mr. Williamson, thank you very much for your testimony.

There being no further business before the subcommittee, these hearings will be convened tomorrow morning at 9:30 a.m.

[Mr. Williamson's prepared statement follows:]

PREPARED STATEMENT OF JOHN N. WILLIAMSON

In the last few years several national organizations have been established that offer large scale personal awareness trainings to the general public. These trainings typically involve between 50 and 250 participants and are concentrated over a four or five day period. Several hundred thousand people have participated in such trainings with apparently quite beneficial results. In a few cases these organizations have extended the scope of their efforts by providing trainings in areas of major social concern. These areas include, for example: the elderly, unemployed youth, the poor, and the imprisoned. I represent one such organization that has extended its efforts. In this testimony I will discuss what we have learned about the effectiveness of personal awareness trainings and develop some implications of this experience for the proposed Therapeutic Communities Act. I will direct my comments in particular to three issues:

1. The point of view that underlies many of the personal awareness trainings relative to emotional development and behavior change.
2. What we have discovered about the effectiveness of these trainings in emotional and behavioral areas of major concern to the Subcommittee.
3. The implications of the personal awareness training perspecitve for the Therapeutic Communities Act.

THE POINT OF VIEW OF PERSONAL AWARENESS TRAININGS

Large scale personal awareness trainings are a recent outgrowth of the so called human potential movement. This movement has been developing and gaining increased public and scholarly acceptance for the past twenty years. The major personal awareness trainings such as Lifespring do not derive from a particular psychological theory or philosophy. Rather their roots generally are less formal and more practical. The trainings reflect a positive view of people and their capacity to improve their experience of life. In this sense the trainings are consistent with the work of a number of modern educators and psychologists including Abraham Maslow, Fritz Perls, Gordon Allport, and Carl Rogers.

Personal awareness trainings are not trainings in the usual sense of the word. There is seldom specific content to be learned, information to be understood, or specific behaviors or attitudes to be mastered. Rather these trainings derive from the point of view that significant personal growth comes as a result of self awareness and acceptance. Consequently, awareness trainings are designed to provide an environment or context in which participants discover and observe the inner source of their experience of life. This environment can be created in a number of ways. Lifespring trainings, for example, are quite structured, and employ a variety of proven and accepted techniques. These techniques include short lectures, meditation, visualization and fantasy processes, group sharing, role playing, two person and small group exploration processes, games, and peer feedback. (For a more detailed discussion of the Lifespring Basic Training see the accompanying question and answer brochure).

The idea that the source of ones well-being, of appropriate behavior and attitudes, is within rather than outside in the form of information to be learned, skills to be mastered, and particular attitudes or beliefs to be assimilated contrasts dramatically with traditional educational and therapeutic practice. Trainings such as Lifespring are based on the notion that we literally create our experience of life based upon our beliefs about ourselves and how we expect the world to react to us.

Scientific exploration of the idea that our ordinary awareness of life is a personal construction and not a direct snapshot of external reality is probably the most active research trend today in the psychology and the psysiology of consciousness. This research is demonstrating that our perception of the world is

filtered. We select only a small percentage of the input that the universe offers. We interpret this filtered input through categories, or a belief system. What we relate as our experiences then are the categories rather than an objective reality. In other words, we experience what we believe we will experience and we conclude that we are these beliefs. Life is literally a self-fulfilling prophesy. If we believe that the world is out to get us we will experience ourselves as a victim. If we believe we are worthy of love, we will experience ourselves as loving and create loving relationships. If we believe we are powerful we will do what it takes to create results in our lives. If we believe we cannot produce those results we will do whatever it takes to confirm that belief and fail. From this point of view the critical issue that must be addressed in programs designed to rehabilitate prisoners are the limiting unconscious belief systems of the prisoners, their families, their communities and the prison staff. If the prison staff unconsciously believes that the prisoners are incorrigible or that prisons can not constructively succeed nothing they do will work. All their efforts to the contrary will be shallow gestures. If a prisoner believes he or she cannot succeed, no reform strategy will overcome the resistance. The fallacy of the vast majority of reform efforts in this country has been the failure of our common sense point of view to recognize that the critical variables in change are not the resources available or the program strategies employed but rather the limiting personal beliefs of the individuals involved.

The intent of the major awareness trainings is not therapeutic in the traditional sense. It is not to deal directly with the content of peoples lives, with their specific beliefs, or with the problems that result from their filtered perception of life. Nor is the purpose, as it is with many modern therapies, to break through these beliefs so that the participant can experience reality more fully and directly. Rather the purpose of the trainings is to provide an opportunity for participants to experience themselves beyond their particular belief system—to experience that they are the source of their beliefs. In other words, to experience that they have beliefs, that they literally made them up, and that they are not their beliefs about themselves. This experience of a self beyond beliefs is a profoundly liberating one that appears to transform virtually every aspect of a person's life. In the next section I will discuss the impact that such transformational experiences seem to have in areas of particular concern to the Subcommittee.

THE EMOTIONAL AND BEHAVIORAL EFFECTS OF LARGE-SCALE PERSONAL AWARENESS TRAININGS

To my knowledge no substantial independent research effort has been attempted to assess the emotional and behavioral impact of large scale personal awareness trainings. Consequently, I will restrict my comments to reporting the results to date of an evaluation study that Lifespring began in October, 1977.

The study was designed by Dr. Everett L. Shostrom to measure the short and long term effects of the trainings in several areas:

1. The level of an individual's intrapersonal actualizing behavior.
2. The individual's capacity to form and maintain caring and healthy relationships.
3. The degree to which the individual's personal growth is balanced.
4. Specific changes in the individual's life six months after completing the training. Life changes are assessed in terms of: quality of relationships, life goals and career; physical health, dealing with negative feelings and stress, spiritual attitudes, self concept, and service to community.

The reader should refer to the documents accompanying this testimony for a detailed discussion of the evaluation program and specific findings. (In particular, refer to the documents titled "The Personal Orientation Inventory," "The Love Attraction Inventory," "Growth Process Inventory," "A Preliminary Report on the LIFESPRING 6-month Followup Evaluation Project," "LIFESPRING Questionnaire Preliminary Analysis and Comments from Graduates)". While the results discussed in these documents relate only to the LIFESPRING trainings, they are indicative of the type of impact that can be expected to result from high quality personal awareness trainings.

The study evidence indicates that large scale personal awareness experiences such as the Lifespring trainings appear to have an exceptionally significant long term beneficial affect on participants in a wide range of emotional and behavioral areas related to the purposes of the Therapeutic Communities Act. For example,

Shostrom's inventory results and follow up questionnaire report data indicate that graduates from the trainings:

1. Experience life more realistically in the present rather than the past or future.
2. Are better able to use good judgment and flexibility in applying values and principles to life.
3. Are better able to see opposites in life as meaningfully related rather than as antagonistic.[1]
4. Have stronger more caring relationships with their parents, partner, children, friends, and employer.
5. Have more clarity about major goals in their life.
6. Are more productive at work and achieve greater results.
7. Are physically healthier.
8. Are better able to reduce stress and express negative emotions constructively.
9. Experience being accountable for their lives rather than the victim of society or circumstance.
10. Are more in touch with their spiritual side.
11. Are more likely to keep agreements they make.
12. Experience life as more satisfying and easier.

The reader is reminded that the results of this study reflect the impact of the training on the geenral public participants not on a segregated prison population. However, there is some evidence that these results may not be out of line with what could be expected among federal prisoners. Between 1974 and 1977 the Lifespring Foundation conducted three trainings for inmates at the Oregon State Penitentiary and two trainings at the Women's Correction Center in Salem, Oregon (See enclosed information on these trainings). Although there was no follow up evaluation on these trainings, voluntary self reports from inmate trainees and prison officials are quite consistent with the findings of the formal general public evaluation (See enclosed sheet titled "Comments on Foundation Training at the Oregon State Penitentiary").

Given the experience and evidence to date it would appear as if large scale personal awareness trainings potentially may offer a valuable approach to improving our prison environments and to reducing the rate of recidivism among prisoners.

IMPLICATIONS FOR THE THERAPEUTIC COMMUNITIES ACT

The Therapeutic Communities Act is very constructive. It represents a positive effort to reduce the rate of recidivism among federal prisoners. And it is a recognition by the Congress of the potential social benefits or recent advances in therapy and the human potential movement. In the following paragraphs I would like to discuss some of my specific reactions to the bill as it is presently drafted.

Exclusive use of therapeutic language

We have entered an era where conceptual and territorial boundaries in the personal growth area are not well defined. As the bill acknowledges there have been major advances in therapy in the last two decades. These advances have included the development of group therapeutic approaches and a tremendous expansion of theoretical orientations toward mental illness. Yet significant advances in the personal growth movement have also come from other directions besides therapy. These other directions include education, the arts, and traditionally Eastern meditative and spiritual practices. The non therapeutic directions have tended to emphasize an individual's unlimited potential for health and well being rather than the deficiency or sickness orientation that is inherent in the concept of therapy. Much of the best work within the human potential movement, of which Lifespring and other large scale awareness trainings are representatives, cannot accurately be classified as therapy (See enclosed document, "The Lifespring Training: Is it education or is it therapy?").

I propose that the language of the bill be extended or clarified to recognize the high quality non therapeutic approaches to personal growth that have been developed recently. Some of these approaches have tremendous and obvious value

[1] A number of studies of prisoners using Shostrom's Personal Orientation Inventory indicate that convicted felons are often distinguished by low scale scores for this and the previous two traits. See Robert R. Knapp "Handbook for the Personal Orientation Inventory." San Diego: EdITS, 1977. pp. 58–60.

for the purposes of the legislation. It would be unfortunate if the purposes of the Therapeutic Communities Act were jeopardized or diluted by an unintentional limitation in the bill's language that would eliminate quality non therapeutic training approaches.

Limitation of program to inmates

The current bill provides only for the involvement of inmates in the program. The problem of getting beyond negative belief systems in prisons is not limited to the inmates. What is involved is an interlocking conspiracy of beliefs among at least the inmates, prison officials, and the inmates's families. Our experience has clearly been that personal awareness programs are more effective if as many people in the support environment as possible are involved in the program. I would propose that the language of the bill be extended to include the possibility that prison officials, and the inmates' families be involved in the program in some significant way.

Possibility of utilizing outside training resources

In its present form the bill would appear to limit formal personal growth activities to those that could be conducted personally by the director of the Therapeutic Community. In other words, the bill would not permit the utilization of short term intensive training resources outside the prison to complement the ongoing group therapy work within the community itself. Short term intensive experiences with appropriate follow up represent a tremendous recent advance in formal personal growth experiences. Again it would be unfortunate if such intensive training approaches were unintentionally excluded by the legislation.

Small segregated communities as an exclusive strategy

The advent of effective large scale intensive personal awareness trainings make it possible to consider a wider range of program strategies consistent with the essential purposes of this legislation. Such trainings make it possible to involve a much larger percentage of the inmate population in the program for a shorter period of time than would be permitted by exclusive reliance on continuing small group therapy techniques. Continuing small group therapy may require the establishment and maintenance of a stable segregated group of inmate participants in the program. The establishment of relatively stable and rigidly segregated communities may not be as necessary for programs involving intensive training strategies coupled with appropriate follow up work. I would propose that the legislation be modified to permit more flexible interpretations of the meaning of "therapeutic community" that would be consistent with the particular training or therapeutic approach employed by the participating prison.

CONCLUSION

Recent advances in the personal growth field are making a significant beneficial impact on the welfare of the nation. I applaud the efforts of Senator DeConcini and others on the Subcommittee to recognize the benefits of these advances and attempt to apply them to the problems facing our prisons. I appreciate this opportunity to testify before the Subcommittee in response to the Therapeutic Communities Act. If I or my organization can be of any further assistance, please let me know. Thank you.

[Whereupon, at 12:01 p.m., the subcommittee recessed, to reconvene at 9:30 a.m., Thursday, August 3, 1978.]

THERAPEUTIC COMMUNITY ACT OF 1978: S. 3227

THURSDAY, AUGUST 3, 1978

U.S. SENATE,
SUBCOMMITTEE ON PENITENTIARIES AND CORRECTIONS
OF THE COMMITTEE ON THE JUDICIARY,
Washington, D.C.

The subcommittee met, pursuant to recess, at 9:38 a.m., in room 2228, Dirksen Senate Office Building, Senator Paul Hatfield, chairman of the subcommittee, presiding.

Present: Senators Hatfield and DeConcini.

Staff present: Timothy Hart, chief counsel; Timothy K. McPike, counsel; Edna Panaccione, chief clerk; and Ralph Oman, counsel for Senator Mathias.

Senator HATFIELD. The subcommittee will come to order, please.

Good morning.

This is a continuation of the hearings by the Subcommittee on Penitentiaries and Corrections of the Judiciary Committee on S. 3227, the Therapeutic Community Act of 1978.

This morning our first witness is Ted Long, director of prison training programs, Erhard Seminars Training, San Francisco, Calif.

Good morning, Mr. Long.

TESTIMONY OF TED LONG, DIRECTOR OF PRISON TRAINING PROGRAMS, ERHARD SEMINARS TRAINING, SAN FRANCISCO, CALIF.

Mr. LONG. Good morning, Mr. Chairman and Senator DeConcini.

First of all, again let me thank the subcommittee for its interest in the work in the prisons, as was made apparent yesterday. It certainly is an area that is properly addressed in the amount of time we are spending with it. Thank you very much for your interest and your time.

By way of background, I have some documents which I placed before you which I would like to offer for the record: The American Journal of Correction and the Biosciences articles. I assume that will be acceptable. Rather than go through all of that, if we could just print them in the record, it would save time.

Senator HATFIELD. Without objection, your prepared statement in its entirety as well as those documents will be printed in the record.

[Mr. Long's prepared statement follows his testimony. The articles referred to above will be found on p. 208 of the appendix.]

Mr. LONG. Thank you, Mr. Chairman.

By way of background, I would like to emphasize that EST's principal role and principal function has been in dealing with the public generally. The trainings that we make available in some 21 cities have

been participated in by close to 160,000 people. As I say, they are generally made available to the public.

As an outgrowth of that, we have established a public service program. We have a foundation which we support rather vigorously and out of that a public service program in which we make the training available to institutions such as prisons, medical schools, hospitals, and places such as that as a public service on the part of our expenditures.

Last year we spent close to $2 million as a public service budget offering the training, among other places, in five prisons, most recently in the Alderson Federal Prison in West Virginia.

Also, we have an ongoing program which was just begun with the State of California in the State penitentiary at San Quentin. We have conducted one full program in San Quentin and in the Federal system at Lompoc, Leavenworth, and, as I mentioned, the Alderson Prison. As a result of that, we have had an opportunity to work with a number of wardens, psychologists, administrators, et cetera.

It is really that which I wanted to testify about. It is not so much today that I wanted to make a case for EST. The results that we produced are fairly self-evident.

There is a major study which is now being completed—in fact, should be published this week—by the University of California which did a control study at the last Lompoc Prison training we completed last year. It is a major study which will speak for itself.

Fundamentally, I would like to use a few moments to share with the committee our experience of having been in the training and our enthusiasm for the support of the kind of legislation that Senator DeConcini is proposing.

I must qualify it, however. As Dr. Williamson pointed out yesterday, we would urge the deletion of the therapeutic aspect of the community. I do that only because the word "therapeutic," as you know, is subject to State statutes and also to Federal legislation, of which there is a multitude of interpretations. At best, we are all confused about what it means.

The most recent arguments that we have had is that almost anything seems to be therapeutic these days, including a walk in the park. It might save a lot of implementation problems. We could broaden the base of it and deal with it as a community in which therapeutic, educational, philosophical, and social might rise out of that rather than to try to direct it in a specific area. I would urge you to consider that possibility to allow us the greatest latitude for the greatest amount of impact that we might have. The natural flow will tend to move to those kinds of things that are producing the greatest results.

I would also recommend to the committee, if you have not already seen it—and I note it in our testimony under footnote 1—the Lipton study which was done for the State of New York. It is an incredibly comprehensive report of all the programs up through 1971. It is a 10-year study on prison programs. It is quite good. It will perhaps save a lot of individual research to look at that.

Fundamentally, as we point out in our testimony and as was brought up yesterday, most of what we have done has not been too effective in terms of the rehabilitation programs.

I was reminded by the warden at Leavenworth that we have a 106-year history of correction and fundamentally we have gone through a full circle. One hundred and six years ago the policy was time for crime. We have gone through incredible rehabilitation efforts through education, through attitudinal changing, through behavior modification, and through psychological counseling. We are pretty much back today to time for crime.

We have made the circle and have not produced much result. As was pointed out yesterday, 65 to 70 percent recidivism rates are certainly not anything to be excited about.

Based on our experience in the prisons, we are convinced—and, as I say, the Lompoc study, the Keller study from San Quentin, and the Babbie study which is in the journal article I gave you will bear out—that it is actually possible to produce a result in the prisons. Our notion is that the fundamental thing that has gone unnoticed up until now is this contextual shift.

In other words, we operate for the most part in an institution as if the inmate is somehow deficient or somehow less than those who would like to help him. It is our contention that the inmate is not less than those who would like to help him; he is actually as whole and as able and in addition to that has a behavior pattern or what we would call a belief system, a system of operating, which is inconsistent with the agreements of society.

It is our considered opinion that there is no one in prison who would not like to be out actually. Oftentimes the second, third, fourth, and fifth time offender almost out of a desperation or some inability to understand his or her own behavior is back in.

We estimate education is a program which is participated in by about 15,000 or 16,000 educators. We have been able to make a contextual shift from the notion that the student is stupid and therefore must come to school to learn to a notion that the student is actually able and comes to school to discover. The educational process is more unlifting rather than more drudgery.

As we point out in our testimony, it is our notion that if we could transcend some of these fundamental notions and begin to interact as human beings, whole and complete, then we would actually find that each of us, when it is all said and done, perhaps have the same interest and the same desires to be contributing members of society.

Of the 500 inmates with whom we have had an opportunity to operate—and it is only a 2-year program so I certainly do not want to make any bolder claims than are appropriate—so far in 2 years our recidivism as far as we can tell by personal contact with over 400 inmates is at zero. It is certainly an impressive opportunity. Again, I qualify it by being very clear that 500 of the 20,000 or 30,000 currently incarcerated does not represent a major impact. Nonetheless, it is encouraging.

The passage of the bill is essential because we can demonstrate for sure that the use of a community in a prison certainly aids in institutional adjustment; there is no question about that. The statistics bear that out absolutely.

To the degree which a community has been established—a therapeutic community or any other type, for that matter, such as a drug rehabilitation program or an alcoholic program—within the insti-

tution the institutional problems are minimized. All the wardens with whom I have talked are very excited about that if for no other reason than that they do not have trouble with them while they are on the inside.

However, the carryover to the outside is virtually nil. In some cases it has been demonstrated to be negative. An additional frustration is placed on the inmate. At least it is worth pursuing.

I was looking at this yesterday as I was listening to the testimony. It is hard for me to not think that each time a bill has come before the Senate or a State legislature in terms of prison reform that people were not excited about it.

I have some personal experience with the educational types of rehabiiltation programs, a junior college program or something such as that. Everyone is very excited about it. It reminded me much of yesterday in our enthusiasm for some change that might contribute.

It is hard for me to imagine that at each place along the line people were not as enthusiastic. Unfortunately, after the enthusiasm died, the program was implemented and there were no results. I am concerned that we do not duplicate that.

We have a marvelous opportunity here. After the bill is passed and we get the communities in, I hope we do not merely skim off what we might call the obvious person who would probably make it anyway. As was pointed out yesterday, there is a tremendous amount of fear in prison. There is a certain aspect of it where people will go into almost anything, as was demonstrated yesterday. I hope we do not skim off the top these people who would probably make it anyway and in that way not make the major impact that this type of legislation has to make.

The analogy that the scientist and the physicist often used is that it is not so much what you know but how you know you know. In other words, I am talking about that system which dictates not additional knowledge but that system in which we hold that which we know. I would summarize it as saying that notion by which we interact with one another fundamentally. As we look out, we see another human being. We have that part of us that says something.

That is really what EST addresses itself to. It really addresses itself to this contextual shift. It has been our direct experience that as a result of that all the programs begin to work and begin to produce a value.

We would like to offer that as a part of this legislation. Should the legislation pass, as we certainly hope it will, at that time then address more directly whether EST would be an appropriate experiment or an appropriate group to perhaps have an opportunity to deal with one of these communities and to demonstrate our effectiveness in the arena of the real world.

With that in mind, perhaps I could take some questions.

Senator HATFIELD. Senator DeConcini?

Senator DECONCINI. Mr. Long, would you explain how EST training can make a significant change in a person's attitude and the techniques that are used? I know it is in your statement but I would like to have it now.

Mr. LONG. Yes, I understand. Thank you, Senator.

I do not know if I can explain. I can tell you what I suspect the phenomena is.

We have had a lot of people study it trying to find out exactly what happens. First of all, it is a very intensive experience. It is 60 hours 2 weekends or in 4 days. It is a very intense experience. It is fairly effective——

Senator DECONCINI. Can you give us an example of someone going through—what they do or what they might experience?

Mr. LONG. Mostly what they do is very little in terms of the individual's interaction. Unlike Dr. Williamson's program, most of ours is in the form of lecture. Participation is very voluntary. In other words, we do not make anybody do anything other than be there.

What takes place is that there is an opportunity to examine very personally and very carefully some of our fundamental notions about life. In other words, the participant, without having to do a great deal, begins a process of looking at and seeing that they do see things a certain way.

For example, to use some of the more obvious, an a personal relationship a person begins to see some of those notions that they see with, such as the interrelationship between men and women, the boss and the employee, or the person's relationship with his or her parents. They begin to actually see that it is not so much an inherent condition but actually a way they hold it.

You and I may interact and out of our interaction certain impressions are adopted by me as fact when the truth is that they may be nothing more than my opinion.

As I begin to operate off of these, the fact that it was my opinion becomes more and more lost. All of a sudden I begin to operate as if it were true. All of a sudden I am directly dealing with that.

In the course of the training people begin a process where they begin to see that they have made some of these decisions. They have actually added this to their lives and now they use them to operate with rather than merely as conditions.

For example, we evaluate people. Then after a while, we begin to operate as though all people are like that.

The training seems to begin a process where people actually begin to see that and it becomes self-generating. In physics they would call it a critical mass, where after a while your nature becomes such that you begin to question rather than stumble into it.

Our techniques are very simple. As I say, it is largely structured around looking at some of the belief systems that have been put together and off of which people operate.

There is a great deal of interaction, Senator, where people ask questions and share some of their own experiences. For example, someone may stand up and say, "I just realized that I have been interacting with my wife as if she didn't like me. I have to keep proving that she does." Somebody else will say, "Yes, I am concerned about that, too." There is a lot of that.

Then we have a technique which we call a process, which is an opportunity for a person simply with his or her eyes closed to look at some of the things we have talked about without the interference of the group. It is a very personal, centered process where they do not have to account to anyone. They do not have to explain it or justify

it to anyone. They have the opportunity to look for themselves. I do not think anybody really knows the actual mechanism of what happens.

Given our orientation toward the kinds of things we have done traditionally in human behavior, I think we are going to need new models to actually look into things such as EST. In other words, our traditional notions of behavior and behavior justification—not modification but behavior justification—are really falling apart around us.

Most traditional psychologist today would acknowledge that the Freudian model, for example, has proven fairly ineffective as compared to the humanistic or the behaviorist models. It may be that we need a shift in paradigms to really evaluate things such as this. I know there is a lot of people working very diligently to come up with those.

Senator DeConcini. Would EST be interested in a demonstration project in one of these communities, one existing now or one that might be put together?

Mr. Long. We would be very excited about it, Senator. Again, that is our fundamental notion.

As you will notice, one of the journals, I gave you, that biofeedback communications journal, is engaged in a debate. As they often say in the trade, the proof is in the pudding.

That would be a very exciting opportunity for us. As a public service, we would be most happy to make the opportunity available for ourselves. If the committee and the officials in Arizona felt that it would be worth pursuing, we would be delighted to conduct a program with one of the communities.

Mr. McPike. We are interested in seeing how you see the administrative structure we have established in the bill for the therapeutic communities which are ongoing processes relating to the structure of your trainings which are short-term processes.

Mr. Long. Our initial impact with the prison is short term, but I also think EST has something to offer in terms of a long-term interaction.

For example, in the notes I took from yesterday, one of the things about which the committee was concerned was outside as well as inside prisons, and some of these things.

We offer to you a real opportunity in that we are short term in terms of our impact so that you do not have to have any lingering relationship with us. In other words, we do not need a complicated relationship. It is a one-shot deal. However, more importantly, we can offer a long-term relationship also.

For example, should we go into a community, one of the things we have developed very, very effectively is this thing about ongoing participation. What allows EST to be viable in the world is that on any given week we have 6,000 to 7,000 people who donate their time and services to support EST. It is a volunteer organization. It is an incredible thing.

We computed it. Over 1½ million working hours a year are given to us by people who have found that their participation has produced far more value for them than what their time would have been normally worth in any other sense.

From an institutional point of view, if we were allowed to participate fully with the community, we would come in and do that. It would not be just the training. We would set up what I would term an EST center within the institution. We would have ongoing programs or seminars we can do about money and personal relationships.

As I pointed out in my paper, the things that have really produced results in the prison are the day-to-day things such as how to manage your money. With that contextual shift, there are programs with which we could participate and seminars that we have developed dealing with money and with interpersonal relationships, which I am sure you are aware are a major problem in prison.

We could have that ongoing relationship if there was the establishment of a community. In other words, it would actually allow us to move from our one-shot relationship to an ongoing relationship.

In terms of your question, Mr. McPike, once we have made a contextual shift, it ought to be a social community, it ought to be a philosophical community, it ought to be an educationally oriented community, to then allow the people to participate and actually deal with what I would call down-to-earth, day-to-day issues that are going to affect someone coming out of the institution.

In addition to that, by virtue of the EST network of centers, we certainly are not proposing halfway houses or anything of that sort. I personally have my view on that. Some other time we might discuss it. We do offer an opportunity for the inmate coming out.

We see it now. They can come into San Francisco, Los Angeles, New York, Phoenix, or wherever it might be, and there is a place where people have shared a common experience, where it is very clear that the person is no less because he has been incarcerated but that the person is a whole, loving, complete human being who does not even need to be understood but needs an opportunity to express himself.

That is very exciting to me personally—to see people be able to come out and become part of an effective program that is not dedicated toward making them better. It is dedicated toward an expression of their all rightness.

It goes in line with my thinking about amending the therapeutic aspect—to allow outside people to come in but also allow us to expand our relationship more than being merely an outside consultant. This is our world. As long as there are prisons in this world, each of us has that thorn in our side.

My point is that it would be expanded much further.

Senator DECONCINI. Your written testimony probably says this, but is EST a profit or nonprofit organization?

Mr. LONG. It is a combination, Senator. The fundamental organization is a profit-making company but it is owned by a nonprofit company. We have the benefits of competing——

Senator DECONCINI. Then what do you do with an ex-offender or anyone else who has been through your program in Cincinnati, Ohio, who now finds himself in Los Angeles and comes into your office? Does he have to pay something?

Mr. LONG. We have a staff of some 300, of which there are people paid but our volunteer program is far more extensive.

Senator DECONCINI. If he comes in and does not have any money, or at least he says he does not, in a big city such as Los Angeles or San

Francisco is there usually some kind of volunteer effort in which he can participate?

Mr. LONG. Yes, there is in all of the major cities, in 21 cities.

Senator DECONCINI. If he is a lawyer or a professional person who is transferred and who wants to help, then he comes in and——

Mr. LONG. He would assist in an appropriate place, yes.

We are a little suspicious of lawyers, you understand. [Laughter.] I am a lawyer, also.

The difficulty with it is that there is not a lot of organizations around like EST. Therefore, it is difficult to give you any models off of which to operate.

Our assistance programs are oriented around people furthering their abilities. It is more like an educational experience that it might sound.

For example, one of the things with which we are perhaps more familiar is the hospital where they have volunteers who come in. They actually have a job to do for which the hospital depends on them.

Most of ours are jobs to do on which we are not so much dependent upon but there is an opportunity for people to master certain aspects of life or of interacting with people. It is more of an educational process than it is a "we need help" process.

It has been very, very effective in terms of instilling certain skills with people where, other than on the street, there is no practical place to learn those. Of course, if a person has professional skills, given the size of EST, there are certainly opportunities in many, many areas.

Senator DECONCINI. You are an attorney. Is that right?

Mr. LONG. Yes, I am.

Senator DECONCINI. Could you explain the legal problems just a little bit more about using the word "therapeutic"? I do not quite understand that.

Mr. LONG. Yes. It is usually closely defined by the business and professional codes in various States.

For example, Arizona, Hawaii, and many other States have patterned a lot of their legislation after California's. While it is not always precise, it is a pretty good model.

The models that are set up, as Dr. Williamson pointed out yesterday, are often oriented around some sort of illness or a "not-all-right-ness." Our major problem with it is that it is our contention that as long as we have that as a model, then what we tend to perpetuate or what we tend to prove is the accuracy of the model.

In other words, in scientific research, for example, when a hypothesis is formulated, the experiment tends to bear out the hypothesis.

It does not allow us to transcend some of the notions—in other words, that a person is ill or that a person is not all right—nor does it allow us to deal with some of these educational aspects.

Senator DECONCINI. It probably is very misused then in society today. As you said, people say walking in the park or the lighting or something is very therapy prone for them.

Mr. LONG. Yes.

Senator DECONCINI. Actually that would be a misuse according to your interpretation.

Mr. LONG. Yes.

However, a licensing board often looks at its responsibility to question everything. When you have something that can be broadly defined, oftentimes you have difficulties which arise out of that.

Hawaii has had a lot of problems with that, particularly with some of what we would consider to be the educational and growth movement in general in terms of definition. Where does it fit? How should it be treated legislatively?

As I say, I think we are on the verge of a new classification more in line with what I would call the philosophical or educational approaches rather than the medical model dictating how it ought to be viewed or how it ought to be looked at. We shall see as it develops.

Mr. HART. I have just one question with respect to that. What word would you substitute for "therapeutic"?

Mr. LONG. I would not substitute anything. I would just establish communities within the prison with the intention of rehabilitation.

Mr. HART. In looking at the bill, it requires the director of a community to be a qualified mental health professional. Then it describes in a rather all-inclusive fashion "with training and experience, transactional analysis, gestalt therapy, reality therapy, or other group therapeutic modes."

Mr. LONG. I do not have any particular problem with that.

Mr. HART. Does it create problems for EST?

Mr. LONG. We should not discriminate between inmate and staff. In other words, if we are going to do an EST program in a particular institution, we go out of our way to encourage the staff to participate also. In terms of the program, we are in this thing together and we need to resolve that together. It has been relatively successful.

To that degree, that the head of the community might be a qualified mental health person, I do not have any particular problem. Where I would have the problem is when the only techniques that can be used are "qualified mental health techniques."

Generally speaking, oftentimes we are most influenced by that in which we are most intensively or closely trained. While I do not have any problem with the head of it, the potential problem is in the inability to effectively bring in other techniques that might be in contradiction with what a head might call a qualified mental health technique, such as gestalt or some sort of psychiatric technique. To that degree, it would obviously be a problem because they would say we could not participate in that kind of a program.

However, that may not ultimately be a problem because we may participate as an outside consultant to that particular program. The only problem I have with that is my qualification that we would like to do more. We would like to be an actual member of the community. You are simply limiting your options in terms of what might be done.

I also know that we have to be intelligent about it and that we cannot be haphazard, but the selection process will begin to sort some of that out.

For example, some of the inmates are probably the most qualified people to run some of these programs as far as I can tell. As a general rule, they probably are going to be the least educationally qualified. There are exceptions, of course, but generally speaking an inmate who has really been inspired by a particular program makes an ideal leader but may be the least qualified.

Given a broader scope, they could bring in qualified mental health people, could bring in qualified educators, could bring in qualified consultants, and allow us all to participate in the community under the direction of someone who may not be qualified as a mental health official at all. He might be moving in that direction and he might come out of it that way, but some of my experiences have been that those people make very effective leaders. Obviously it is very inspirational within the program to have an inmate really have the responsibility.

That is what we would do, for example, if EST was one of these communities. We would have an inmate be our manager there, what we would call our center manager and our director. We would organize the whole program for the most part around inmate participation rather than some expert, myself, or someone who thinks he knows something about it trying to run it, but we would make ourselves available on a consultation basis to handle issues as they come along.

Mr. HART. The reason I asked the question was that I think an issue which the committee will ultimately confront is what seems to be competition among the fine therapeutic modes for participation in this program. Of course, if that competition became intense, that would tend to denigrate it in general because it is experimental.

Mr. LONG. Yes, I agree.

Mr. HART. Just as a layman, it seems to me that there is some academic or empirical prejudice among these various types of modes.

If it is strictly a licensing problem——

Mr. LONG. I tend to agree with you. The problem I have is that I think a certain amount of that is healthy because it becomes a cleansing process.

The reason I am hesitating is because the current status of correction, of rehabilitation, is up against that thing which all things come up against before any major breakthrough can be made.

In other words, the physical sciences probably demonstrate it more than anything else. I hate to be Pollyana about it, but it is like the frustration that Galileo, Newton, or Einstein must have felt—Einstein being probably the most recent example—in attempting to tell people that it does not work or at least it does not go beyond what you are trying to do.

What we need is not just another model. We do not need just another paradigm. We need to transcend that. We need to be able to not discount what we have done, but we need to go beyond it.

We are talking about it in the wrong terms in my opinion. In other words, we are talking about going from model to model to model. I am talking about transforming the whole notion of rehabilitation. I am talking about going from the limits of particle physics to the reality of the quantum mechanic.

As we all know, you cannot do what the quantum mechanic says is not possible in particle physics. It is just not possible. The quantum mechanic says I can go from here to there without going through here. That is just not possible given the existing system.

What I am suggesting to you and to the committee as to what we want to do is not possible given the current systems. It just is not possible.

If you are talking about behavior modification, if you are talking about environmental influences, I want to get on to a new frontier. In

my experience from the 30,000 people directly and 150,000 indirectly with whom I have participated it is absolutely possible.

While I respect what we are doing, I do not want to be limited by it. I agree with you totally that if we can make that breakthrough, if we can actually "split the atom," then we see a whole new world that is there that could not even be explained by the existing techniques.

With that I think we will find that not only will there not be competition among the various models, but there will actually be an enthusiastic support because each of them will begin to move.

Maybe that is beyond the scope of what we are here to talk about, but that is my message, if you will, on behalf of this legislation.

Unless we can go beyond the existing models, the therapeutic community, I tell you, 2 years from now will be back here discussing what happened in the therapeutic communities—why isn't it working like we thought it would? It is just too good legislation to let it fall prey to that.

Mr. HART. For the record, in your opinion would the mixing or blending of different modes in the same program or over the series of 10 programs have any impact upon the ability of the designated agency to make a solid evaluation of the results of the program?

Mr. LONG. No, I do not think it would. What the structure ought to be for the 10 models is that we ought to clearly define some things but not so much for the evidentiary value but for the opportunity.

For example, there are various things that are appropriate to various people. If a man needs some psychological counseling, I think he ought to have it. There may be people who need vocational training. If you have a man who does not have a job, does not have a trade, does not have a profession, vocational training is valuable. If you have a person who has some ability, education is valuable.

In working with the various models, whether it be TA, TM, or whatever, all of those have a value. What I am suggesting is, with something such as EST, that the community come out of that and then with the various models the persons would know what is appropriate for them. Some people might do this; other people might do that.

Do you understand what I am saying? The model would be adopted by virtue of what is appropriate for furthering the person. It would not be using the model to get the person to be better.

You have a person who is whole, a person who is responsible. For example, one of our fundamental platforms is responsibility—a person who is able to be responsible for his life. Then there might be some area where they could use some support. It may be in the therapeutic model. There are people where that is incredibly useful. It may be purely vocational. It may be interpersonal. The model then would come out of the well-being of the person rather than trying to put them into a model to get them well.

By the way, I think the Lompoc study will clear up some of that when you see the effectiveness of that. We are going to measure our effectiveness by the effectiveness of other programs.

Senator DECONCINI. Thank you very much, Mr. Long, for your testimony.

Mr. LONG. Thank you. If there is anything in the future that we can do, please let us know.

Senator DECONCINI. We may be working with you.

Mr. LONG. Thank you, Senator. I would like to also thank your staff. They have been most cordial and helpful.

[Mr. Long's prepared statement follows:]

PREPARED STATEMENT OF TED LONG, J.D.

My name is Ted Long. I am currently employed by est, an educational corporation based in San Francisco, California. I've been asked to testify on behalf of Senate Bill # 3227, which proposes the establishment of therapeutic communities in selected Federal Correctional Institutions. By way of background, I am an est trainer and lecturer, and in that capacity have had the opportunity to interact directly in the lives of over 30,000 people, and indirectly by participating in the est experience, with more than 150,000 people. As a part of that participation, I have had the privilege of delivering the est training in the Federal prisons at Leavenworth, Lompoc, and Alderson and the California State Penitentiary at San Quentin. In addition, I have participated in the compiling of extensive data and information which may be of some value regarding the matter before us.

I first began a detailed study of existing correctional programs in prisons with the aid of the wardens of San Quentin, Leavenworth and Lompoc, to supplement the major study assessing the effectiveness of correctional institutions performed by Douglas Lipton and his associates for the Governor of New York's Special Commission on the Effectiveness of Correction.

We found an enormous void existed in this area, in that no programs to date had produced major appreciable results. Nevertheless, as a result of having now interacted directly in the lives of over 500 prison inmates in the above-named institutions, we feel it is possible to make a major breakthrough in terms of correction.

A brief review of the current correctional situation may serve to remind us of the importance of the pending bill, which could allow us, for the first time, to make a major breakthrough in large scale effective rehabilitation. One of the major areas of interest is the issue of recidivism. (We also examined the institutional adjustment, educational achievement, drug and alcohol addiction, personality and attitude changes, and community adjustment). Our review of 286 major studies including individual and group counselling, job adjustment, college education, and aptitude training, revealed essentially no major results.

In the area of case work and individual counselling, seven studies contained no evidence that counselling initiated in the institution for the discharged or paroled was an effective approach to reducing recidivism. As a matter of fact, the evidence points to a much greater effectiveness if counselling is focused on aiding the offender to meet immediate problems, such as financial assistance, job placement, etc. In a California study of felons (excluding narcotics addicts) receiving psycho-dynamically oriented counselling, with substantial casework supervision plus psychiatric consultation, results were essentially negative. The explanation given was that the orientation of the program was directed only towards individual personality changes rather than any real support for the daily condition in the lives of the members of the community. In this area of individual psychotherapy, thirteen other studies revealed no clearly positive or negative findings regarding effectiveness of individual programs in reducing recidivism.

It is noteworthy that virtually all the studies we examined indicated that if any results were produced, they were directed toward practical problems, finances, getting along at home, and related "street" problems. In general, researchers tend to be far more enthusiastic about programs directly related to the street. An additional fact should be noted concerning these programs: there is a clear difference when the participants are amenable to the program rather than reluctant to participate.

The enthusiasm of the administration is also an important factor. It has been conclusively demonstrated that group and community experiences tend to generate much more enthusiasm than programs offered on an individual basis, particularly after a group has been generated and has had sufficient opportunity to form cohesive ties. We examined a total of eighteen studies employing various techniques, including group psychology, group therapy, guided group interaction, and group counselling. These methods were employed principally with small groups, whose leaders focused for the most part on immediate problem-solving skills. Typical conclusions were as follows: with incarcerated young males under

the age of 18, group counselling is more effective than community or routine institutional care. In the age group of 18–25, counselling does not significantly contribute to parole success. Incarcerated males over 21, especially those known as "good risk" offenders (not "hardened" offenders), seemed to respond very well. Those programs which held community meetings in combination with group counselling enjoyed a measure of success. Relatively short-term group therapy with male offenders, whether in the institution or in the community, seemed to be a less successful approach to reduce recidivism. These studies and those previously reviewed unfortunately contained few, if any, significant results. The O'Brien study, conducted in California in 1961 with a group of mixed offenders, also concluded after seven months of treatment and seven months of follow-up, that there were no significant differences between the return rate of those in the program and those out of it. These results are typical of the findings commonly reported.

Clearly, recidivism will be reduced in direct proportion as after-release vocational programs are effective. Here too, however, the findings are disappointing. The Sheller report (1961) regarding group counselling with a yearly supplement of casework in the areas of vocational and educational plans and personal adjustment, as compared with no treatment, reported partial success in terms of recidivism. It should be noted, however, that the program was done in a minimum security prison and did not deal directly with hard criminal cases. A similar study by Taylor (1967) directed at females, indicated no significant difference between the reconviction or recall rate of experimental or control groups. An institutional adjustment study conducted in 1966 (in Folsom Prison, California) found that those enrolled in group counselling had significantly fewer disciplinary infractions than those not enrolled. In addition, those involved had less serious rule violations. A major study evaluating the effects of probation on social adjustment conducted by Lohman in 1967, reported no significant difference in the average monthly earnings of those receiving the three types of federal probation: intensive, ideal or minimal.

A program generally thought to be extremely effective is skill development. However, after careful scrutiny of the information available, it is far from clear that these skills benefit the offender once he is released from the training program. Only one fairly solid finding of increased vocational adjustment as a result of institutional programming was done (Sullivan, 1967). The danger seems to be that the offender concludes after vocational training that he has the job skills necessary to succeed in employment in the open community. Once he gets out into the community, however, and encounters employment difficulties, he becomes even more bitter than before the program. Additionally, we note that institutional job experience is seldom preparatory for the outside. The offender is often taught building trades when such positions in unions are rarely available. Or inmates are sometimes taught simple electronic data processing when such positions are not available. Given the highly technical and confidential nature of his work, an employer is often unwilling to hire a former felon in a sensitive capacity. Such cases demonstrate that pointless programs are far more detrimental than no programs at all.

These studies make it all too apparent that a major transformation is required in the very basis of the entire problem of our approach to correction, and that rectional programs. From my experience in Federal Correctional Institutions, I major changes must occur if we are to experience major success in Federal corknow it is possible to make a difference of this kind.

What must happen within the correctional community is a shift not merely in the direction of interest in correctional programs, but in the contextual basis from which all such programs proceed. By a contextual shift, I mean a change in the ground of being or philosophical basis of an entire range of programs. For example, one engages in the an action because there is an emergency and one has to do something; we call this a condition of survival. If, however, one engages in an action quietly and calmly, out of a spirit of compassion or genuine enthusiasm, we call this a context of service. An example of contextual shift would occur if a specific program shifted its philosophical basis from a condition of survival to a context of service. A similar shift occurs when we alter our approach to correctional programs from a belief in the need to "punish" to an approach designed to restore the inmate to the status of a functioning, contributing member of society.

In "Whose Rules are You Playing By?", Michael Keller, a young psychologist employed as a guard at San Quentin Prison in San Francisco, points out that

correctional institutions operate on two sets of agreements—those we would regard as normal in the "outside" world, and those according to which an inmate must operate in the prisons if he is to survive as a normal member of the "inside" world. He notes that there is literally an unspoken agreement among inmates not to participate genuinely in the policies and programs of the correctional institutions, for to do so threatens one's survival and standing in the "inside" inmate world. And yet, Keller notes, the institutions themselves believe they cannot survive unless they operate by the agreements and norms which they are established to uphold. Small wonder then that these two contradictory sets of agreements fail consistently to provide basic contexts within which correctional programs might operate effectively.

In his article, "A Place to Tell the Truth," Professor William Bartley III writes about the kinds of environments institutions provide, particularly those which have consistently made little, if any, difference over the years. Dr. Bartley writes, "Most of our institutions operate on the basis of survival of the institution," an observation entirely consistent with Mr. Keller's observations at San Quentin.

Dr. Bartley goes on to say, "The major question should not be the kinds of programs we offer, or the kinds of input they have, but their ability to transform the conditions in which the programs are offered. In other words, we must determine the nature of the survival orientation and then determine an effective method to combat it."

In essence, Dr. Bartley and Mr. Keller are referring to institutionalized systems of belief and their well-known ability to absorb and drain off any and all energy from programs which might otherwise have contributed to the transformation of the institution—a kind of institutional sluggishness and inertia which prevents worthwhile programs from making their worthwhile contribution.

These observations aid us to see why the correctional process seems to be its own worst enemy. They bring us face to face with the necessity to transform the conditions in which worthwhile programs, such as the therapeutic communities we are discussing today, are mounted. It would then be possible not merely to add new content to institutions whose character simply absorbs them like all others, but to transform the context of the condition in which the therapeutic communities here advocated must attempt to operate.

Essentially then, it is not simply a matter of devising new programs whose content it is hoped will finally rehabilitate the participants they are devised to assist. Our task is much more basic, much more profound, and much more difficult. Our task is nothing less than generating the condition of workability within institutions whose history demonstrates a truly remarkable capacity to resist almost any efforts at transformation. So far, in the 106-year history of penology and corrections, we have demonstrated beyond doubt, that even in the face of heroic rehabilitation efforts, the people we have attempted to assist remain troubled. In order not to continue to fail again and again in the future, we must acknowledge to ourselves and to all those genuinely interested in truly rehabilitative and effective correctional programs, that we have nothing in our arsenal that really works. It is this condition of unworkability that we must now alter.

In candor we must acknowledge to ourselves that we have been attempting to operate correctional programs in a condition of unworkability, and must now begin to alter the false assumptions and beliefs which perpetuate this self-defeating condition.

Examining our own experience provides us with a direct knowledge of these assumptions. Our efforts seem universally to assume: (1) Inmates need correction; (2) Inmates are less able than staff to engage in this correction; (3) Thus, inmates must be helped to change.

In other words, the prevailing rehabilitative and correctional programs assume that inmates are not all right, and that they ought to strive to become all right, and that failure to participate aggressively and enthusiastically in correctional programs offered to them is proof that they are not all right and therefore should participate in these programs to become all right.

It is our privilege and pleasure to testify here today that this network of assumptions and beliefs, which perpetuate what we have called a condition of unworkability, can be transformed. That is, a shift in the stance of non-participation universally shared by inmates throughout the world—to one of eager, genuine, and enthusiastic participation—is not only possible, it is the routine result in inmates who have experienced the est training—who have gone on to

produce benefits for themselves and for their fellow inmates by their transformed participation in other prison programs.

After participating in the est experience, it becomes dramatically clear that a contextual shift has occurred in the attitudes of inmates toward participation in rehabilitation and correction programs.

The shift is visible in the inmates' movement from a simple rejection of the institutional assumptions that they need to be helped to change the content of their lives, to an experience of their native ability to take responsibility for the context or quality of their lives, past, present and future.

After this shift, inmates bring their experience of an innate ability not simply to one or another program but to all the programs in which they participate; since the issue now is no longer will this program work—it is now—am I willing to have my life work?

Thereafter, the effectiveness of programs becomes a measure and a reflection of an acknowledged ability, rather than a test to determine whether inmates are sufficiently human to benefit from correctional programs. They now see correctional programs as opportunities to express their innate humanity and inherent ability to participate in controlling their own lives.

It is commonplace in correctional institutions that inmates will prefer to participate in virtually any program under the notion that it may look good in the probation file, or be a suitable measure to convince ("con") the authorities that the inmate is qualified for parole, or is cooperating fully, when in fact, the programs are not really taken seriously.

This is evidenced by the fact that participation falls off dramatically when inmates are given the opportunity to drop out without prejudice. For example, the community college program at Lompoc enjoyed a large attendance until it became clear that prison policy would remain "time for crime," after which enrollment fell immediately almost to zero.

In our experience, inmates who have availed themselves of the opportunity to take the est training—with no tradeoffs promised—regularly and routinely begin immediately to participate enthusiastically in programs which offer genuine benefit and which do not require the inmate to adopt a negative set of attitudes toward himself and/or his abilities. In the first Lompoc training, 147 inmates initially enrolled from a population of 900. Sixty-two completed the training, notwithstanding the fact that the training competed with scheduled movies and visiting times. As a result of the sixty-two "graduates" and their attitude of obvious enthusiasm and participation in their lives—not simply in specific programs with trade-off values—the next training enrolled a full roster of 150 participants, most of whom completed the training. These results constitute a statement that members of the inmate community—no matter what their original disposition—will be moved toward increasing participation by those who demonstrate in the community that it pays off in the quality of their lives, not simply in acquired skills or institutional conformity.

Dr. C. Scott Moss, senior prison psychologist at the Federal Correctional Institution at Lompoc, in his evaluation (1976) of effects of est on the lives of individual prisoners, stated:

"I cannot find anyone who hasn't found value. And in truth, by my informal survey, about 85 percent claim dramatic alterations in their existence."

He goes on to quote an inmate graduate as follows:

"The differences I can measure in myself are mostly attitudinal. Nothing overwhelms me as before. Nothing seems tragic or permanent. My energy, always high, seems limitless these days. I'm more direct with people and have a strong sense of living in the moment."

This attitude, when shared, has the quality of encouraging and making available to others an expanded willingness to participate. There can be no doubt that this shift is in itself a major development. This same behavior was reported in the Keller study at San Quentin. Among the other obviously positive benefits, he reported the major areas of contribution were the realization by inmates of the responsibility for being in prison and the willingness to interact responsibly in the prison environment, which allows the community to expand, and gain from all the human interactions available to people in the prison community.

It should be noted that the purpose of the est experience is precisely to enhance and render valuable existing programs, not to replace them. The current est experience being conducted at Alderson Prison provides a good example. Through the watchful eye of regional Psychological Director Michael Ream, it was noted that it is absolutely possible with a small nucleus of seventy participants, to

actually begin to transform the quality of life in an entire prison. Dr. Ream has already observed a transformed quality of participation in Alderson even though the training is very new there. He has observed that community graduates feel less threatened, more tolerant and open to community participation than ever before, incidentally thereby creating a substantial interest in participation in est on the part of not yet trained inmates.

Expanded willingness to participate after the est experience can reach dramatic proportions. Since its inception in 1971, beginning with thirty-five trainees, est has trained over 150,000 people, (including over 500 inmates). After the training, graduates are given an opportunity to assist (volunteer) at est events, if they so choose. Currently, some 4,000 est assistants contribute between 25,000 and 35,000 hours of work per week, with the single contractual stipulation being that they get more out of the experience than they put into it. This amounts to well over 1.5 million donated hours of work on an annual basis. The implications of assisting in prisons remain to be explored. We note with interest that therapeutic communities offer exceptionally rich opportunities for inmates to assist and commend particularly this aspect of the proposed program.

Nevertheless, we wish to note that it is a matter of fundamental importance to recognize that present conditions in Federal Correctional Institutions make it almost impossible to discern which programs will succeed or fail due to their own impetus. or due to the attrition demanded by the current standoff between "inside" and "outside" agreements. No matter what the benefits of therapeutic communities—and we think they are considerable—we strongly encourage this committee to give careful consideration to the need to transform the institutional context within which programs of this sort must attempt to deliver their available benefits.

We have not yet transformed the context within which correctional programs must operate. We have barely begun to organize a context which has some value in releasing inmate enthusiasm from the prison of pretended fearlessness and rebellion in which they currently live out their lives. Our task is to shift the context of prison life from a condition of unworkability, premised on assumptions of inmate deficiency and inability and "not-all-rightness," to a context of participation and contribution, premised on recognition of inherent inmate ability, sufficiency, and a full potential for individual responsibility.

That these attitudes can characterize prison life is documented in Babbie's survey of prisoners who have taken est (1977).[1] It is worth noting that the qualities he finds characteristic of graduate prisoners do not differ significantly from those of normal "outside" graduates. Supporting the inference that "outsiders" and "insiders" differ only initially and superficially, and that the "act" or pretense of incorrigibility routinely adopted by prison inmates is a defense facade they are willing to drop in an appropriately safe environment, which it must be our task to provide (Babbie and Stone).[2] In our view, therapeutic communities by themselves cannot provide such an environment although they do further in this direction than any other programs in our awareness.

The scientific record is clear. Therapeutic communities: (1) Regularly decrease the amount of time inmates must spend in prisons; (2) Increase institutional adjustment (Lipton, et al.) [3]

The historical record is also clear. One-hundred six years of penal history has left us with disappointing results at best.

We note in other areas of physical science that major breakthroughs have taken place within the same historical period of time. We have gone from a rural America to a country which put a man on the moon, from the pony express to a network of communication satellites. Such progress could not have happened had not the physical scientist made a contextual shift in his willingness to experience the physical universe. The social scientist must now make the same quantum shift or be doomed to irrelevance and failure. I am reminded of Galileo, Newton, Pasteur

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[1] Babbie, E. American Journal of Correction 39 :6 (Nov. 1977).

[2] Babbie, E. and Stone, D. An Evaluation of the est Experience by a National Sample of Graduates, in Biosciences Communications—an interdisciplinary Journal of Research and Theory in the Biological Sciences and Fields of Health Care Delivery. 3 :2, 1977, pp. 123–140.

[3] Lipton, D., Martinson, R., and Wilkes, J. The Effectiveness of Correctional Treatment—a Survey of Treatment Evaluation Studies. NY Praeger, 1977.

and the late Albert Einstein in their struggles for mankind to see the obvious. I suggest it is equally obvious today that the correctional process does not work, and that to have an opportunity to have it work, we must be willing to enter beyond what is known.

We must be willing to transform the very assumptions on which correctional programs stand. Like ending death by starvation, this seems to be an idea whose time has come.[4] Our entire age seems to be engaged in this transformation, (Leonard, 1975) [5] beginning with the recognition that to be responsible, to participate fully in life, to experience responsibility and ownership of our successes and failures, and to communicate them are our common human nature. Let it be noted that these are also the requisite qualities of a genuinely therapeutic community.

I therefore ask that the record show that we have studied Senate bill 3227 carefully and recommend its passage without reservation. I would also like the record to show that est is an experienced organization which has demonstrated its ability to produce results, and that est is willing to assist in the implementation of the proposed legislation, and to provide whatever advice, counsel, and/or consultation this committee may deem appropriate to request.

We are deeply aware of the privilege given to us by the committee to testify here today, and we thank the committee fully for its invitation.

Senator DECONCINI [acting chairman]. Our next witness will be Dr. Ted Harrison, Pardeeville, Wis.

Please proceed. If you have a prepared statement it will be printed in the record in full. If you would highlight that for us, we would appreciate it.

TESTIMONY OF TED HARRISON, PSYCHOLOGIST, PARDEEVILLE, WIS.

Mr. HARRISON. As a point of clarification, I do not have a doctor's degree as of yet.

Senator DECONCINI. You have an M.S. degree. Is that right?

Mr. HARRISON. Yes.

Thanks again. I appreciate the opportunity to be here today. Perhaps I ought to start a little bit with my credentials in terms of who I am and how I got where I am.

I am a transactional analysist. I am a clinical member of the International Transactional Analysis Association or a certified member of that organization. I am also a social worker.

Currently I am in private practice, and I am consulting with a variety of prison programs at the Federal, State, and local levels.

Prior to doing this, I spent 7 years with the Bureau of Prisons as a counseling psychologist, as a correctional treatment specialist, and as a unit manager. More specifically, I was the director of two therapeutic communities, one of which I started and founded.

You have a copy of a paper I have presented at the University of Georgia.

[See p. 243 of the appendix for the paper mentioned above.]

Historically, I became involved with transactional analysis when I

[4] "An Idea Whose Time Has Come." The Hunger Project, P.O. Box 789, San Francisco, California 94101.

[5] Leonard, G. The Transformation. NY, E. P. Dutton, 1975.

was a graduate student. At that time I was doing a practicum at the Federal penetitentiary in Marion.

I noticed there was something different about some of the people there as persons in terms of things that I knew, what I could do, and and in terms of communication. I later found out that these people were involved in a therapeutic community which was started up by Dr. Martin Groder.

I became involved and interested in this operation and the fact that there was a difference. I wanted to know why. I began to study with Dr. Groder, who was a student of Eric Berne.

In 1972, I became the director of the therapeutic community at Marion. In 1973, I moved to Oxford, Wis. to start a therapeutic community called Asklepieion North.

The reason I went to Oxford was really to answer a basic question for myself. The question was: Is it possible for somebody to change or be rehabilitated in a total institution? There was a lot of research and a lot of evidence suggesting that people just do not change when they are in a prison structure.

I discovered in doing the work and in doing the things that are there that, yes, it is definitely possible and there are some very specific things that are needed. The therapeutic community is an important part of this process.

Going to Oxford I took with me two inmates with whom I had worked previously. Both were people who, for the most part, would not be getting out of prison.

One man was a State prisoner from Montana who had a life sentence. He was going to be doing time for a long period of time. I took him with me.

I also took with me a man who was considerably older. He was serving 85 years and probably would die in prison.

These two formed the basics of a core culture. At that time I considered the therapeutic community to be myself and those two inmates. That is where we started.

To give you an example about working with people in a prison setting, I often use the example of a Frenchman. If you would, consider the country of France, and that I live in England. Each day I cross the English Channel and go into France. I meet with people there in my groups, in my seminars, in my training, or whatever, perhaps once, maybe even three or four times, a week. Then I go back across the English Channel and back to England. The people that I am with go back into the French countryside. They do the things that typical Frenchmen would do. I speak no French and they speak no English. I am there curing them of being French.

That is pretty much how I experience the odds are in working under the typical program or structure to which people are limited when they work in prisons.

What is important here is the culture, the French culture, or the prison culture. In my way of thinking, prisons teach a man to do one thing—that is how to live in prison. Any good culture teachers people how to adapt, how to think, how to use this model, how to remain there, and how to get their recognition in this kind of a culture.

In the prison setting it is basically a we-they, cops-and-robbers kind of a culture. There are good guys and bad guys.

The essence of a therapeutic community is really a third culture. It is a culture that is different or the antithesis to this we-they kind of a setup. It is a culture that is based on responsibility, on wellness, on growth, and on change. That again is opposite of the negative and often very destructive prison culture.

The therapeutic community, also in my model and how I think of a therapeutic community, is open to anyone in the culture, which includes staff and inmates in a prison setting. I frequently find that there is as much resistance to this kind of a thing among hard-core staff as there is among hard-core inmates. Both find this a very threatening and unsettling kind of an experience. Consequently, they will not become involved, or will do a variety of things to run it down.

There are three basic purposes of a therapeutic community. I think I can state them rather clearly.

One is to develop social control in an individual where a person can function in harmony with the reality of his current environment, whether it is in prison or whether it is outside. This is the reality of his environment both now and in the future. Social control is a basic issue. Most folks who live in prison do not have social control. That is why they are put in a position where they need to be controlled.

The second purpose is to create an environment where neither the staff nor the inmates need to live and respond by the traditional antagonist and negative roles by which they are required to live or the codes by which they are required to live by. That is the second purpose.

The third purpose is to provide an effective method of treatment that solves problems and allows a man, or a woman, to change his or her own personal lifestyle into something that is much more satisfactory than where they currently are, where they are getting their needs met and where they are living their lives fully.

I would like to say a few things about the basic ingredients of a therapeutic community, as I see it, in terms of the minimum requirements if you have something that is called a therapeutic community.

At a minimum level I can name five basic components. First is a semiautonomous program structure within a large institutional structure and that this program structure is voluntary. In other words, people from any part of the prison culture can become involved in a healthy way in this semiautonomous structure.

Second is the leadership structure. In a therapeutic community the leadership structure is crucial. It is an important element. This includes staff leadership as well as inmate leadership because they both go together.

The staff needs to be involved, and be willing to work with the people who are living there, and interact at a meaningful level. They need to offer methodology which solves problems and answers conflict issues. Part of the leadership structure is the inmate leadership structure there.

The third component is an effective technology. Most frequently when people talk about therapeutic communities or anything, they

limit themselves to just the area of technology. The technology that is needed is a technology that basically explains what is going on both intrapersonally, within the person himself, and interpersonally, between you and I or between people.

I think that transactional analysis is an excellent technology that serves this purpose. Also, it is a technology that is an integrated technology. It is interested in behavior. It is interested in feeling. It is interested in thinking. It talks about, confronts, and deals with those basic areas of human behavior.

Fourth, a therapeutic community in a prison, needs to have some kind of a cleansing or decontamination process. Here the game which was talked about yesterday is an important part. This is needed in order to keep the program clean, if it gets into negative cycles, and also to put some life, some energy, and some spirit, into the program and into the whole process. The game is a good example of this. I know of one other possible example, but I think the game in a prison setting is probably one of the best that meets this requirement.

Fifth is some kind of a monitoring process which insures high standards and quality of the program. As a director of a therapeutic community—and at that time there were little or no funds—I used to call upon colleagues in the International Transactional Analysis Association who would volunteer to be there for free. This was a monitoring process which was very important.

If you do not have at least these five ingredients, I do not believe you have a therapeutic community. I think you have components of one. A therapeutic community, again, is a total thing. It has to have at least these, and perhaps there are some more if several of us would sit down together and talk. This is the minimum as I see it.

Anyone can hang a sign on a door that says therapeutic community here. This is especially true if you have a degree. People will buy it. This does not mean that, in fact, there is a therapeutic community there.

The essence and the seriousness of this bill, is that we are talking about something that includes a total investment rather than just part.

Frequently, you hear of a program or you will see in a description that this has the basics of transactional analysis, or the basic parts, or components, of a therapeutic community. To me that is equivalent of a jump master telling a serviceman who is a paratrooper, "Don't worry men, you have something there that is the basic component of a parachute" or "You are jumping with something that involves the elements of a parachute." It may be true, and it may have a model, but it is not a parachute.

This example is important because it is a serious example. What we are talking about is people's lives. What we are talking about is change. We are talking about introducing something which can affect a lot of people's lives. It is very serious. We need to do this in total. We need a total parachute.

I would like to speak for a moment on how this bill is relevant now. First of all, we know quite a bit, there is quite a bit of information, about the individual. There are a lot of theories and a lot of good information that explains what is going on with people, how people work, and how people understand their world.

Second, we have a lot of information about therapeutic communities right now. This is especially true with programs such as Day Top and Phoenix House. Their evidence supports the success of this type of program except it is in the free community rather than in a prison or an institution.

Third, we have a lot of information right now about institutional systems. It is only natural that these elements are coming together. This bill is an indication of this. Now does seem to be the time to be putting something together with the things that we do know and the things that we understand.

I also think that the Federal Bureau of Prisons should lead the way in this and show how these areas can be successfully integrated in a noncompetitive way. This is very important. That is part of the essence here in terms of doing it on a Federal level.

In terms of this being relevant now, the Bureau of Prisons up until now, has been operating under a handicap. Both State and Federal prisons must set priorities in terms of allocating resources. Beds and humane living conditions are primary. They ensure the survival of the people who are living there. At this point with the high population in prisons, it is true that is where much of our resources are going.

However, the State systems are eligible for Federal grants. They can apply for Federal grants for program development, to develop things that we are talking about. The Federal system cannot. It all has to come under one roof.

States can allocate their moneys for their populations to deal with the bed space and the other issues, and they can also have grants. A number of programs have been started by grant. Then after they have been demonstrated to work effectively, the States can put more resources there.

Part of the intent of this bill is to take a 5-year period and to demonstrate this successfully, so that we can then prove it.

Again, I believe the Federal Government should lead the way here. It is a shame that the Bureau of Prisons is penalized in this sense, and that they must take a back seat in developing innovative programs. I believe the Bureau of Prisons should lead the way in this area also—in the area of program development as well as in the area of humane living conditions.

That basically concludes what I want to say. I certainly would be glad to answer questions related to this or anything else. Perhaps I could speak more about some of the following things:

I could speak more about the developmental stages of a therapeutic community because this is a process. You just do not say therapeutic community and put the sign up and it goes. There is a lot of technology and skill involved in putting a therapeutic community together. It goes through stages of development.

I could talk about some of the research information in two areas. This data is preliminary and part of it is subjective. One would be in the area of the living situation in a prison in terms of how a therapeutic community is different or some limited information about recidivism.

I could give you information about a typical daily schedule in a therapeutic community. There are some possibilities there.

I could talk more about transactional analysis, if you wish, or perhaps I could talk more about consultants. Two main kinds of consultants are important. One has to do with program research and evaluation, which basically is looking at the inmates in the program. The other kinds of consultants that are important have to do with program evaluation and adding different clinical or learning skills. You have heard from several people who proposed seminars and training. I think this is an important part of considering consultants in a therapeutic community environment.

I could talk about some primary and secondary resources just in running a therapeutic community on a local level or perhaps some of the things plus or minus regarding the bill itself or even the effective size of a therapeutic community, or anything else that you think would be appropriate.

Thank you again very much.

Senator DECONCINI. Thank you, Mr. Harrison. There are some things I would like to talk about. I wish we had a great deal of time. Unfortunately, time is running short.

You mentioned in your verbal statement here the game playing. Your written statement discusses in detail cops and robbers games.

Could you expand on the explanation of how the therapeutic community inmates avoid this game?

Mr. HARRISON. Yes.

First of all, I would like to make a distinction about the game that I mentioned in my statement. I am talking about a process. It would be spelled with a capital "G." It is a type of confrontation group. The game that was mentioned in there as cops and robbers would be spelled with a small "g." It is a game that people play between each other.

People do go through a variety of ulterior or covert maneuvers with each other in order to justify and prove that life is the way they decided it was when they were little and to verify some basic decisions that they have made when they were little. This is what a game is.

In the case of cops and robbers, which is the name of a particular set of maneuvers, cops and robbers is a game that is played for recognition or strokes. Somebody does something in defiance in order to be recognized.

It is in many ways like hide and seek. Some of the dynamics are similar to hide and seek where a person goes off and hides and leaves little clues. If you have ever played hide and seek with a small child, you know clues are important. They sneeze, cough, giggle, and do a variety of things to let you know where they are.

People play cops and robbers in order to be caught. This may seem like a strange concept but it is true.

Senator DECONCINI. Do you mean that a bank robber's primary motive is not to get the money to buy something or enjoy something as a result of the money, but the primary objective is to be caught?

Mr. HARRISON. And to get recognition; that is true. It may seem strange. It is certainly difficult to explain that to a bank robber, especially the first time you talk with him.

Yet, if you talk with some people who rob banks, in understanding where they are personally, they will tell you, "I robbed nine banks. The first one was great. I got a lot of money and I did all the things that

you talked about. They didn't catch me. So I robbed banks leaving different clues."

There is an example of a guy that I heard on the news last night. He is robbing banks dressed differently each time. He is letting people know that he is around by wearing suits and a variety of things. He recently robbed a bank in a track suit or something like that. It was certainly much more casual than the way he has been appearing. My hunch is that he will probably show up one day with his name on his T-shirt or something if people do not catch him soon.

Eventually he will be caught and then he will be able to be indignant about the fact that he got caught and talk about his being a victim and a variety of other things. They get a lot of notoriety from it. That is about the cops and robbers game.

In a therapeutic community we play the game spelled with a capital "G" to confront some of that stuff. Basically we point out to a man: "Hey, stop lying to yourself. You know you were coming to jail when you robbed the first bank. You knew exactly what was going on. You cannot convince me of anything different." If the man who is saying it is also a bank robber, it has a lot of impact.

"Stop lying to me and stop lying to yourself. You are responsible for what you do and the consequences of your behavior, both the foreseen consequences and the unforeseen consequences." That is a basic philosophy.

Senator DECONCINI. Do you think that is applicable with the most sophisticated criminal activities of organized crime?

Mr. HARRISON. That is a different category there. The majority of the people in jail I do not believe are the professional criminals, although they may talk as though that were true and in their own self-image may think that.

For the professional criminal I think going to jail is an occupational hazard. They have a variety of insurance plans to take care of families while doing time. They are more involved in the legal process immediately.

Typically when a man goes to jail, the first thing he does after he gets caught is sleep because there is a lot of excitment around the chase. However, someone who is more involved at a professional level, probably the first thing he does when he gets caught is start his defense, whether it be instantly or whatever.

Senator DECONCINI. Could you tell us a little bit about how TA operates to change behavior? In a typical day, if there is such a thing, can you tell us what might happen? Could you go into that a little bit?

Mr. HARRISON. I am hearing two questions—one about transactional analysis and one about the therapeutic community.

Senator DECONCINI. Talk about TA in a therapeutic community. I would like to know what your process would be in a therapeutic community. What would you do?

Mr. HARRISON. Do you mean how we would use transactional analysis?

Senator DECONCINI. How would you actually use your expertise? Give us an example, if you can.

Mr. HARRISON. A definition of transactional analysis is that transactional analysis is a theory of personality. It is a theory of social psychiatry. It is a method of group treatment.

Transactional analysis is my way of thinking really is a no-discount model because I am concerned with people's behavior. I am concerned with people's feelings. I am concerned with how people think and the irrational thoughts, and some other things, too, which perhaps I could talk about. I am speaking strictly about TA.

For me, TA brings a lot of things and resources available. One of the things that Eric Berne talked about is using anything that works in order to get your client from the position of where they are now to where they want to be in an OK, healthy way. That allows me to do a lot.

TA is like the skeletal structure of my thinking. Perhaps gestalt or some of the other theories provide some of the action of psychodrama, the action of the muscle systems or some of the other systems, to equate with the human body. I think TA provides the structure and permission to do other things and to work in other areas.

With me as a clinician it is where I have started and how I have pulled things together. I may think and do stuff internally and confront or work from there.

In a typical day in a program with which I am familiar TA is like one of the means of communication. It has several advantages because it is a simple model to understand in simple terms. You do not have to learn a lot of complicated terms to impress yourself or your colleagues. You do not have to do a variety of things. You can talk straight with each other. It answers a lot of basic questions.

Some of the things that would go on in a typical day is perhaps some training, educational sessions, and lectures given for the most part by inmates who have learned that material and who for the first time in their lives are teaching and doing something positive for somebody else.

There would be a lot of teaching. There would be individual sessions that would expand one's thinking. This may be a TA session or something else. There would be sessions working on behavior and about one's responsibility to himself and to others. There would be sessions where people would have a catharsis of feelings and understanding and emotional release kinds of things. That can either be scheduled or done because of the flexibility that is within the therapeutic community on a 24-hours-a-day basis 7 days a week.

There may be visiting lectures or people from the free community who are coming in and learning as a part of the typical day.

I am not sure that I have answered the question totally. I do not want to really ramble on. I can be more specific. Just guide me a little bit.

Senator DeConcini. Give me a specific example of how you would take on somebody in the therapeutic community.

Mr. Harrison. How would I take on somebody?

Senator DeConcini. Yes. How would you meet with them and what would be the course of discussion of your first session?

Mr. Harrison. The first time?

Senator DeConcini. Yes. Would it be in a group?

Mr. Harrison. Most often any formal session would be in a group. It would be some kind of an orientation or out-resident experience. That may be run by inmates in the program or it may involve staff. It can be either way, depending on the day that it happened.

Senator DECONCINI. You would have some inmates who were trained and you would let them do that?

Mr. HARRISON. Yes.

Because the prison culture is very much a we–they culture, as a staff member, a person who perhaps wears a tie or a dress is different. Right away when I show up frequently people will start doing whatever their various maneuversor manipulations are. They would be unwilling to talk with me where they would be willing to talk with somebody else.

Senator DECONCINI. What if you have been through it with them? What if it is not the first time but they have been through the process? We had Warden Anderson testify yesterday that he has actually been through this.

Mr. HARRISON. A week-long training. Yes, that is excellent experience.

Probably my next contact in terms of being with the man would be in a game or a group setting. It would probably be based around something stupid that he had done, perhaps a violation of a rule.

Senator DECONCINI. You would be trying to find out why he had done it?

Mr. HARRISON. The first thing I would deal with is behavior. I would have him act as though he is not violating any rules and that he is responsible. I can give you an example, a rather recent one, because I still visit the program in Oxford.

A man showed up and he had some cutoff shorts on. Shorts are really legal within the institution but there is a certain procedure in terms of getting them hemmed up. They do not want people to destroy property just by whacking off a pair of pants so that they can be cool for a few hours and then throw them away. There is a particular procedure to get the shorts.

He showed up and he was walking around the house in some cutoffs which were literally whacked off. A session was called. We started confronting him. If he were walking around in the dining room like that, he would be subject to disciplinary action immediately. We started talking to him about why he was doing that when there was a legal, proper way for him to have cutoffs.

We asked him, "Why are you choosing to manipulate or to violate the system or to violate the rules?" He went into a variety of supposedly rational explanations such as: "The clothing room officer gave it to me. I have permission from the man."

Folks were telling him basically that that may be true but it does not make sense. "You do live here. The reality is that you live in this prison. You know what the rules are and you know the consequences and you are responsible." They basically confronted him over and over and asked him, "What are you going to do about it? How are you going to resolve this?"

Until finally he was willing to own the fact that he did have these shorts on, that it was something that he decided to do, and that the proper step was for him to take them back immediately and get a legal pair of pants. He went right to his room to take them off and to put on a legal pair of pants.

Next we would probably talk to him in another session or on another day about what was going on and use that as an example of how he was playing a game of cops and robbers or how he was manipulating

the people around him in order to prove that basically he was not OK, that people were out to get him, or whatever his particular thing happened to be.

There is a lot of rich personal data that a person can discover when he is in the therapeutic community like this.

Another definition that I use for a therapeutic community is total learning environment or total living environment. People are together and they are learning. If you want proof, the best place to look for proof about what you are doing is to yourself and understand what it is that is going on and that basically some of these same patterns keep occurring. Someday a guy will ask you, "Now that you understand that, I wonder why. How does this fit?" That is when a person starts to put a lot of it together.

That is one of the advantages. That is why a third culture is different because he does not return to the French side and walk up to his partners and they start laughing at him about having these cutoff shorts or telling him he'd better watch out because lieutenant so-and-so is around the corner, and so on.

Senator DECONCINI. Mr. Harrison, I am going to have the last witnesses come up although I would appreciate it if you would stay. I am going to have to go to the floor at 11 o'clock for a bill, but staff may want to pursue this a little bit more for the record with you. After the next witnesses are through, there may be some additional questions for you.

Our next witnesses are Dr. Daryll Shutt of Tucson, Ariz., and Judge John Collins, Superior Court Judge of the Juvenile Division, State of Arizona.

Dr. Shutt, any testimony or statements that you have will appear in the record. If you would like to make some comments or points, please proceed.

TESTIMONY OF DONALD SHUTT, PSYCHOLOGIST, TUCSON, ARIZ.

Mr. SHUTT. Senator and members of the staff, it is a pleasure to be here for such an important occasion.

Perhaps it would be helpful if I explained that my contact with the criminal justice system, particularly in the State of Arizona, goes back many years. I wish to address certain portions of the bill as it was introduced.

The first portion concerns the statement in section 2 of Senate bill 3227, the Therapeutic Community Act of 1978. "Past penitentiary rehabilitation programs have not succeeded in decreasing the instance of recidivism among program participants."

This is a generalized statement which some research has shown to be true. I find fault with the research because, in several instances inappropriate models and statistics were used to indicate that the programs were less than successful.

Social science research is quite different from an experimental model which might be used in biology or physics.

I would like to refer to a pilot study which I completed in April of 1978 on the Fort Grant project which includes the therapeutic community program. You have copies of the final report.

Senator DECONCINI. That will be made a part of the record.

[The report referred to will be found on p. 250 of the appendix.]

Mr. SHUIT. I direct your attention to page 254 on which you will see table 6, Psychological Disorders. These are listed as psychosis, neurosis, personality disorder, psychophysiologic disorder, transient situational disorder, and no psychological disorder at all.

There are just 20 subjects in each group. They were selected because of a severe lack of money to conduct a bigger experiment.

The experimental group volunteered and obtained vocational rehabilitation services at the Fort Grant Training Center. The control group did not.

The fact that the experimental group receive vocational rehabilitation services and the fact that they were volunteers—and that is an important factor—made a significant difference in their success following parole. The difference was significant at the 1 percent level of confidence.

On page 254, table 8, we have the recommendations made by our classification group for training, therapy, partial therapy and partial training, and then a total program. There it is important to recognize that only half of the unemployed parolees had therapy while two-thirds who were employed members had received therapy in the therapeutic community at Fort Grant Training Center.

Calling to your attention one of the conclusions of the study—and we will not go through all of that because it would take too long—the studies in the past made by Glaser, McCollum, and Dale report high correlations between unemployment and recidivism. This study supported that assumption.

It is apparent that rehabilitation does work in a prison setting where it is given an opportunity to expand and include therapy as well. I find fault with studies that have reported negative results because they have emphasized a very narrow hypothesis, and utilized interdependent factors, isolated from the total environment, in reaching their conclusions.

I submit that a prison environment is a total environment, that you cannot separate small factors and attempt to test them separately from other parts of the resident's life.

I do have some other questions to which I would like to refer in a moment.

I would like to comment on section 4062 which was brought up yesterday by Mr. Carlson. This is directed to the importance of a separate administration for such a program as this.

My colleague, Judge Collins, who is seated on my left, and I were discussing an instance in which we were both involved and which we feel is important. I would like to ask Judge Collins at this point to briefly discuss that issue relative to the administration of the program. May I do so?

Senator DECONCINI. Yes.

TESTIMONY OF HON. JOHN COLLINS, SUPERIOR COURT JUDGE OF THE JUVENILE DIVISION, STATE OF ARIZONA

Mr. COLLINS. Senator, I speak as a judge. I think a judge historically has been known as tough or as a bleeding heart. I would like to think that I am an enlightened pragmatist. I speak as a judge, a lawyer, a citizen, a taxpayer, a humanist, and many other categories. I am in-

terested in what happens to people after they go through my courtroom.

I think I owe a responsibility not only to the present community to protect it but to the future community. If a man is going to be worse when he comes out, I have an obligation to do something about it.

One of the programs Dr. Shutt was talking about was shot down by the incoming administrator, a program that allowed his department at Northern Arizona University to take kids from the reform school and put them through programs that were similar to what we are talking about here today.

They were doing a beautiful job. It cost a collective total of $60,000 a year to do this. Dr. Shutt tried to point out to the incoming administrator that $60,000 was not good reason to shoot the program down. He had demonstrated that most of the kids who go through the program get out of the system at a tremendous lessening of costs to human lives, property, and the taxpayer's dollar, but that was not interesting at all to the new administrator who came in. He said he had his own quiver of arrows, and he was going to use those. He never, ever reinstituted this type of program. Luckily, we did not keep him too long in Arizona but we kept him long enough.

We then had John Moran come in. I am sorry to say we lost John this last year by the change of Governor's chairs. John instituted and helped these people bring the therapeutic community into Arizona. He has been a very strong supporter of it. Thank God he even came back from Rhode Island to help tell you about his success in this program in Arizona.

It is extremely important that the legislators take a hand in this matter. The legislative department and the judicial department are responsible for preventing crime. We turn the job of enforcing the situation over to the executive department which runs herd on these people while they are locked up.

It is like breeding a better breed of cattle or horses and then turning them over to the jockey to run in a race or the cowboy to rope in the arena. They do not know a damn thing about how to breed them.

I think that is the place of the legislative department—to create programs and give legislative intent that will carry over and transcend administrations who are to carry them out. Not always can an administrator at the top carry out legislative intent unless it is specifically set out because he may have a staff that drags its feet.

For example, they say the worse person in the juvenile system today is the judge. He is not enlightened and he is not willing to change. The next worse person is his staff because they have a territory to protect and they do not want to give it up.

I also find no problem at all in the words "therapeutic community." We are not teaching these guys how to get a job for themselves or encouraging them to learn more about school. We are trying to do a job so that when they go out they will not come back and they will not commit the things that cause them to come back. That is therapy.

Judge Walsh, who is a very honored Federal judge in Tucson, said one time that it is very therapeutic to have prisoners in the Federal prisons use the library and try to work themselves out. I see no problem

with the word "therapeutic" being used. As far as I am concerned, it is not a word of art as we recognize it. I think it should not be limited so as to cut out any good and useful programs such as the one in which Dr. Shutt participated.

I am here to support this legislation. It is imperative that the legislative department of this country today get actively involved and express their legislative intent that indeed we are going to lessen crime in this country and recognize that one of the ways, other than rehabilitation, is to prevent it in the first instance.

There are the basic roots of economic and social deprivation that are not even touched by this legislation, but within the area we are talking about I think we have an obligation. The Congress of the United States is the proper body to do it. The judiciary is the proper persons to be enlightened about it, encouraged about it, and make use of it. Then, of course, the administrative department that has to carry it out would certainly be entitled to have a say in how it is done, but I do not think it should be all-inclusive in their purview.

This would even suggest that there be a national overriding advisory board to be concerned about how these programs are administered because it is a little bit separate and apart from making sure that a guy does not kill a guard while he is in prison. That is what the guards are concerned about—that he is going to be kept in his place while he is in there. They do not give a damn about whether he is rehabilitated when he goes out other than as a citizen. That is not their job.

We have to put something into place that will allow an overriding administration with an advisory-type of council to see that such therapeutic programs are made available; and when the prisoners are released they can continue.

I think the people we heard here yesterday, Senator, would not be adverse to listening to Dr. Shutt or talking to him in his office nowadays. They were distrustful when they started out as prisoners. However, if guys like Monte MacKenzie, Bill Smith, and Wayne Michael—all ex-cons—are going to increase their abilities to help others and also to enlighten themselves, they have to be encouraged to take the program as far as they want to take it. Therefore, I think there should be an available component that allows them to continue after they get out of prison.

Senator DECONCINI. Judge, do you think also the idea of the bill creating a separate administrator would stabilize the continuity of it from one administration to another and one Congress to another?

Mr. COLLINS. Yes. That is important, Senator, and it would be important for him to have some kind of an advisory board.

I have been involved with a lot of administrators, as you have, who framed their own kit and caboodle when they came in. They do not want to listen to anybody else too often. The sky is the limit on what they should be able to utilize in the programs in the name of "therapy."

I have been through one of these programs that you were talking about this morning, EST. I went through "Actualizations." I decided since I send people around to go through such programs I ought to go through one myself. That was a very enlightening 3-day period for me.

It raised my self-consciousness level considerably. I believe it is a component that should be included in programs in prison.

No one should be able to say, "I don't like that kind of thing so I am going to cut it out." Everything that is reasonably therapeutic in nature ought to be available for use in this, regardless of what it is called; such as "TA," "EST," "Actualizations," and so forth.

Also, Senator, it is extremely important that we make this available to people as young in life as possible. I see no difference in a man who says, "I want to be a Senator of the United States or the Governor of my State. How am I going to do it?" and the businessman who wants to take over a corporation; or a crook who says, "That money in that bank belongs to me. I am going to figure out a way to get it." The things that drive people to action are all the same, depending on the person and what he is trying to accomplish.

What we have to do, of course, is to make people utilize their actions so that they will not be overly oppressive to another person as to his property and life.

It is important that such assistance be made available and be utilized early in life in order to prevent, as well as rehabilitate ones who are already there, the unnecessary numbers of people from going into this area.

Mr. SHUTT. I would like to clear something up. As a psychologist, I am not hung up on the word "therapy." I talked to Monte MacKenzie and Karl Tucker after we had Ted Long's presentation on EST this morning. They are not hung up on the word, either.

What we want is the very best possible program for the inmates. If the word "therapy" has some legal connotation which would prevent the use of a helping program, then I say let's do away with the word. We don't need it. Let's use something else. Let's just use "community" perhaps and move from there.

I would not want to see any of the possible programs prevented from being of benefit simply because of a legal definition that that person was not indeed a therapist and was not licensed to offer the services.

I would like to move quickly to another very important factor. Evaluation research is quite different. It is the newest social science field.

Chapter 304 of this bill, section 4061(d) (5) says, "recommend to the Attorney General an agency to evaluate the program." This bothers me.

I have done quite a lot of evaluation research in addition to this little pilot study. Frequently I am called upon as a research psychologist as well as a diagnostician to come in to evaluate a program at the end of the program, to find that the material or data is missing, some of it now unobtainable. Persons who should have been collecting the data failed to do so or they did not know what data to collect or what would be needed for an adequate evaluation.

I propose that the bill be amended to include a separate section on the evaluation phase and that the evaluation phase be a part of the initial planning program. I have several reasons for this, one of which is cost.

If data would be progressively fed into a predesigned computer program, the threshold costs for first entry application would be greatly reduced, probably by two-thirds. Where it gets expensive is in tinkering with data once it has been entered into a computer program. This is very, very poor planning.

What we need is an orderly process in data collection if we wish to evaluate the program reliably and validly. We must insure that essential data is collected as it is generated, not at the end.

Let me give an example. There are three kinds of psychological assessment which we do or in which our staffs are involved in the prison system.

The first is screening and, of course, that is the simplest. The purpose is simply to assess an offender's suitability for a specific intervention program; that is, his behavioral traits, his drug or alcohol abuse, his mental retardation, or vocational aptitudes. That is a screening process. It can be done by paraprofessionals.

Second is classification. Here technicians are required. The purpose, of course, is to select an optimal program from options which are available to a particular offender. We must keep in mind the needs of the security system. Is the man a security risk? What is his generalized rehabilitation potential? Then we try to find a placement for that individual.

We may use some tests. The Strong Vocational Interest Blank would be a good example of what might be used among others.

The third, the diagnostic assessment, requires a professional. We have three levels. One is the competency level, the mental health status. Here we use interviews and we use personality inventories such as the Minnesota Multiphasic Personality Inventory. We use projective tests. That is level one.

Level two would be a questioned specific. Perhaps a judge or someone had asked a question and they want to know an answer, such as a particular characteristic or a set of circumstances. An example would be severe mental retardation. There we might use the Wechsler Adult Intelligence Scale as one of the measuring instruments. That is level two.

It is costly when we get to level three so it would be selectively used. However, for comprehensive assessment we would attempt to identify and analyze all of the significant influences which contribute to the offender's behavior. This is exhaustive and in-depth. It includes interviews, tests, and written reports.

Why is this information important? Why should it be collected progressively? There is a wide difference in participant abilities. I do not think anyone in the room would be naive enough to think that a given program is going to have the same impact on two individuals who are widely different in their abilities.

If we ignore these differences—and they are ignored in study after study that has been reported in the literature—these introduce a bias into the measured treatment effect.

How often should measurements be made? Ideally, in a program such as the one we have at Fort Grant, data should be graphed daily or at least weekly both by the participant and the coordinator of the program. We need an objective view as well as the individual's own view of what is going on as far as he is concerned.

What would be the examples of ongoing measurable outcomes? This is always one of the toughest things—how do you measure an outcome so that you can definitely say that something happened here and this is the degree to which it happened?

Examples of this might be the degree of psychological distress that the individual is experiencing or that it is observed that he is experiencing, or his nonproductivity. Yesterday we heard Monte MacKenzie say that he had been nonproductive. What degree of nonproductivity are we talking about?

Again, we can measure objectively participation levels and, of course, client satisfaction. What I am suggesting here is a program that would be self-evaluating. It would continuously monitor its own activity so as to determine whether it is meeting its goals or even whether these goals should continue to prevail. It may be that we will want to change some of these goals as we go along. New alternatives should be pursued at all times to better serve the desired outcome.

We ought to make certain that the measures we use are equally applicable to all types of clients and possess demonstrated validity and reliability.

The periodic reports should be made by the evaluation staff of this project at 3-, 6-, and 9-month intervals. Regularly scheduled workshops, at least every 6 months, would bring together directors of the units for information sharing and process analysis.

Policy and management decisions could be made, timely decisions, capitalizing on the significant changes which would be revealed by the evaluation system.

There must be a post-therapy individual assessment of each participant with a followup system for at least 1 to 5 years or else the data collected, which is now 4 or 5 years old, is no longer relevant to that individual or to the program itself.

The annual summaries of the outcomes of these short-term periodic reviews of the data would constitute the overall evaluation. What I am saying and what I am recommending is that before this bill proceeds to the Senate floor that a section be inserted, an amendment, to place the evaluation component into its proper perspective and that in the planning stages we take into account how much we can save not only in money, but in time, effort, and efficiency by making this a part of the initial program.

I want to speak to one other point that came up after the meeting yesterday. That was the confidentiality provisions, the privileged communication, et cetera.

In looking through it and talking with several people, I find no problem——

Senator DECONCINI. Excuse me Dr. Shutt. I am going to have to leave the hearing but staff can continue to take your testimony and ask some questions of you, Judge Collins, and Mr. Harrison. Please excuse me.

Mr. SHUTT. Certainly.

Senator DECONCINI. Thank you very much for being here today.

Mr. SHUTT. Thank you.

I believe that this will represent no serious problem because it is perfectly possible to use the present folder, the Federal prison folder, if we eliminate the exempt material. I am told that there are recommendations, there are special notes from interviewers and so forth in that folder which are quite confidential and would be subject to the Butler amendment.

I feel that the other data should be available. This could be coded omitting identifying features, such as number—as in Arizona, the Arizona State prison number—and name. But the data could be identified simply by a code which we could insert in our program for the computer. I do not see that as a serious problem at all.

The other data which we would collect becomes a part of a confidential data file. We would want to make certain that only those people who need to know have access to the data and that individual privacy is respected at all times.

Basically what I am proposing is more efficient. Indeed, it may be an essential part of the implementation of this important legislation that we are here to discuss today.

That is really all I have to say unless there are questions that some of you would like to ask.

Mr. HART. Thank you, Dr. Shutt.

Mr. Harrison, would you rejoin us now, please?

Mr. MCPIKE. This confidential data you discussed, did you have similar type of data in Arizona?

Mr. SHUTT. Yes, sir. Yes, we do.

We use the Offender-Based State Criminal Information System which is computerized and contains the data bank for all persons who have been incarcerated, such as convicted felons and so forth, in the State.

Unfortunately, this is probably one of the things that made me so strongly recommend that we do an evaluation component at the outset rather than at the end. We found ourselves hand-collecting data which should have been in that data bank but which was not. This was very expensive and time consuming.

Mr. MCPIKE. The concern I have is that we have heard quite a bit of discussion, especially yesterday, about the necessity to keep what goes on within a therapeutic community confidential. I am wondering if the procedures which you have discussed for collecting this confidential data could be made sufficiently clear to the inmates and participants in the community that their confidentiality is in fact assured while at the same time collecting all of this data.

Mr. SHUTT. Indeed the subjective collection of progress and so forth will be done within the therapeutic community, not by evaluators from the outside.

I would propose a series of graphs. I do not want to go into great detail as to how this can be done, but it should be with scaled, weighted sections so that each participant could monitor his own progress, fill in his own graph, at the same time his coordinator is filling one out similarly, who himself is an ex-offender or present inmate. This is because I would want to compare a view from the outside with a view from the inside.

That kind of data is perfectly confidential because all we have is the graphs at the end. The other data, the psychological testing data, perhaps that would be an example of what we are talking about here. With computer codes and computer printouts we can protect without any question the identity of the individual.

In our position as evaluators, we are not interested in knowing what the individual's name is or identifying him separately from a group.

Mr. McPIKE. Mr. Harrison, in your experience do you believe that this data collection can be done in a manner such that the inmate would actually believe and have faith in the confidentiality of the material?

Mr. HARRISON. Yes, I think it can. In the area of confidentiality, which is an important point, I think personally what a man is most concerned about being confidential is this. If I tell you of things that I have done in the past or I tell you of some of my experiences, am I going to be held in jeopardy in some way, rather than the fact that I was here, the fact that I lived in this program, and the fact that my IQ score went up, the fact that I had a number of disciplinary reports, and the kinds of things in which we are interested in collecting data? Those for the most part are a matter of record of behavior. We can protect a name from that. The issue of confidentiality has to do with some of the real deeper, more personal levels. There are two levels there.

Mr. McPIKE. Dr. Shutt, I would like to refer to the earlier part of your testimony when you mentioned some negative factors that have resulted in the failure of past rehabilitation programs.

How do you see therapeutic communities as being affected by these factors?

Mr. SHUTT. The negative factors which frequently arise in the literature regarding studies that have been done in our Federal as well as our State prisons are related to a lot of environmental and internal factors.

In some cases the attitudes of the staff at the particular institution, the game that they play of "I'll beat you up as a security person if you don't do what I say immediately," creates a fear environment. In essence, it negates any type of program for rehabilitation that may be going on by introducing this fear element between guard and inmate, between inmate and inmate, and between guard and guard.

I am happy to say that in the history of the Fort Grant Training Center that first case of assault within the compound has yet to occur, to my best knowledge.

Mr. McPIKE. How long has that program been running?

Mr. SHUTT. Four years.

There is no element of fear. Much of this is really the effect of the administrator, the superintendent, Mr. Cliff Anderson, who permits no brutality. Of course, this was also—and still is—the excellent philosophy of Mr. John Moran, who does not believe that brutality has any place in a penal institution.

We do not have this fear. Fear confuses and confounds the data, which makes it appear that the individuals did not benefit. That is one example.

In other cases they have used bad models. From a research psychologist's viewpoint, the model was inappropriate. They used tests of significance that are better for running rats than for measuring people.

It has been said, truly, that we can prove anything either way with statistics. I am sorry to say that it is usually possible to do that. It depends on how you ask the question.

We can design programs, statistical models, to answer almost any question. We will need definition of terms here. Very definitely we will have to have an agreement on what we mean by even transactional

analysis. How do we define the therapies? How do we define the techniques? How do we define what we mean by recidivism, for example?

Is a person who goes back to prison 3½ years after he has been released, at the same level of recidivism as the individual who is back in 6 weeks, or did he come back for the same reasons? Was it in one case a minor violation, and in the other one a very major one?

What constitutes success? Is it an all-or-nothing thing? In the drug culture experiments, that kind of study, yes, that is what they use. It is yes or no. He either does not go back, he stays clean, or he starts using drugs, in which case it is a failure. I do not see that. There is a degree, a continuum, that these things must be placed on.

Mr. McPIKE. How do we establish where on the continuum we are going to draw our line?

Mr. SHUTT. This is up to the staff that does the initial planning to set goals that can be operationally defined, and in which agreement has been reached on each point. When this is done, then turn it over to your evaluation team, and we will tell you whether you reached it or not and the extent to which you reached it.

Does that answer your question?

Mr. McPIKE. Yes, I think so. It also explains the need to have this evaluation component put in at the beginning rather than at the end of the program.

One question I would like to ask all three of the members of the panel is this: Based on your own experiences with therapeutic communities, assuming that enough resources were made available to offer the types of modalities we have discussed here in the past 2 days to a large percentage of the inmate population, what impact on recidivism and the attitudes of prisoners do you feel we could make?

Do you feel, as Mr. MacKenzie and Mr. Simons have discussed, that 60 percent of the people want to change their behavior or is this something that is only going to impact on a small portion of the inmate population?

Mr. COLLINS. First of all, in my opinion, we have enough resources if we just reprioritize how we spend them. When we consider a person we do not save and whom we could have saved and who goes back out and kills someone, you cannot measure that cost in dollars, but the prosecution and investigative efforts you can. There is a phenomenal difference in prevention costs and the cost of not preventing a crime from happening. It would be money well spent to utilize this type of thing just from the standpoint of cost. No new money is needed. Prioritizing what we are already spending—and wasting—is needed.

If we are really sincerely interested in the humanistic view, then I think it essential that we try to make available to all of the people who are incarcerated, an opportunity to change their ways if they so wish. We have to give them the incentives, the direction, the support, and the encouragement. We cannot just lay the program out there like you're throwing a bunch of grain to your chickens and say, "Eat it or die." That is not going to do it.

We have to encourage them to avail themselves of these programs. That is why I am for a very wide variety of opportunities within this type of program. It does not cost much at all to offer a great variety of alternatives to such a program.

I do not know how many will take advantage of it, nor do I know what the rate of cure would be. However, like Dr. Shutt, in measuring success I feel that if you have a guy who is terribly criminally oriented and every time he turns around commits a serious crime; and if you can just cut his activities down one-half or even to a lesser type of crime, you may have realized a great success as to him and at a very little monetary cost.

I think the things that drive people to cause events to occur are the same whether you are a banker wanting to build a bigger bank or acquire three more, or whether you are a guy who wants to rob the bank. You have your own personal reasons for trying to show success; and you have your own ways of doing it, lawfully or criminally.

The heart of a program like this would be to try to encourage people who are already paying the price for having done a wrong to understand there are other ways for them to get satisfaction for themselves, and power for themselves, and that you can show them a way. Maybe they do not know another way.

I do not know how many would avail themselves of it or how many would be cured if they do, but I think that is not a real worry in setting it up.

I have a belief, for example, that the difference between man and animal is the right of free choice. I believe that until the last stroke of life on this Earth, a person who is alive can change, if he wants to do so, with the appropriate assistance and incentive offered to him. I think he can in most of the cases make a change, provided the appropriate assistance is offered at the right time.

I know that some prisoners are so far over the hill that they are not going to change. I do not think we should let that stop us from making it available to those who can and those who will. Adult people who are doing wrong are grown up little children who have not changed their ways and have not found personal responsibility. We should attack that situation and allow them an opportunity to change their ways by showing them a reasonable way to develop personal responsibility.

That is why I think this program should also be made available to the young offenders who are in the Federal system. I am very interested in making it available on all levels in the communities to keep kids out of the criminal justice system. If we can change someone who is 38 years of age and who has had a long history of crime, maybe we should have tried changing him before he ever got into that long history of crime, or maybe we should have tried to prevent his getting into crime in the first place.

Although we will not know exactly how many will get involved and how many will succeed, it is essential that we make it available and then involve all of the appropriate encouraging factors to try to get as many involved in the program as we actually can. Some of them may not succeed the first time, may go back to their old ways, and at a later time come back in if they are not ostracized and kept out of it by a reluctant or arbitrary staff member.

It is extremely essential that the legislative intent be made known so that administrative staffs cannot drag their feet and make it hard for a given individual to get involved. Otherwise, if staff does not like the way he presents himself, staff may try to discourage him. I do not think this is a matter for the staff at all. This is an overriding matter

for the benefit of these United States and people in general. Congress is the one that ought to take a great hand in it right now.

Thank you.

Mr. SHUTT. Do you have any other questions?

Mr. MCPIKE. I would like the other two members of the panel to answer the question, which was the impact——

Mr. SHUTT. Yes, I recall the question.

My attitude is that it should be made available insofar as possible. I would not want to remove the element of the volunteer. Any program that is superimposed runs the risk of losing a great deal in motivation on the part of the participants.

In the therapeutic community, as we have seen it in operation at Fort Grant, it is essential that participants be volunteers. The selection process from the volunteers is one that is difficult, because we have not sufficient facilities to take all who do volunteer.

Mr. MCPIKE. Assuming that those facilities are made available, how many people do you think have, as Mr. MacKenzie said, the want-to to change their behavior?

Mr. SHUTT. This is hard to assess initially. It may be impossible.

If we had sufficient facilities, it would be important to try to find out during the process whether the motivation is really sufficient. We do that at the therapeutic community because those who wish to participate must enroll in a TA class. Depending upon their progress, the sincerity which they show, and their actual observed participation, the behaviors as they are observed are key points in concluding which of the volunteers can be accepted into the program.

This is something we would want to retain because no implied benefits, other than personal change, are ever made. No special parole board letters are written. No special privileges are extended or promised. Certainly no punitive measures are taken to anyone who wishes to drop out.

The facilities should be made available insofar as possible to a maximum number of individuals. Once this is done, then it is up to the individual to demonstrate his sincerity, his wish to change—his want-to is what we call it.

I would like to correct the record on one point. I think I may have said that the Offender-Based State Criminal Information System was tion of Mr. Karl Tucker. The program is being brought up and I am sure it will be on live very quickly.

That was my comment on the facilities. Perhaps Ted Harrison would want to comment.

Mr. HARRISON. In your question regarding impact, I hear two major points: Basicaly, how many people will we reach in a prison population and how well related to recidivism?

In terms of how many, that depends on the sophistication of the prison culture in the institution. If you are in a maximum security penitentiary, you can expect about 10 percent of the population at any one point in time being actively involved. This includes people who may be involved, leave or be put out, and then at another time come back. At any one time it is about 10 percent.

In a medium security institution or an institution that has not as sophisticated a culture, it probably would be more along the line of 40 percent.

If you are talking about juveniles and people who really have not made a commitment to crime, and a commitment to this kind of a lifestyle, you could probably get better than 70 percent interested if you had this facility available.

It seems to me there was something else I wanted to say but I forget it. If I remember it, I will tell you.

In terms of how well related to recidivism, I can tell you this first regarding the Oxford program and then the therapeutic community at Marion.

In January of 1976, when the therapeutic community at Oxford was 2 years old, it needed some kind of idea about where people were at, so I took a month's period of time and looked at everybody who was in the program. I found out how many people were actually out on the street or had been released to the streets, either directly or through a State detainer. I included anybody who had lived in the program for anywhere from 2 days on up to 15 months or so.

Out of that number, at that time 31 were paroled and living on the streets. There was an additional three people who had been paroled and were back. One of them committed a new crime; the other two were back on a parole violation—for example, being out of bounds, drinking, or something like that. One had committeed a new crime. That is more of a subjective thing.

In terms of the Marion program, I recently talked with Dr. Bowles who is in the process of putting some recidivism material together about the therapeutic community at Marion, which involved everyone who was in the program from 1970 to December of 1976.

Out of that group, there was a total of 97 people who had been in the program and were out and are still out. There was a total of 22 who were recidivists. There was a total of 67 who were still in prison. More specifically, it breaks down like this. This is an interesting breakdown, I think:

For people who were in the program less than 6 months, there were 17 people who were nonrecidivists and 5 people who were. This breaks down to about 29 percent returned.

For people in the program from 6 to 12 months, there were 41 nonrecidivists and 11 recidivists, which breaks down to 26 percent returned.

For people who were in the program 12 to 18 months, there were 13 nonrecidivists and 3 recidivists. This breaks down to 23 percent returned.

For people who were in the program over 18 months, there were 26 nonrecidivists and 3 recidivists, which breaks down to 11 percent return rate.

You can see that the longer the period of time, the greater the probability of somebody staying out.

An interesting thing was pointed up here, too. Of those who did return, they did it within the first 2 years. This is actually the opposite of what other data tends to suggest—that the longer a person is out, the greater the probability of returning to prison.

In this sample here everyone who stayed out for 2 years remained out. There was no one who went back after that 2-year period, which is the direct opposite of some of the other data, as I have pointed out. To me, it is a most interesting point.

Mr. McPIKE. Thank you very much.

I have one last question. Do you consider the size of your study there to be statistically significant?

Mr. HARRISON. I cannot answer that because I am not doing that. We would be dealing with 186 people with the Marion group who had been involved in the program.

Mr. McPIKE. Thank you very much. I do not have any further questions, Mr. Hart.

Mr. HART. Dr. Shutt, I have several questions to clarify your testimony regarding evaluation.

As I gather what you said subsequent to your initial statement, you are suggesting a standardized form of data collection or a standardized mode as opposed to a specific agency? Is that right?

Mr. SHUTT. I think both. The folks who are going to do the evaluation, as I read the bill, should be involved early and not selected down the road a couple of years, 5 years, or whatever, when suddenly it occurs to someone that to continue the program beyond even 1986 that the bill specifies it is time that we decide whether it is worthwhile. It is far too late at that point to really obtain valid data.

I believe that if an agency is to be involved, then this agency should be selected by the director or the administrator as early as possible. They should be made an essential part of the initial planning phase, so that the proper data can be collected routinely and in an orderly fashion.

I do believe that there will be some subjective data. There has to be. When you deal with people, you are not dealing with beans or potatoes. It is a dynamic process. It is a subjective process.

However, to the extent necessary for a valid study, I think this should be collected in a standardized manner and with definitely agreed upon definitions of what the terms mean that each person applies. We do not call a person mild in one case, moderate in another, and moderate-to-severe in another with the same behaviors under the same type of circumstances.

Does that answer the question?

Mr. HART. Yes, I think it does.

The bill provides the Attorney General would select an appropriate agency. I would presume that would be a Federal agency.

I would like to ask you this based on your experience. There are several Federal agencies in this field which are denominated as research organizations, some more than others. I will not ask you for a specific recommendation, but there is a National Institute of Corrections which serves the Bureau of Prisons specifically. They are statutorily, at least, designated as more or less a pure research organization.

Do you think that the National Institute of Corrections would be equipped to do that?

Mr. SHUTT. Certainly. I think they would be equipped to do it.

However, I have some reservation about a Federal agency evaluating a Federal program.

Mr. HART. Do you mean as opposed to a private, nonprofit organization?

Mr. SHUTT. Exactly. We have found in our field of evaluation research that conflicts of interest are common and that other considerations frequently enter into the conclusions as reported. An outside

group, a private contractor perhaps, that has no vested interest and is not bound by the restrictions that may be placed on governmental agencies may do a more valid job. It would have greater credibility; let's put it that way.

I am always worried when even a school system does its own evaluation. I served for many years on the North Central Accrediting Agency in accrediting colleges, universities, high schools, et cetera. Every effort is made to bring in people who have no personal or vested interest in the evaluation that is going on. The objectivity obviously is much greater under those circumstances.

Mr. HART. I presume you would be suggesting then perhaps a private contractor to do evaluations on a standard basis of the entire 10 programs?

Mr. SHUTT. I believe it would be more efficient. I am certain it would be cheaper in the long run than to have an established agency do it.

Mr. HART. In your opinion, how would that impact—and perhaps, Ted, you can comment on this, too—on the confidentiality-trust aspect?

That would mean then that as a condition of drafting an agreement for admission into participation in the program that a resident or an inmate would consent to the disclosure or the release of essentially criminal record information, Bureau of Prisons information, parole board information, probation officer information, and so forth and so on, to this private, nonprofit contractor for purposes of evaluation.

Based on what you said before concerning coding and everything else—and, Ted, based on your experience—would that have any more of an impact on the trust relationship in the community than the release of that information to a Federal evaluative agency?

Mr. SHUTT. I think not. Because the identity of the individual could be protected very easily through a coding mechanism, the private agency could not identify any one person. They would have no way to do this. This can be done and is done all the time.

Mr. HART. The mere fact that the information would be falling into private as opposed to custodial hands, that would not have any significant effect?

Mr. SHUTT. My own view of it is, no, I don't think so. I know the attitudes of the inmates in Fort Grant, for example. They fear data collection with their names on it because they have good reason to fear it. It may be used at some time against them.

I think they would fear just as much your own agency having that information as they would a private agency—in many cases probably more because they would see it as being fed back in at any time that the agency itself, the Federal Bureau of Prisons, had need for it. It would be available to them.

In a private agency the results might be the only thing. I think they would feel even better with a private agency having it than they would a Federal agency. That is my own attitude toward it.

Mr. HART. Mr. Long, would you comment on that?

Mr. HARRISON. Yes.

I think that with the private agency names could remain confidential and that you could guarantee this. That in many ways would be better.

If the issue around believability or whether this is true was an important issue for a particular man, then that is where you would start

with him in terms of where he is at. The real issne in his life—and perhaps he has not thought of it—is whether or not he is going to come back to jail and whether he wants to live the rest of his life in jail. Is he willing to let some research information which protects his name stop him from doing that? That would really be the first area of confrontation between a competent director and the people in these programs. You would probably be talking about a minimum number of people where that would be an issue.

Mr. HART. I have one more followup question along this line.

Dr. Shutt, in terms of suggesting a method of data collertion or a statistical analysis or evaluation, is there a model that you would recommended that has a name besides Shutt?

Mr. SHUTT. No. Let's don't put the name of anything on it at the moment. No.

What I would like to suggest is this. A model should be prepared for an evaluation. As I would predict the progress of this bill and the implementation of the program, we are looking at at least 18 months to 2 years prior to the actual implementation of the first program.

In that interim period it would be highly advisable to develop an evaluation model which would be available at the time the bill was implemented and the planning phase began.

Certainly there is no magic about designing such a model. Any good researcher can design the model. All we need are the questions that need to be asked, and the statistical procedures. We can design them for virtually any type of question that needs to be answered.

Mr. HART. There is one other line of questioning which is of vital importance to the subcommittee and the committee. I would direct this primarily to Ted Harrison because he has had the most experience in the Federal setting, but please feel free to comment on this particular situation.

There is a case pending in the western district of Michigan involving prisoners incarcerated in the MCIP in the State of Michigan which has styled a behavior modification program. What this case seeks to do is to develop four case holdings—two Supreme Court cases and two circuit court cases.

The central issue before the single judge and expert panel at this point is to determine whether or not an inmate can constitutionally give an informed consent for participation in such a program in the prison or incarceration setting. Both sides have stipulated certain facts with respect to the MCIP.

Running through this particular complaint are facts concerning lack of voluntariness, participation in the program as an alternative to long-term segregation in one of the other three maximum security institutions, and also pressure and alleged harass by staff for participation in the program and continuation of the program.

The reason I am directing this to you, Mr. Harrison, primarily is because of your attachment to your paper concerning the master plan for Oxford. It is the closest thing we have been given to a statement of mission or a model on what a therapeutic community would be.

To your knowledge, is the information stated in the master plan reasonably current? Is the program progressing the way it is outlined in the master plan?

Mr. HARRISON. No. In the master plan at that time it talked about two programs under the TA unit. One was a therapeutic community and one was a functional unit program. The therapeutic community was voluntary and people were there basically to change their lifestyle, whereas the functional unit was not voluntary. People were assigned there on a random basis.

Transactional analysis was to be taught in the program and people were to have that available to them. Perhaps TA would be used as a problem-solving tool in the management of that unit. That part of it was never done due to institutional needs on building space and whatever.

Mr. HART. What that means is that there was greater need to house maximum security prisoners in some of the units designed for minimum or medium security? Is that what "institutional needs" means?

Mr. HARRISON. No. It was largely on a staffing basis. At that time they wanted to try out another program. Therefore, they took the space that was designated for the functional unit and turned it into another program.

They already had three pretty good running functional units. So the space and some more staff were made available for that. Rather than duplicate, they decided to see if they could do something different.

Mr. HART. As you know, some of the Bureau's behavior modification programs were heavily criticized earlier in this decade, particularly project START, which was terminated in February of 1974 and also the CARE program which eventually became the control and treatment unit program.

Essentially, as I understand it, Bureau programs which are ongoing, which Director Carlson identified yesterday, are programs which serve as alternatives to segregation. That is my understanding.

I think this is crucial to the issue of voluntariness. All three of you please comment on this.

Under any circumstances, should a therapeutic community program be offered as an alternative to segregation, particularly in a maximum security environment?

Mr. HARRISON. My answer is no. I believe for a man to make it in a therapeutic community he first must be walking his own walk and making it in the institution compound. I have worked with a large number of people who have been in segregation and I have received a large number of requests from guys saying, "Hey, get me out. I'm willing to do anything to get out of the hole, including coming into your program."

My response to them is that this program is a voluntary program and that in order to qualify to volunteer you have to be living in the compound, doing the things that you are expected to do there.

If they really want to get out of the hole, that is OK with me and I may even be willing to work with them individually in terms of giving them information so that they might get themselves out of the hole and make it on the compound. Then we can talk about the program.

Some of my best students come from segregation, but the first thing they had to do was to demonstrate to me that they could make it on the compound. Then we talked about whether they wanted to be here or not.

This is similar to the issue about the difference between getting out of jail and staying out of jail. I am not interested in talking to somebody about getting out because the vast majority will. There are a few exceptions to that, in which case I will talk to them about it after time goes on. The real issue is whether or not a man is going to stay out. That is the emphasis.

In terms of the voluntary aspects, they must remain on the prison compound and function adequately according to those standards. Then I would be willing to consider them.

Does that answer the question?

Mr. HART. Yes.

Dr. Shutt, do you care to comment?

Mr. SHUTT. An unequivocal no. No special privileges should be offered or implied in any way that participation will affect his day-to-day assignments, his work assignments, or whatever. To do that destroys much of the essential part of this whole idea. To set them apart as an elite will certainly change attitudes of the security force toward them, of their fellow inmates toward them, and their attitude toward themselves. They begin to regard themselves as some special elite. I think this is counterproductive to such a program. Therefore, I would insist, I believe, that this not happen.

Mr. COLLINS. I disagree a little bit. I am not so sure why people are segregated. It might be because of the use of some bad discretion on the part of the staff who segregate them. The people who are segregated are probably the ones you and I would like to have change their lives so that when they get out—and most people get out—they will not continue doing things that we would consider bad.

Within the limits of not destroying the program for everybody, we should make it available and the encouragement available also to those people who are segregated in some appropriate manner; and also with a view toward trying to determine are they legitimately segregated or is it just a bad decision on the part of staff. This is why staff should not be final decisionmaker as to who can enter the program.

We should, of course, take into consideration some of what both of these gentlemen said about prisoners who are legitimately segregated having to work themselves into a position where they can avail themselves of this program; as opposed to the case of one who gets thrown in the hole for something legitimate and then is able to get himself right out by merely saying he wants to go into this program. To that extent, I would agree with the other two gentlemen.

Mr. HARRISON. I would like to say a little bit more. I have another thought.

On one occasion a warden tried to force a particular inmate on me and into the program because he thought it would be to the good of the man. It was probably one of my biggest hassles, at that time anyway, between the warden and me.

He definitely could use something from the program. The warden was unwilling to let him live in the compound unless he was in the therapeutic community. I told him, no, that that was not the case and that he had to live on the compound first and do it just like everybody else. Otherwise, it would not be successful. To do that, to take

that kind of administrative action, would seriously undermine the effectiveness of the program.

The issue really is social control. I spoke about that earlier. A man must exercise social control first and then he can volunteer. That is basically what I tell people regardless of where they are, whether they are in segregation, or whether they are any place. First they must do that and demonstrate it not only to me, but to the other people who live here. Then we can talk about their coming into the program.

Mr. HART. That is the fundamental tension in that particular case. The plaintiffs are alleging that the interests are different. You are stressing individual self-control where the correctional institution is stressing group control.

Mr. HARRISON. Yes.

Mr. HART. In the very same master plan, the statement of the mission of Oxford is to contain and control while providing correction. It is a question of selection and perception.

Let me put it to you this way.

Mr. HARRISON. That is the institution statement. That was copied from their master plan.

Mr. HART. They are the persons who will be charged with implementing the program.

Mr. HARRISON. Yes.

Mr. HART. In the Michigan case, another thread that runs through the stipulated facts is that the persons who were ostensibly volunteers who were transferred to MCIP for their segregation program—or behavior modification, call it what you will—said that they received misrepresentations not necessarily from the institution's heirarchy but from the staff about the purpose of their being at MCIP, what their behavior at MCIP would get them.

Of course, the bill talks about no express representations about affecting length of sentence or anything else. This goes back to the issue of simultaneous staff training.

I presume you would agree with the other witnesses that correctional staff training is important, if not essential, to the success of this program.

Mr. HARRISON. Sure, they must support the basic philosophy and concepts of these total learning environments as they fit in the institutional structure.

Mr. HART. Let's drop back down to the structure of the community itself.

Of course, the reason Project START was so heavily criticized was because it used the system of rewards, punishment, and points in an attempt to "control" volunteer behavior.

Is there any similarity between the process used in the START program; that is, rewards and punishment in a real sense, such as privileges, tokens, free use of commissary, meals, recreation? Is there any positive or negative reinforcement—I am a layman so that is the only term I can think of—involved in the therapeutic community setting?

Mr. HARRISON. I think it is different so I would answer no. With the START program or those kinds of things that you are talking

about, positive reinforcement was used in order to get somebody, say, out of segregation and back into the population where he would be on the same level as everyone else.

In a therapeutic community before a guy can volunteer, he must already be in the population and already be at the same level with anyone else. In fact, when he comes into a therapeutic community, he is making a commitment to be more invested in himself and others. He is making a commitment to do something that is very difficult, something that is not easy, some things that he may not like to do. That is why the volunteer aspect is important because he can leave.

If he were transferred from another institution, let's say to one in which I was working and which had a program, one of the conditions of transfer is that it be a round-trip ticket so that if he volunteers out, he can go back exactly where he started from. That also cuts across the possibility of manipulation of a transfer from one prison to another prison.

Mr. HART. Here is what I was referring to. I think it is a little more mechanical than that. In the Project START documents that I saw, the operational memorandums and things such as that, they used a points assessment scorecard system wherein an inmate or a volunteer was required to complete a successful scorecard doing a minimum number of things per week, such as two showers, two shaves, getting a haircut, neat personal appearance, and neat living area appearance.

Does that appear in the TA therapeutic community setting?

Mr. HARRISON. No. People are confronted sometimes about sloppy appearance so it would be unfair for me to say that we do not talk about how one appears or presents himself to the world, but it is not on that kind of a scorecard basis. People are not reinforced for looking good and given certain rewards or other kinds of things for looking good.

Mr. HART. It is confronted either on a game or a counseling basis as opposed to a ledger or scorecard?

Mr. HARRISON. That is right.

Mr. HART. In other words, it is part of the therapeutic modality as opposed to being an accounting system?

Mr. HARRISON. Sure. If you want people to stop treating you like a junky and a slob, you have to stop looking like one to start with. People are talked to in those kinds of terms and in that kind of a way.

For instance, we might say, "You wonder why each time you go out on the compound some officer is grabbing you and shaking you down to see if you have dope on you? Well, look how you look. Look at what you do. Listen to how you talk. Perhaps that has something to do with it. If you decide to change that, then it will affect your relationships with other people." People then are encouraged to do these other kinds of things and to live in a different kind of a reality in that sense, aware of and more in harmony with what is going on in their current life situation.

Mr. HART. Talk again in terms of institutional control. The bill specifies removal of a member by the director for specific infraction. Now, in the context of its existing Federal correctional institution, what would occur, for instance, in the case of a disciplinary violation

of turning over your plate in the messhall or something which does not specifically fit any of these specified categories?

Mr. HARRISON. I am glad you brought that point up because that is one area with which I have a bit of a problem. I think that it is too limited. It needs to be more general.

It states specific reasons for somebody to be removed. I think it needs to be more general. I can tell you my personal philosophy.

If somebody decides to play their cops-and-robbers game where it involves their going through the complete cycle again and requiring the lieutenant or the captain to lock them up again and put them in segregation for a few days' time, I view that as being a major recycle in terms of their old ways of relating to the world, in which case I want to recycle them through the program. That means to put them out and start them over.

If somebody turns a plate over and starts a ruckus in the dining room, that is a major recycle. If somebody turns a plate over and gets in a hassle with somebody else, that I can consider as a minor recycle. I have to use some clinical judgment there on the total picture of what is going on.

Mr. HART. That is precisely the point. Persons outside the program, nonvolunteers if you will, will be subjected to certain disciplinary measures.

Mr. HARRISON. People in the program are, too.

Mr. HART. They would be subject to the same punishment?

Mr. HARRISON. Sure. I do have some information about disciplinary records if you would like me to share that.

Mr. HART. Substantively, what would you do? Would that volunteer be remanded to the Director of the institution to serve out whatever disciplinary——

Mr. HARRISON. He would follow the same procedures as anyone else. I do not think any special procedures should be followed.

Mr. HART. Then would you recommend that he be dropped from the program and started over after that?

Mr. HARRISON. If it were a serious kind of thing and a major recycle, I would do that; yes. If it were minor, I would not. It depends on where a person is in the program. I would relate to a brandnew man perhaps differently than somebody who had been there for a while.

Certain issues such as violence, use of chemicals, and contraband are major issues. Although it is not an institutional rule, confidentiality within the program is a major issue. I do not expect people in the program to go out into the prison culture and talk about what someone else said in a treatment group, in a game, or in any kind of a setting. That is taking house business out where people can play with it. It really infringes on the rights of individuals in the program. That I consider a major rule infraction in terms of me as the Director. I would remove somebody to start him over, although it is not an institutional rule.

Mr. HART. I apologize for keeping you but this impacts on the issue of voluntariness.

Mr. HARRISON. That is all right.

Mr. HART. You have intimated that you would use a certain amount of discretion in determining how to deal with disciplinary violations. In the prison population at large there are institutional rules.

Mr. HARRISON. Yes.

Mr. HART. Doing certain things incurs a certain measure of punishment.

Mr. HARRISON. That is right.

Mr. HART. If it became known in the general prison population that participation as a volunter in the therapeutic community would inject an amount of discretion for disciplinary infraction where none existed in the population at large, would that not be a factor that would affect the decision as to whether or not to volunteer?

Mr. HARRISON. Yes; it would if that were——

Mr. HART. In other words, if they knew that they could get a little better break as a volunteer than otherwise——

Mr. HARRISON. It would in that case. My experience has been that favoritism or discretion that is shown is really in a negative light. It is more difficult because men in the therapeutic community do not generally get a ticket, do not generally get written up for a disciplinary report. In many ways it is quite a prize to catch one of them. If they do, the disciplinary committee oftentimes has a very good time reminding me that one of my guys acted dingy. They have a good time talking to the man and saying, "We've got you now. We don't often get a chance to talk to one of you."

If they are dealt with in any discriminatory manner, they are dealt with more harshly when they are written up. That would affect the volunteer aspects in one sense, but in many ways it would affect in a more negative way.

Although the delusion is that guys in the program do not get written up and they get favored treatment, usually what happens is that problems are identified and solved before that happens. When it does happen, as I say, it is much like a prize.

Mr. HART. But you see the difficulty involved. We are talking about factors which affect the initial decision to volunteer, not what occurs after a volunteer is already in the program. I think that is a critical issue.

Mr. HARRISON. It does not take long for people to realize with the history of the program that it is in a much more negative way.

Mr. HART. Proposed section 4062(a) says, "Members chosen by the Director from volunteers in the general inmate population of that Federal correctional institution. The Director may terminate at any time the membership of any member."

Do any of you gentlemen have any difficulty with that language in terms of how it might affect the decision of a volunteer? Is it too loose? Is it too tight? Does it need to be changed?

Mr. SHUTT. Would you repeat the reference?

Mr. HART. It is section 4062(a).

Mr. SHUTT. I have it.

Mr. HARRISON. I will comment. No, I think that is general enough. Because the program is a volunteer program and it is very clear up front that people are here to change, one of the things that I expect people to do is to change. That is, in a variety of ways.

The director needs to have the option to terminate anyone at any time. Terminate is not defined as excluding or abandoning someone. When somebody is removed from the program, the door is open for them to come back. The director definitely needs that option. That is

solely the responsibility of the director. That is not something that is delegated to anyone else. The director then is held accountable for his decision.

Mr. HART. It goes on to say that members shall be housed in living quarters separate from the general prison population. Based on what you just said about Oxford, the other program, and the need for additional space, does that present any administrative problems in a maximum security setting, particularly in an older institution? Would it be satisfactory in your opinion to separate the therapeutic community in a single wing or cell block?

Mr. HARRISON. Yes; that is necessary. In an institution that is the only way I know that you can insure some kind of external boundaries to the program.

In programs that do not have this clearly defined—say, a program in an old institution that is based on the model of putting 600 people in one cell block and stuff like that—they are going to eventually have a separate place and are renovating a basement, part of a hospital, or something, there is a lot of difference between what goes on before they go into their residential area and before when they are exposed to the population. This is one of the ways of insuring a third culture and is a necessary requirement.

It is more an issue really in older institutions which were not designed like that. Many of your modern institutions have space and facilities for small living units already set up as part of the design for control, part of the design for more humane living conditions. This quite naturally fits in. Oxford is a reasonable example of that in how it was designed.

Mr. HART. Let me give you a specific example. The Bureau of Prisons has been trying to close McNeil, Atlanta, and Leavenworth for the better part of 20 years. Those are acknowledged control facilities. They are maximum security facilities. A large number of the types of people that Judge Collins suggested might most benefit from this program are incarcerated there.

In a situation such as McNeil where there clearly is not too much to recommend a separate culture just in terms of logistics, in terms of game playing, in terms of the counseling sessions, is it feasible to do it? Is it feasible to do it at a place such as McNeil?

Mr. HARRISON. I think so because of this. It has been my experience that in most old institutions there is some space somewhere that was used or there is some useless space that is no longer used in any functional capacity.

I can give Atlanta as an example of a program that at one time had a pretty good plan to start a therapeutic community. Whether it actually reached that level or not, I do not know. I have question. The man who was going to start it moved on.

At any rate, he discovered that there was an old malaria ward in the basement or some place that used to be used for prisoners who were being injected with various viruses as malaria tests. Now that place was used as a storage place and a garbage dump and a place to put extra stuff. Because they no longer used prisoners for experimental programs such as this, this was space that was set aside.

After they discovered this space, what they did was to start to resurrect, change, or modify this small place which would house maybe

20 people. I do not remember how many it was. It was in the basement or some place, literally in the basement.

Many of the older institutions have places such as this that could be used. Actually if a few resources were pushed off in this direction, it could probably increase the bed count in that institution by 20 to 25 people. It is a matter of looking and discovering.

I know of a case in a State institution where there was an old place that they decided to renovate and make into a therapeutic community.

Logistically I know it is a problem, but I think that it is a problem that can be solved. It is a matter of looking under bricks. It can be solved now. When they close down places such as Atlanta and build new places, then they will have a seed group to take to wherever they wish. It is possible.

Mr. HART. Essentially then we are not talking about a hidden cost item or a lot of additional construction in existing Federal institutions?

Mr. HARRISON. No; I am saying that there are examples in some places where that would be the case, yes. You would have to look for it. It would be in places other than the normal housing units.

I have never been to McNeil Island and I do not know what that is like. I am familiar with the one in Atlanta.

That is possible; because we are talking about a bill that makes therapeutic communities available in a number of institutions, we would really only have to have two, or three at the most, in these kinds of penitentiaries. If a man was really interested, he could be transferred from Leavenworth to Atlanta once he got started on a round-trip basis.

Mr. HART. Dr. Shutt, I will ask you this question primarily.

In terms of establishing and trying to maintain the validity of the program, would it be your suggestion that a representative mix of institutions be included—that is, a ratio involving maximum, medium, and minimum plus halfway-house type facilities? Or would that be better governed by the classfication of inmates involved as opposed to the institution? Which way should it be, or should it be neither?

Mr. SHUTT. It seems to me that your research model should contain a very heterogeneous group. Your population should be quite heterogeneous.

I am not sure that you should make an effort—I do not believe that I would—to select a maximum and a minimum security system just to have such a prison in the study. I think you can do that with the population that happens to be there at the time because we have even in a minimum security prison murders and high-crime people who are no longer believed to be maximum security risks.

I am not sure that you should make an effort—I do not believe that I would—to select a maximum and a minimum security prison just to have such a prison in the study. I think you can do that with the population that happens to be there at the time. Even in a minimum security prison we have murderers and high crime people who are no longer believed to be maximum security risks.

More essential will be the section in the bill, as I read it, which allows the superintendents, the wardens, to volunteer their facility as one of these things. If you were to superimpose it by administrative

edict, that you had to have 3 of the 10 maximum security prisons, then this would put some pressure on those wardens that at least three of them were going to get stuck with it whether they wanted it or not. I would hate to see the program begun under those circumstances with possible hostile wardens involved in the program. I think there will be 10 that will gladly volunteer their facilities. That would be infinitely better for the future of the whole program.

From an evaluator's standpoint it would be nice to be able to select which institutions were to get it, and you would select one of the ones we have just described as exhibit A and then you would select one of the medium security prisons built in the past 10 years, et cetera.

I do not think we can afford to allow the evaluator's needs to influence the optimum manner that we may get these set up in the first place. That would be my attitude.

Mr. HART. In terms of heterogeneous populations, what we are talking about here are volunteers. Does that mean then from your standpoint, for instance, in a given institution a pool of volunteers should be screened to try to pick demographic characteristics in order to assure that heterogeneousness? Should it be first-come, first-served or what?

Mr. SHUTT. Again, a nice clean study would select all of the volunteers: You seven volunteers step forward.

This is ridiculous. It would be counterproductive to the success of a therapeutic community.

We must modify our evaluation system to take into account that this is a self-selection process. The man does not get there because he has certain demographic characteristics. He gets into the community by his own behaviors. He remains there as long as he can or decides to remain not because he comes from a certain section of the country and has certain physical characteristics or behavioral problems, but because he is, in fact, benefiting from the whole program.

I would not allow the evaluation component to dictate the structure nor the populations within it. We would have to let the system function as it has been developed already, by individuals volunteering and selection by indication of sincerity and his continued motivation.

Mr. HART. Do any of you have any additional comments?

Mr. HARRISON. With regard to the last question, if you have a good program, you are going to get a variety of people based on the balance in the institution.

Oxford is a good example because not only do they have an institution population, but they have broken the population down into three major groups of behavior. When the institution got going, one group had about 60 percent of the total people in the institution. Better than 50 percent of the people who volunteered for the therapeutic community were from that group. It tended to pretty well balance. As the population fluctuated and changed, so did the people who volunteered for the program. As long as the program is good, I think you are going to get that. That is going to be a natural consequence.

If you discover in your program that you are having people really out of balance with the institution population, then that is a good indicator that something is going on and that you need to look deeper into what is happening.

Mr. COLLINS. I would like to suggest that it be made available to all institutions. If there is a hostile warden involved who does not want

it, maybe he should have some justification for his position. I think it ought to be made available to him. Then if an institution just cannot comply, maybe it should be shut down. Maybe it is breeding more crime than it is correcting.

To deny someone an ability to volunteer for his own benefit and that of the community just because he happens to be at a certain geographical location does not seem right to me, unless he has to be there because he has peculiar habits that dictate that he is so dangerous he cannot be some place else. If so, he probably is not a candidate for the program anyhow.

Mr. HART. Thank you.

With that, the subcommittee stands in recess, subject to the call of the Chair.

[Whereupon, at 12:32 p.m., the subcommittee recessed, to reconvene at the call of the Chair.]

APPENDIX

95TH CONGRESS
2D SESSION

S. 3227

IN THE SENATE OF THE UNITED STATES

JUNE 22 (legislative day, MAY 17), 1978

Mr. DECONCINI introduced the following bill; which was read twice and referred to the Committee on the Judiciary

A BILL

To amend title 18, United States Code, to establish therapeutic communities in Federal correctional institutions, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That this Act may be cited as the "Therapeutic Community Act of 1978".

SEC. 2. The Congress finds that—

(1) significant advances in the behavioral sciences have led to the development of new modalities of psychotherapy, such as encounter or group therapy, transactional analysis, reality therapy, gestalt therapy, and other modes;

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(2) these new techniques offer possibilities of positive growth for persons who desire to change their behavior;

(3) past penitentiary rehabilitation programs have not succeeded in decreasing the incidence of recidivism among program participants;

(4) therapeutic communities are uniquely suited for utilization in penitentiaries; and

(5) therapeutic communities may reduce the incidence of recidivism among Federal prisoners who voluntarily participate in the programs.

SEC. 3. (a) Title 18, United States Code, is amended by adding immediately after chapter 303 the following new chapter:

"CHAPTER 304—THERAPEUTIC COMMUNITIES

"§ 4061. Establishment of therapeutic communities; Committee on Therapeutic Communities; Administrator

"(a) The Director of the Bureau of Prisons shall establish a therapeutic community in each of ten Federal correctional institutions designated by the Director with

the consent of the warden of each institution so designated. If ten such institutions cannot be found, the Director shall designate as many such institutions as can be found.

"(b) The directors of the therapeutic communities, together with the Administrator of the program appointed under subsection (d), shall constitute the Committee on Therapeutic Communities (hereinafter in this chapter referred to as the 'Committee'). The Administrator shall act as chairman of the Committee.

"(c) The Committee shall—

"(1) establish policies for the programs of therapeutic communities;

"(2) approve reports of the Administrator, the budget, and the recommendation by the Administrator under subsection (d) of an agency to evaluate the programs; and

"(3) examine any member of a therapeutic community who has demonstrated ability to become a staff member and certify any such member who satisfactorily meets the requirements of that examination.

"(d) The Administrator shall be appointed by the Attorney General under section 4062, and shall be qualified as a director under section 4064(a). The Administrator shall—

"(1) standardize the programs of the therapeutic communities;

"(2) insure compliance with policies established by the Committee;

"(3) act as a liaison between the Committee, the Director of the Bureau of Prisons, and the Attorney General;

"(4) prepare budget requests;

"(5) recommend to the Attorney General an agency to evaluate the program; and

"(6) prepare and submit an annual report to Congress, the Attorney General, and the President.

"**§ 4062. Authority of Attorney General**

"The Attorney General shall—

"(1) employ the Administrator, directors, and staff, without regard to the provisions of the title 5, United States Code, relating to appointments in the competitive services and the provisions of chapter 51 and subchapter III of chapter 53 of that title relating to classification and General Schedule pay rates;

"(2) acquire such facilities, services, and materials as he determines necessary to carry out the purposes of this chapter;

"(3) enter into contracts and other agreements without regard to advertising requirements for the ac-

quisition of such personnel, facilities, services, and materials which he determines necessary to carry out the purposes of this chapter; and

"(4) select an appropriate agency, upon consultation with the Committee, to evaluate each program of a therapeutic community established under this chapter.

"§ 4063. **Program for therapeutic communities**

"(a) Each therapeutic community shall consist of a director, staff, and members chosen by the director from volunteers of the general inmate population of that Federal correctional institution. The director may terminate at any time the membership of any member. Members may voluntarily leave the program at any time. Members shall be housed in living quarters separate from the general prison population. Members of the community shall meet regularly on the instructions of the director to engage in group therapeutic sessions.

"(b) To the extent possible, members of the communities shall be trained during the therapeutic process as staff. Upon certification by the Committee, and with the approvel of the Director of the Bureau of Prisons, such inmates may be transferred to other institutions as staff, to assist in establishing new theraputic communities.

"(c) Members of the community shall be subject to all

regulations of the institution, with such modifications as are necessary to carry out the purposes of this chapter, and shall also be subject to such rules as the community and Committee may establish. Members of the community shall be subject to the jurisdiction of the warden of the institution for purposes of restraint, custody, and detention. The director of the community shall have jurisdiction over members for all other purposes.

"§ 4064. Qualifications and duties of director; prohibition on disclosure of information

"(a) The director of each therapeutic community shall be qualified in a mental health profession, with training and experience in transactional analysis, gestalt therapy, reality therapy, or other group therapeutic modes.

"(b) The director shall supervise the staff and members in therapeutic processes, and shall maintain a clinical relationship with each member of the community.

"(c) The director and staff may not disclose any information received from any member of the community, except that information relating to the future commission of an act violating any rule, regulation, or law may be disclosed to proper law enforcement authorities.

"§ 4065. Participation as a member; conditions

"(a) Membership in a therapeutic community shall not affect the length of incarceration of any inmate, and the

director shall so inform all inmates volunteering for membership prior to their selection.

"(b) Medical procedures, including the ingestion of drugs, shock treatments, psychosurgery, or other such procedures, may not be administered as therapeutic modes in any program of a therapeutic community established under this chapter. This subsection shall not be construed to limit the availability of medical treatment, including medication prescribed by a physician to be ingested by a member who is participating in a therapeutic community, for purposes other than those of the therapeutic community.

"(c) As a condition of membership in the community, each member shall permit the inspection by the agency selected under paragraph (4) of section 4062 of records maintained by any Government agency, department, or bureau relevant to the inmate's behavior before, during, and after participation in the therapeutic community. The respective Government agencies shall make such records available to the agency except where the records concern an on-going investigation of criminal activity, and except where the records are not relevant to an evaluation of the program. This subsection shall not be construed to authorize the disclosure of confidential information prohibited under section 4064(c).

"(d) The director shall remove a member from the community for—

"(1) threats of violence against another person,

"(2) disclosing information received during community meetings, or

"(3) sexual acts with other members of the community.

"(e) The director may remove members from the community for gambling, stealing, or the use of psychotropic substances.".

(b) The table of chapters for title 18, United States Code, and for part III of such title, are each amended by inserting immediately after the item relating to chapter 303 the following:

"304. Therapeutic Communities..... 4061".

SEC. 4. The provisions of this Act shall expire on September 1, 1986.

MATERIAL SUBMITTED BY NORMAN A. CARLSON

LETTER FROM NORMAN CARLSON TO SENATOR HATFIELD

U.S. DEPARTMENT OF JUSTICE,
BUREAU OF PRISONS,
Washington, D.C., August 3, 1978.

HON. PAUL HATFIELD,
U.S. Senate,
Committee on the Judiciary,
Washington, D.C.

DEAR SENATOR HATFIELD: On August 2, 1978, during the hearings on S. 3227, the Therapeutic Community Act of 1978, before the Subcommittee on Penitentiaries and Corrections of the Senate Judiciary Committee, you asked us to furnish additional information.

The following is a list of the currently-in-operation Therapeutic Communities within Federal Prison System facilities. The first group listed are Asklepieion-like programs; the second group are programs based on other philosophical approaches (the asterisk indicates the best example of each, should members of the Committee wish to see these programs in operation):

Institutions with Asklepieion-like therapeutic communities:

1. FCI, El Reno, Okla.
2. FCI, Lompoc, Calif.
3. USP, McNeil Island, Wash.
4. FCI, Oxford, Wis.
5. FCI, Sandstone, Minn.
6. USP, Terre Haute, Ind.

Institutions with therapeutic communities based on other approaches:

1. FCC, Alderson, W. Va.
2. USP, Atlanta, Ga.
3. USP, Leavenworth, Kans.
4. USP, Lewisburg, Pa.
5. FCI, Lexington, Ky.
6. FCI, Milan, Mich.
7. FCI, Seagoville, Tex.
8. FCI, Terminal Island, Calif.*
9. USP, Terre Haute, Ind.

In addition to the above, the Committee requested information concerning guidelines and control employed by the Bureau of Prisons in its management of program involving therapeutic communities. In response to this request, the following information is appended:

a. A copy of a Masters Thesis describing the implementation of the Unit Management System within the Federal Bureau of Prisons.

b. A copy of the Unit Management Manual.

c. A copy of the recently completed Task Force Report on Drug Abuse Programs.

d. The current Policy Statement regarding Medical Experimentation and Pharmaceutical Testing.

Please let me know if there is any additional information the Committee wishes concerning this matter.

Sincerely,

NORMAN A. CARLSON,
Director.

FUNCTIONAL UNIT MANAGEMENT IN THE FEDERAL PRISON SYSTEM: ITS EVOLUTION, IMPLEMENTATION AND EVALUATION

(By Edward A. Di Toro)

Abstract

For many years much discussion has focused on the manner in which our Nation's penal systems are administered. Whatever the reason for incarceration, the fact remains that the increasing number of incidents of inmate violence and the disturbingly high recidivism rates do not speak well of most of our rigidly structured jails and prisons. A few years ago, the Federal Bureau of Prisons, in an attempt to re-examine its goals and chart its future course in the

correctional field, began a program to restructure its facilities by changing their traditional framework of centralized administration to a decentralized table of organization known as the functional unit management system.

This thesis describes in detail the concept and component parts of the functional unit system and traces its development and implementation to the present time within the Federal Prison System. The paper is intended to inform the reader of the distinct advantages of unit management over that which preceded it, and the position is taken that relatively small inmate groupings, or "units," will become a permanent fixture within the Bureau of Prisons, and perhaps within state and local panel systems as well.

This organization concept, however, is not without its shortcomings and problems, the most important of which are also discussed and analyzed. There is an on-going effort by the Bureau of Prisons to evaluate the unit management programs within its many and diverse institutions. Through the utilization of audits, scientific studies and other reports much has been learned about functional units during their few years of operation, and steps have been and will continue to be taken to modify and improve them.

Finally, personal observations of unit management systems at a medium and a maximum custody institution are also imparted to the reader.

Acknowledgments

I wish to convey special thanks to Mr. Ray Rowe of the Unit Management Section at the Bureau of Prisons in Washington, D.C., as well as various personnel at the Federal Correctional Institution, Danbury, Connecticut and the U.S. Penitentiary at Lewisburg, Pennsylvania for their invaluable assistance in the preparation of this paper.

I am also grateful to Dr. Michael J. Luciano, my thesis director, for his constructive and scholarly advice.

Finally, I owe a special acknowledgment to my wife, Marilyn, and our children without whose inspiration and patience this entire undertaking would not have been possible.

Introduction

The question of whether imprisonment should be utilized in dealing with an offender has long been the subject of sharp attack. A movement for change in the American penal system has occurred within both professional circles and the general view of the public; and has brought about, in recent years, some noticeable revisions in correctional operations and goals. Nevertheless, we continue to read of riots and disturbances which take place in our prisons and jails; and we live with a constant state of awareness as to the high recidivism rates among convicted offenders. Understandably, this has led many to ask whether such facilities have, in reality, contributed anything at all to the effective reduction of crime.

Whatever the purpose of imprisonment—deterrence, punishment, rehabilitation, etc.—there has been what Norval Morris and Gordon Hawkins describe as a "marked tendency" among many experts in the field of corrections—including prison administrators, research workers and others currently working in or observing prison systems—to declare "that all prison programs have proved ineffective." [1]

In 1951, John Barlow Martin, in a widely acclaimed work, remarked:

"The American prison system makes no sense. Prisons have failed as deterrents to crime . . . as rehabilitative institutions. . . . Prisons should be abolished. The prison cannot be reformed. It rests upon false premises. Nothing can improve it. It will never be anything but a graveyard of good intentions. Prison is not just the enemy of the prisoners. It is the enemy of society. This behemoth, this monster error, has nullified every good work. It must be done away with." [2]

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[1] Norval Morris and Gordon Hawkins, "The Honest Politician's Guide to Crime Control (Chicago: University of Chicago Press, 1970), 115. Morris and Hawkins leave no doubt in the reader's mind as to their adverse views on traditional penology: "There is no evidence that imprisonment as a penal method is any more effective today than it was a century ago. If the figures relating to recidivism are taken as a test of effectiveness, there has apparently been no significant change throughout the period through which records are available. It is today generally recognized that institutional incarceration, far from being necessarily beneficial, is in fact usually deleterious to human beings." (124)

[2] John Barlow Martin, "Break Down the Walls," as quoted in Morris and Hawkins, *op. cit.*, 115.

Ramsey Clark, former United States Attorney General, has labeled prisons as "factories of crime," and has mounted a scathing attack on traditional American penology. He maintains that if America cares for its character, then it must revolutionize its approach to corrections.[3] The reknowned psychiatrist and voice for penal reform, Karl Menninger, in his indictment of prisons in this country, argues that punishment as an end is itself a crime in our times. The "crime of punishment," as Dr. Menninger terms it, is suffered by all of society because punishment has regularly given rise to subsequent criminal acts inflicted on the public. The use of prisons to punish, he contends, only breeds added crime.[4]

Two separate National Crime Commissions of the past decade have cited corrections as the weakest link in our criminal justice system and have urged the swift abatement of imprisonment, including a moratorium on the construction of all new institutions for adult and juvenile offenders.[5]

The National Advisory Commission's 1973 report on corrections recommended, "the institution should be the last resort for correctional problems" and provided its rationale: the failure of prisons to reduce crime; their success in punishing but not in deterring; their ability to provide only a temporary protection to the community; and their destructive effect on the offender.[6]

Cesare Beccaria, whose progressive views on crime and punishment were espoused two hundred years ago, and which remain almost sacrosanct dogma for many penal reformers, upheld the necessity of punishment and, if warranted, imprisonment for the offender. While he opposed torture and capital punishment, he viewed incarceration as the necessary alternative. "The end of punishment," he wrote, "[is] to prevent the criminal from doing further injury to society, and to prevent others from committing the like offense."[7] Thus, the punishment should be proportionate to the nature of the crime "in order that it may lead the mind to consider the crime in a different point of view from that in which it was placed by the flattering idea of promised advantages."[8] Beccaria's philosophy became a powerful influence in opening new horizons in penal reform; however, as the National Advisory Commission notes:

"The prison has persisted, partly because a civilized nation [the United States] could not turn back to the barbarism of an earlier time nor find a satisfactory alternative. For nearly two centuries, American penologists have been seeking a way out of this dilemma."[9]

Leslie Wilkins, a noted authority in the field of corrections, maintains the necessity of penal institutions:

"Something like prisons will be needed for a long time. They are needed for the separation from society of persons who cannot be expected to function safely in freedom. Prisons also provide a means of punishment which does not have the unpleasantness of other punishments like flogging and death. Society will con-

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[3] Ramsey Clark, "Crime in America: Observations on its Nature, Causes, Prevention and Control" (New York: Simon and Shuster, 1970). 212–238. Clark believes that rehabilitation must be the goal of modern corrections, and that the direction of the correctional process "must be back toward the community." (220) He envisions community-based supervision as the future of corrections. (238)

[4] Karl Menninger, "The Crime of Punishment" (New York: The Viking Press, 1966). Of particular relevance is Chapter 9, "Have There Been No Improvements?" (219–248)

[5] In February 1967, the President's Commission on Law Enforcement and Administration of Justice issued its general report: "The Challenge of Crime in a Free Society" (Washington, D.C.: U.S. Government Printing Office, 1967). Established through an Executive Order of President Lyndon Johnson in July 1965, the Commission was a joint undertaking, involving the collaboration of Federal, State, local and private agencies and groups, hundreds of consultants and advisors, as well as the Commission's own staff. There emerged several "task force" reports in areas such as the police, the courts, organized crime, narcotics and drugs, corrections, etc. See The President's Commission on Law Enforcement and Administration of Justice—Task Force Report: Corrections (Washington, D.C.: U.S. Government Printing Office, 1967). In November 1973, during the Nixon Administration, a similar body, The National Advisory Commission on Criminal Justice Standards and Goals, released its final report after a two year study. The Commission was funded by the Law Enforcement Assistance Administration and proposed hundreds of recommendations—or "standards"—that the Federal Government, states and localities should adopt with regard to their courts, police forces, corrections systems, and community attitudes (i.e., community crime prevention). See National Advisory Commission on Criminal Justice Standards and Goals: Corrections (Washington, D.C.: U.S. Government Printing Office, 1973). (Hereafter referred to as the National Advisory Commission.)

[6] National Advisory Commission, 1–2.

[7] Cesare Beccaria, Of Crimes and Punishments, as cited in George G. Killinger and Paul F. Cromwell, Jr., eds., Penology: The Evolution of Corrections in America (St. Paul, Minnesota: West Publishing Co., 1973), 3.

[8] Ibid., 5.

[9] National Advisory Commission, 343.

tinue to demand forms of punishment. It is not unreasonable for persons who have suffered from some crime to demead that the offender 'get out of here.' " [10]

In February 1977 the total prison population in the United States reached an all-time high of 283,268 inmates, of which over 28,000 were confined in Federal institutions.[11] James Q. Wilson, professor of government at Harvard University, commented that in view of these staggering figures, a case for a moratorium on future prison construction is difficult to justify:

"Since society clearly wishes its criminal laws more effectively enforced, and since this means rising prison populations perhaps for a long period, the effect of failing to expand capacities would be to continue to perpetuate conditions of overcrowding that brutalize the very inmates whom the moratorium people seek to protect." [12]

Where, then, does all this discussion lead us? Are there any simple solutions, especially when we are dealing with such a complex factor as human behavior? What is or should be the real goal of imprisonment? There appears to be a general consensus that traditional penal institutions have not been successful in reducing crime and, it follows, in rehabilitating the offender. The prison inmate, in such a structured environment, has all but become a faceless person living out a routine and meaningless existence. On the other hand, few would argue that incarceration of some kind or another is essential in order to protect society from those who seriously have transgressed the law. The question invariably arises, "Do all offenders need to be placed in such an environment?" The debate over whether some offenders—or none at all—ought to be imprisoned continues to the present, and it appears that it will be an ongoing one.

The concept of rehabilitation, first introduced with the nineteenth-century establishment of the penitentiary in Pennsylvania, gradually grew in importance. During this century, it increasingly has been viewed by many professionals, especially behavioral scientists, as well as non-professionals, to be the primary goal of the criminal justice system. The emphasis on rehabilitation has come about as a result of a reaction to the "dull hopelessness, acute overcrowding and generally grim inhumane conditions that characterized correctional institutions in the past.[13] However, Federal Bureau of Prisons Director Norman Carlson points out that even the best educational, vocational, counseling, psychotherapy, medical or community services may fail to rehabilitate the offender:

". . . How to change offenders when they have no desire to change themselves is something most criminal justice experts are now willing to admit we don't know how to do . . . Retribution, deterrence, incapacitation *and* rehabilitation are *all* objectives of incarceration." [14] (my italics)

During the last few years, the Bureau of Prisons, in re-examining its goals, has attempted to strive for a "balanced mission" by being realistic in its approach as to what genuinely can be achieved within the limits of present day knowledge of corrections. There are several areas of consideration which the Bureau believes hold promise for improvement of corrections at all levels.[15] They include the establishment within the Bureau in 1974 of the National Institute of Corrections; the increased use of community-based correctional centers; the

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[10] Leslie T. Wilkins, "Directions for Corrections," an article reprinted in Robert M. Carter and Leslie T. Wilkins, eds., Probation, Parole, and Community Corrections, 2nd ed. (New York: John Wiley and Sons, 1976), 73.

[11] Rob Wilson, "U.S. Prison Population Sets Another Record," Corrections Magazine, Vol. 3 (March 1977), 3–22.

[12] Ibid., 21.

[13] Norman A. Carlson, "The Federal Prison: Forty-five Years of Change," Federal Probation, Vol. 39 (June 1975), 39.

[14] Address before the Florida Council on Crime and Delinquency, as reported in the New York Times, July 8, 1976, 38. The emphasis on rehabilitation programs in recent years has resulted in the emergence of inaccurate and often confusing terminology in corrections, which has fostered the belief that we can diagnose offenders much the same as people with physical or mental illnesses. In utilizing the so-called "medical model approach," a course of specific treatment could be found and the offender, once released, would no longer violate the law. Norval Morris, a leading voice of penal reform, rejects the "myth" of the medical model and offers this succinct comment: "It would be a great trick if we could do it, certainly if we could do it without abuse of fundamental human rights; but we cannot." See Morris, The Future of Imprisonment (Chicago: University of Chicago Press, 1974), 15–16. Robert Martinson conducted a systematic study embracing 22 years of so-called rehabilitation programs both here and abroad. The results were disappointing: "With few and isolated exceptions, the rehabilitative efforts that have been reported so far have had no appreciable effect on recidivism." (25) . . ." Instances of success or partial success . . . have been isolated, producing no clear pattern to indicate the efficiency of any particular method of treatment." (49) See Martinson, "What Works?—Questions and Answers About Prison Reform," Public Interest, Vol. 35 (Spring 1974), 22–54.

[15] In November 1969, President Nixon called for a program to improve the Nation's correctional institutions and directed his emphasis toward the Federal Prison System so that it might serve as a model for the states to follow. The National Advisory Commission endorsed this idea. (603)

upgrading of staff through recruitment and specialized training; the encouragement of serious research and the capacity to apply the results in decision-making; the shifting of responsibility for involvement in correctional programs to the inmate; the construction of smaller, more humane institutions; and the development of management models which aim to insure more efficient utilization of resources.[16] The latter program, as evidenced by the introduction of a decentralized management system, will be the focal point of this research. Fully cognizant of the many long-standing managerial and inmate problems confronting it, the Bureau of Prisons, in restructuring the organization of its institutions, has developed and implemented into a majority of its facilities what is known as the "functional unit management system."

The purpose and scope of this thesis will be to trace the rise of unit management within the Federal Prison System against the backdrop of its traditional operations. The concept of unit management will be discussed in detail, and the progress made thus far in the System, as reflected in evaluative studies and audits conducted at several of the institutions already using this organizational design, will be analyzed.

We begin with the acceptance of the proposition that there will always be a need to confine some of society's law violators and that penal institutions, in some fashion, will always be with us. It will not be our intent to determine who should be incarcerated or for what reasons. Rather, we shall examine whether unit management is a major breakthrough in correctional administration and a promising avenue for future prison management. Prison reform advocates have long argued for more humane institutions with more adequate staff/inmate ratios. Unit management holds the prospect of being a positive step towards the achievement of this end and in fostering a more healthy institutional climate.

This writer has had the opportunity to observe, first-hand, the unit management system in operation at two Federal correctional facilities. A segment of this research will be devoted to the presentation of my own observations of functional units at the United States Penitentiary at Lewisburg, Pennsylvania and the Federal Correctional Institution at Danbury, Connecticut.

THE BUREAU OF PRISONS PRIOR TO UNIT MANAGEMENT

From its inception in 1930 until the implementation of the first functional units in the late 1960's, the Bureau of Prisons had operated all of its institutions in similar fashion to most state and local correctional systems; that is, within a framework of centralized management. Initially, all significant decisions were made at or very near the top of a rigid and highly stratified hierarchy, and such decisions were made according to rather simple and well-understood criteria. In this traditional, autocratic operational model authority and status were related to rank, from the warden down to the correctional officer. E. K. Nelson and Catherine Lovell note: "Staff tended to be highly protective of this structure, holding to the closely defined prerequisites and prerogatives attached by custom to the various positions and levels." [17]

The reorganization of many correctional systems in this country within the last few decades has resulted in the emergence of another kind of organizational hierarchy—the non-custodial personnel. An assistant warden heading a battery of professional and specialized services eventually was given formal authority and position equal to that of the deputy warden in charge of custodial matters.[18]

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[16] Norman Carlson, "The Federal Prison System: Forty-five Years of Change," *op. cit.*, 40–42. One of the areas mentioned here is the National Institute of Corrections. Established by the Juvenile Justice and Delinquency Prevention Act of 1974 and attached to the Bureau of Prisons, the Institute is authorized to pursue a program of technical assistance and training for state and local correctional personnel and others who work with offenders. It has a 16-member advisory board consisting of government officials, correctional administrators and "outside citizens" and is also authorized to conduct correctional research and evaluation programs. In addition, the Institute will serve as a clearinghouse and information center, and will help establish correctional policy, goals and standards and improve corrections at all levels. See Federal Bureau of Prisons, Annual Report—1976 (Washington, D.C.: Bureau of Prisons, 1976), 5–6.

[17] E. K. Nelson and Catherine H. Lovell, "Perspectives and Correctional Management," in Carter and Wilkins, *op. cit.*, 739.

[18] Within the Federal Prison System, this description roughly corresponds to the associate warden for programs (heading the custodial-related matters) and the associate warden for operations (in charge of the institution's many support services).

Business managers, industries supervisors, various department heads and directors of farm camp programs were later added. Nelson and Lovell comment on this:

"These trends led to major redistributions of power and authority in formal organizations and resulted in a variety of stresses and adjustments in the informal organization of most institutions." [19]

One obvious effect of adding more complex criteria to the decision-making matrix is the gradual forcing of actual making of decisions downward toward the level of operations. However, notwithstanding this trend, the administration of Federal prisons still remained essentially a centralized operation, and it continued in this fashion until functional units began to be implemented in one institution at a time.

Prior to the introduction of unit management the inmate, upon his arrival at a Federal facility, was assigned a caseworker on a random basis. Unless determined to be a dangerous, violent individual, he initially would reside with the general prison population in dormitory areas and would be "graduated" to an individual cell on a merit system basis. A correctional counselor, who answered to the chief correctional supervisor and was designated to work with a specific caseworker, was available when needed. The caseworker, often carrying a workload of two hundred or more inmates, was responsible to the chief of case management who in turn answered to the associate warden for programs (AWP). The new inmate appeared before an assembly of department heads known as a "classification committee," and was told of the programs and work in which he would participate during his period of incarceration. In effect, there existed no meaningful working relationship between the inmate and staff, and he had little, if any, input into the decisions affecting him.[20]

FUNCTIONAL UNIT MANAGEMENT SYSTEM DEFINED

Functional unit management, in contrast to its rapidly disappearing centralized counterpart, can be defined as decentralized case management, and may be conceptualized as the establishment of several relatively small, distinct, independent and program-specific groupings of inmates and staff within the confines of a larger institutional setting.[21] This approach to inmate management is designed to improve control and relationships by dividing the larger institutional population into smaller, more manageable groups—or "units" as they are commonly referred to—and to improve the delivery of correctional services. This is directly related to the two major goals of the Bureau of Prisons: (1) to establish a safe and humane institutional environment which minimizes the detrimental effects of confinement; and (2) to provide a variety of counseling, social, educational and vocational training opportunities and programs which are most likely to aid offenders in their successful re-entry into the community.[22]

The essential components of a functional unit consist of a relatively small number of inmates (ideally between 50 and 120) who are assigned and housed together and who work in a close, intensive relationship with a permanently designated multidisciplinary team of staff members whose offices are located adjacent to the inmates' living area. The head of this unit, the unit manager, has administrative authority for all aspects of inmate living and programming. The assignment of an inmate to a particular unit may be based upon age, prior record, or need for a specific type of correctional program such as drug abuse counseling, rather than on administrative or institutional need. Ideally, unit staff should be scheduled to provide coverage in the unit on the average of thirteen hours each day, seven days per week, in addition to the presence of unit correctional officers around the clock.[23]

The result of this departure from traditional penal administration is obvious: the decentralization of the facility's organizational structure. In effect, there is

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[19] Nelson and Lovell, *op. cit.*, 739.

[20] However, this was an improvement over the earlier Bureau of Prisons practice wherein one staff member was the institution's only classification officer. See Douglas Lansing, Joseph B. Bogan and Loren Karacki, "Unit Management: Implementing a Different Correctional Approach, Federal Probation, Vol. 41 (March 1977), 43.

[21] This writer has synthesized this definition of unit management from a vast collection of research material utilized in the preparation of this thesis. An excellent article which may serve as a comparative study in decentralization is Louis Rowitz and Leo Levy, "The State Mental Hospital in Transition: An Approach to the Study of Mental Hospital Decentralization," Mental Hygiene, Vol. 55 (January 1971), 68–76.

[22] Lansing, et. al., *op. cit.*, 43.

[23] *Ibid.*

a "flattening out" of the typical hierarchical pyramid, resulting in those having the most immediate and direct contact with the inmates being placed in close organizational proximity to top-level management. Specialists, such as caseworkers and educators, ". . . continue to function at a line and at the supervisory or department head level, . . ." as in a centralized institution. Levinson and Gerard compare the rest of the ladder of organization:

"In the centralized facility, the generalist, who manages activities which cross departmental lines, is represented on the table of organization at the associate warden (AW) level; in the decentralized institution both the unit manager and the AW are generalists (with the latter functioning in the more 'pure' managerial role, while the former individual still gets involved to some degree in the delivery of direct services).[24]

Hence, in this restructured table of organization, one sees a narrowing of the gap between those who have the most contact with the inmate and the policy and decision making executive staff.

MEMBERS OF THE UNIT MANAGEMENT TEAM

With the basic concept of unit management defined, and prior to any discussion regarding its actual functioning, it merits that we first introduce the members of a typical unit staff or team. As already noted, the unit staff members are responsible for all of their unit's activities. This includes program planning, assignment, implementation, and monitoring; admission and orientation evaluation; coordination and liaison with non-unit activities; discipline; Parole Commission recommendations; prerelease programming, and the like. The unit staff is also accountable for the maintenance and security of its respective living units. In addition, when a treatment program is developed for a particular inmate, it becomes subject to review by local executive-level administrators prior to its implementation. Such a program must fall within the guidelines set forth by the Bureau of Prisons.

The unit manager

The unit manager's function is "to orchestrate the development and implementation of an effective treatment approach in his unit." [25] He heads his unit and is direct-line supervisor of staff assigned to the unit team. Furthermore, he has important liaison functions and in many ways operates as a traditional department head. He attends numerous administrative meetings (budget, training, warden's staff, etc.), thereby "linking" his unit into the total institutional operation.[26] He is also responsible for the way in which manpower resources will be utilized in his unit. Because incarceration is a year-round operation, it is up to the unit manager to make sure that sufficient unit staff are available to conduct treatment programs on a continual basis, notwithstanding holiday and vacation breaks.

It follows, then, that the unit manager is accountable for recognizing and remedying any program deficiencies. He must be knowledgeable about whether a specific treatment modality is being followed and "place a high priority on the development and implementation of program assessment and monitoring methods." [27] In the final analysis, it is the unit manager who will be either the recipient of praise for a job well done, or the target of criticism or blame for program failures.

The casemanager

The casemanager's role in a unit entails all the traditional caseworker duties required "to move an individual through a correctional institution." [28] He must keep apprised of Bureau of Prisons policies; have the ability to assess a variety of inmate reports; maintain ongoing awareness of Parole Commission procedures and legal and administrative decisions; and keep a good working relationship with affiliated agencies, such as the Probation System. Because unit management results in comparatively smaller caseloads, casemanagers are expected to take

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[24] Robert B. Levinson and Roy E. Gerard, "Functional Units: A Different Correctional Approach," Federal Probation, Vol. 37 (December 1973), 8.
[25] *Ibid.*, 11.
[26] *Ibid.*
[27] *Ibid.*, 12.
[28] *Ibid.*

an active part in direct treatment intervention. In this regard, the casemanager generally chairs the inmate classification meetings.

The correctional counselor

This member of the unit team is considered the "first line" of contact between his small group of inmates and the rest of the unit and the institution.[29] His jobs are many and varied: he is direct implementer of the agreed-upon treatment plan, a liaison between outside unit activities and their significance for the unit, an organizer of recreational and leisure time activities, and the like. In general, the correctional counselor "will have the most immediate, prolonged and intensive relationship with many of the Unit's residents, of any member on the Unit staff." [30] He must have the proper training and knowledge as to the unit's philosophy and treatment methods. The counselor is supervised by the unit manager in cooperation with the chief correctional supervisor, and his training is the responsibility of the unit staff, other institutional personnel as well as outside consultants with whom the unit contracts.[31]

The correctional officer

The primary duty of the correctional officer, or guard, is the maintenance of security consistent with Bureau of Prisons policy. Moreover, it is essential that he understand and support the unit's therapy program. Levinson and Gerard best summarize his job:

"His is the most difficult and least recognized function in any correctional treatment program; yet he is among the most influential in setting the "tone" present in the Functional Unit. Because of his day-to-day interaction with the Unit's residents, he becomes a central figure in the establishment and efficient functioning of the 'therapeutic community'." [32]

The correctional officer must see to it that an orderly, consistent shift rotation of fellow officers is maintained so that there is no interruption of program continuity. It is desirable to rotate officers within the same unit rather than among other units.

The education specialist

As the unit team's consultant in educational and vocational matters, he monitors or conducts training—sometimes within the unit but usually in a centrally located "school" or vocational training shop. Depending upon specific inmate needs, it is the education specialist's duty "to recommend training alternatives in order to help each individual reach goals mutually agreed upon in collaboration with the Unit Team." [33] He may, at times, be called upon to conduct classes to provide unit inmates with information relevant to some aspect of the unit's program.[34]

The unit psychologist (or mental health staff member)

This person is generally responsible for the performance of diagnostic, therapeutic, educational and evaluative functions relating to psychological services. His job is a multi-faceted one. As a member of the decision-making unit team, not only is he expected to be involved in the admission and orientation process prior to classification, but he also assesses inmate needs and the design of corresponding programs to meet those needs.[35] In addition, he serves as a consultant and trainer

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[29] The ideal staffing pattern for a counselor would be one counselor for each 25 inmates. See footnote No. 39 for an outline of the desired staff/inmate ratios.

[30] Levinson and Gerard, *op. cit.*, 13.

[31] *Ibid.* See also an interesting report on counseling in the Canadian Correctional System by Jay Campbell, Jr., "An Experience in Group Counseling," in Albert R. Roberts, Jr., ed., Readings in Prison Education (Springfield, Illinois: Charles C. Thomas, 1973), 271–278. Another pertinent article in this same text is Leon R. Jansyn, Jr., "Problems and Counseling in Prerelease," 300–312.

[32] Levinson and Gerard, *op. cit.*, 13.

[33] *Ibid.*, 14.

[34] See a comprehensive study by Albert R. Roberts, Jr., ed., Sourcebook on Prison Education: Past, Present and Future (Springfield: Charles C. Thomas, 1971). This was later supplemented by Readings in Prison Education (above). Taken together, these two works comprise a significant compilation of information in the field of correctional education.

[35] Federal Prison System Policy Statement: Unit Management Manual, No. 8000.1, March 16, 1977, 8034. An excellent volume designed to help psychologists, psychiatrists, social workers and lay people gain a better insight into prison problems and the programs being implemented to help rehabilitate the young adult offender is Ray E. Hosford and C. Scott Moss, eds., The Crumbling Walls: Treatment and Counseling of Prisoners (Urbana, Illinois: University of Illinois Press, 1975). The book describes some of the promising experimental programs for rehabilitating prisoners at the Federal Correctional Institution at Lompoc, California.

for other staff members. Unfortunately, there are too few psychologists to go around and, accordingly, their services, often shared with other units, remain somewhat centralized. Consequently, they function more in a staff role.

The unit secretary

An often overlooked position, secretarial support is essential to the smooth flow of the unit's every day activities. The monitoring of strict file check-out procedures, documenting unit activities and achievements, typing memos, studies, pamphlets and the like, in addition to a range of standard clerical duties—all are extremely important and without their successful completion the unit would suffer.

Inmates—The Link to the Unit Staff

The inmates, according to Levinson and Gerard, are the "raison d'etre" of the unit system.[36] To the inmates, the functional unit's main purpose is "to provide better, more intensive, more appropriate, and more effective methods to help them cope with the problems of living following their release." [37] Ideally, they should be involved in decisions which have a direct bearing on them and thus be a "member" of the unit team. This is a significant departure from the traditional centralized structure where the inmate had little voice or the opportunity for feedback in his affairs. Policy holds that, "The 'climate' of the Functional Unit should convey a clear respect for the dignity and uniqueness of each of those entrusted to its care." [38]

HOW THE DECENTRALIZED STAFF WORKS TOGETHER

The concept of a functional unit is realized "in direct correspondence to the degree that the inmate's correctional program is designed and implemented by a single, small, integrated group of staff members." [39] In large sense, the staff

Staff/unit size	50 inmates	100 inmate
Unit manager	(1)	1
*Case manager	1	2
Secretary	1	2
*Correctional counselors	2	4
Correctional officers	4+	4+
*Education specialist	1	2
*Psychologist (mental health)	1	1

[1] One of the asterisked staff serves a dual role as specialist and unit manager. (10)

activities depend on how the functional units are integrated into the institution. The unit manager functions as a program director in a decentralized setting, is in charge or his unit's entire scope of activities, and reports directly to the warden's office (normally to the associate warden for programs [AWP]).

The duties of the department heads—which generally consist of the chief correctional supervisor, mental health services coordinator, superintendent of industries, and education supervisor—change in a totally decentralized institution. They no longer enjoy the line-authority relationship with "their people" in the units, but now assume a staff role and become resource persons to both the warden and the unit manager. "Coordination between functional units is their prime area of concern; monitoring adherence to policy and standards is of almost equal importance." [40]

Although in one particular "model" or "schema" of unit management these department heads might comprise what is known as a "Program Management Committee" (with a role similar to that of associate warden for programs), this, in practice, is not followed by the Bureau of Prisons. Instead, in relation to that

[36] Levinson and Gerard, *op. cit.*, 14.
[37] *Ibid.*
[38] *Ibid.*
[39] *Ibid.*, 10. The "ideal" staffing patterns for a functional unit have been designated as follows:
[40] *Ibid.*, 15. The Bureau of Prisons also recommends (Policy Statement, *op. cit.*, 8035) that its correctional facilities provide each unit with a part-time staff member, consultant or volunteer from the Chaplain's Office. This representative may have a role in unit programs, if appropriate. Primary supervision of this religious representative would be the responsibility of the Chaplain, who functions in a very unique department head role.

which has been conceptualized and for the moment discussed, the "model" that has been implemented can perhaps be seen more clearly in the table of organization shown in Illustration No. 1.

Within each unit, lines of administrative authority flow upward to the warden's office. This "flow" is diagrammed in Illustration No. 2. Members of the unit staff are responsible to the unit manager who, in turn, answers to the office of the warden. The department head's newly acquired staff role results in only an indirect relationship with the personnel in the unit staff.

It should be noted briefly that with the implementation of functional units, a number of institutional divisions are not organizationally affected. The Business Office, Health Services, Food Services, Laundry Services, Safety and Sanitation, Mechanical Services, and Personnel and Training operate essentially in the same fashion as they did under centralized management and remain under the control and direction of the associate warden for operations (AWO).

POSITIVE AND NEGATIVE ASPECTS OF UNIT MANAGEMENT

The advent of the unit management system represents a significant number of changes: new positions are created, new roles are assigned and, perhaps most noteworthy, traditional authority is restructured. What, then, are some of the advantages which can arise from this relatively new mode of correctional administration? The most noticeable positive factor is the division of large numbers of inmates into small, well-defined and manageable groups where a common identity and closer association with each other and the unit staff can develop. Better communication and understanding between staff and inmates, more individualized classification and program planning, and a closer observation of inmates enabling early detection of problems before they get out of hand—all these are distinct advantages which can result from the frequency and intensity of contracts made possible by effective unit management.[41]

Furthermore, the different areas of expertise of the multidisciplinary unit staff may serve to effect a closer rapport with other departments within the institution. Staff involvement (especially in decision making) in the correctional process is also increased, resulting in the sharpening of managerial and correctional skills—a prime factor leading to improved morale and greater cohesiveness between staff and inmates and within both groups.[42] With unit management, there can be an increase in program flexibility, and special areas of emphasis (e.g., drug and alcohol treatment) can be developed (and, if necessary, changed) to meet the needs of inmates.

Functional units afford the unit staff greater physical control over the inmates via a closer working relationship which substantially reduces the amount of movement within a facility. So-called "problem cases" are not as readily transferred to other units, thus requiring unit staff to solve such problems with the tools they have at hand. This "encourages the more mature and better adjusted residents to assume a modified change-agent role in dealing with their more irresponsible unit-mates." [43]

Unit treatment modalities can take on any of a wide range of characteristics, including Reality Therapy, Facilitative Counseling, Transactional Analysis, Guided Group Interaction, Positive Peer Pressure, and the like. Unit management, as Dr. Kenneth Kling observes, "is designed to flexibly apply all available resources as well as staff ingenuity and skill to the process of positively changing residents' behavior." [44]

Of course, the implementation of the unit management system may encounter some obstacles. As we have seen, the group which directly and perhaps most acutely feels the impact of the functional unit is management—particularly the department heads. Not only do the latters' roles change as traditional lines of authority are restructured but, in some cases, they also will need to develop

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[41] Lansing, et. al., *op. cit.*, 44–45.

[42] J. Kenneth Kling, "Federal Bureau of Prisons: Documentation Study—First Quarterly Report," unpublished report, Federal Correctional Institution, Tallahassee, Florida, April 3, 1975, 5.

[43] *Ibid.*

[44] *Ibid.*, 6. As mentioned earlier (see footnote No. 14 and corresponding text of paper), it should be kept in mind that the Bureau of Prisons still believes in behavior modification (rehabilitation) as evidenced by the continued use of such treatment approaches. However, it is not the only goal of the Federal Prison System, as it has been accepted that some offenders will not or cannot be "rehabilitated."

or utilize new and different skills which they may find less satisfying to perform.[45] The restructuring can create a number of headaches for personnel not only at the department head level, but also higher, as Levinson and Gerard remark:

"The redefining of areas of responsibility, the need to clarify vague supervisor–supervisee relationships, the role of the specialist vis-a-vis the generalist, the writing of new position descriptions and program designs and the implementation of new procedures, all pose difficulties for staff. Feelings of loss of authority or status may result in staff morale problems at the upper echelon level." [46]

There are other problems which may accompany the implementation of unit management. The renovation of old facilities to accommodate the new unit offices and living areas may be difficult, especially in many of the antiquated facilities run by the Bureau of Prisons. Inmate living areas which were open dormitories have to be renovated to include private and semi-private cubicles; this construction may pose serious functional problems.

The relationship between the unit manager and a particular department head who would ordinarily be supervising "his" staff members in each unit has the potential to become a strained one. Some unit managers may not particularly appreciate being told how to operate their units. In short, there may develop a communication block which could lead to poor program coordination and the possibility of units becoming totally "our of step" with one another "so that the institution appears to be headed in all directions at the same time." [47] Responsible department head monitoring of unit activities and regular meetings between the heads and unit managers with reports to the warden should take place to insure that this problem does not occur.

These positive and negative factors will vary in number, kind and intensity depending on the institution where unit management has been or will be implemented, and on the quality of the respective staffs. We shall see, subsequently, the evaluation of some selected studies and surveys where unit management has been operational, as well as this writer's own observations of two such functional unit set-ups.

THE PROCESS OF CLASSIFICATION

Perhaps the most critical factor in the proper functioning of unit management is the classification procedure, or "sorting out" process conducted during the admission and orientation stage upon the inmate's arrival at an institution. Classification is aimed at a meaningful assignment of inmates to unit programs; thus it becomes a "crucial diagnostic process—involving both staff and offender—attempting to 'match' each resident with the most appropriate total program to meet his treatment needs." [48]

Classification, based on many variables such as the type of offense, background and environment, specific problem area(s), etc., has itself been the subject of intensive research in recent years. A noted professor states:

"Classification has not yet reached its maximum contribution. The use of the classification process . . . promises to be one of the major elements in future improvement of the corrections system. . . . Offenders sentenced to institutions will not experience long delays before entering the treatment program." [49]

Criminologist Vernon Fox describes the modern concept of classification as "the establishment and maintenance of a delivery system whereby treatment resources can be most effectively brought to bear on the correctional clients in the care of prisons and correctional institutions." [50]

It is not our purpose to delve into the realm of classification; however, in terms of its importance here, it is to be noted that functional units can be organized around a variety of factors which constitute the core of the unit's program. For example, there are the readily identifiable problem areas such as

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[45] For example, the chief correctional supervisor, under unit management, now has much of his responsibility for control of inmates transferred to the unit staff. The chief of classification and parole now sees his centralized staff of caseworkers and clerical help transferred to the unit manager. Neither possesses his former supervisory authority; and now become consultants for administration and unit managers, and monitors for case managers.

[46] Levinson and Gerard, *op. cit.*, 10.

[47] *Ibid.*, 15.

[48] *Ibid.*, 10.

[49] E. Preston Sharp, in the "Foreward" in Leonard J. Hippchen, ed., "Correctional Classification and Treatment" (Cincinnati: W. H. Anderson Company, 1975), xi. This volume was published expressly for the American Correctional Association.

[50] Vernon B. Fox, "Changing Classification Organizational Patterns: 1870–1970," in Hippchen, *op. cit.*, 3.

inmates having a history of drug addiction or alcoholism. For these persons there are units where staff is expected to specialize in the application of specific treatment modalities. Other inmates can be grouped together and programmed for work or academic training, or for vocational and educational instruction integrated with an appropriately designed counseling program.

Through one of many batteries of tests or questionnaires inmates may also be classified according to personality types. The Bureau of Prisons allows its institutions much latitude in their choice of what typological techniques are to be utilized in determining the inmate's behavioral characteristics, maturity level and psychological orientation. One commonly-used methodology developed by Dr. Herbet Quay identifies four dimensions of deviant behavior: (1) inadequate-immature; (2) neurotic-conflicted; (3) unsocialized-aggressive or psychopathic; and (4) social or subcultural delinquency.[51] Marguerite Warren's "I-Level Subtypes" is another widely used and respected classification tool.[52]

Dr. Kenneth Kling writing realistically on the establishment of an appropriate inmate classification system and the emergence of differential programming, reminds us that the development of both of these concepts can be a disruptive experience for an institution which has operated throughout its history with relatively conventional correctional management programming:

"The disruption revolves around issues such as alteration of staff roles, revision of lines of authority, allocation of financial support to new areas of needs, designation of responsibility for quality control of custody and programs, as well as the establishment of new communication lines, policy setting procedures and evaluative methods." [53]

However, Kling maintains that the temporary difficulties experienced by both staff and inmates during the transition to functional unit management is a small price to pay in relation to the advantages which should be produced by this new system.[54]

THE EVOLUTION OF UNIT MANAGEMENT

Functional unit management within the Bureau of Prisons did not appear spontaneously. Rather, it has evolved over a period of time through a series of independent developments.[55] As early as the mid and late 1950's the Federal

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[51] For a thorough, in-depth discussion on the Quay Typology, see Donald R. Peterson, Herbert C. Quay and Gordon R. Cameron, "Personality and Background Factors in Juvenile Delinquency as Inferred from Questionnaire Responses," Journal of Consulting Psychology, Vol. 23 (October 1959), 395–399; also Quay, "Personality Dimensions in Delinquent Males as Inferred from Factor Analysis of Behavior Ratings," Journal of Research in Crime and Delinquency, Vol. 1 (January 1964), 33–37; and an article by Quay, "Patterns of Aggression, Withdrawal and Immaturity," in Herbert C. Quay and J. S. Werry, eds., Psycho-pathological Disorders of Childhood (New York: John Wiley and Sons, 1972). Articles by Roy E. Gehard of the Bureau of Prisons, pertaining to the Quay Typology at the Kennedy Youth Center include, "Institutional Innovations in Juvenile Corrections," Federal Probation, Vol. 34 (December 1970), 37–44; and "Classification by Behavioral Categories and Its Implications for Differential Treatment," in Hippchen, ed., *op. cit.*, 94–103.

[52] See Marguerite Q. Warren, "Classification of Offenders as an Aid to Efficient Management and Effective Treatment," The Journal of Criminal Law, Criminology and Police Science, Vol. 62 (June 1971), 239–258. In this article, the author constructs a chart showing the cross-classification of sixteen different offender typologies. She concludes her article: "Typologies of offenders represent an important method of integrating the increasing body of knowledge in the field of corrections. Ultimately, typological approaches will flourish or not depending on their fruitfulness in producing improved management and treatment methods for the practitioner working in this discouraging field." (258) Another relevant article by Ms. Warren is "The Case for Differential Treatment of Delinquents," Annals of the American Academy of Political and Social Science, Vol. 381 (January 1969), 47–59.

[53] Kling, *op. cit.*, 4.

[54] *Ibid.* For further reading on "classification," there are several informative articles in the American Correctional Association work edited by Hippchen, *op. cit.*, among which this writer suggests: Lloyd Yepsen, "Classification: The Basis for Modern Treatment of Offenders," (13–15); Hippchen, "Changing Trends in Correctional Philosophy and Practice," (17–24); Thomas G. Eynon, "New Roles of Research in Classification and Treatment," (70–74); and Price Chenault, "Diagnostic Techniques in Classification and Treatment," (77–83). An unpublished study by Dennis C. Harvey, "Pleasanton Classification Approach," Federal Youth Center, Pleasanton, California (undated) describes a highly developed classification program at this Bureau of Prisons facility. Also consult Chapter 6, "Classification of Offenders," in the National Advisory Commission (197–218). In its recommendation, the Commission calls for a re-examination and reorganization of classification systems in our Nation's correctional institutions, and advocates better devised classification "teams" or "units." See also Marvin E. Wolfgang, "Corrections and the Violent Offender," in Annals of the American Academy of Political and Social Science, Vol. 381 (January 1969), 119–124; and American Correctional Association article, "Classification," in Killinger and Cromwell, *op. cit.*, 273–291.

[55] The President's Commission on Law Enforcement and Administration of Justice—Task Force Report: Corrections, 47–50. This Commission makes reference to the "collaborative institution," an experimental forerunner of the unit system. One such experiment was the National Training School for Boys in Washington, D.C., which will be briefly discussed forthwith.

Reformatory at El Reno, Oklahoma and the Federal Youth Center in Ashland, Kentucky introduced separate classification teams for each caseload.[56]

In October 1961, the National Training School for Boys in Washington, D.C. initiated the Demonstration Counseling Project (D.C.P.). This institution housed juvenile offenders who violated a Federal law and normally were sentenced for an indeterminate length of time up to their twenty-first birthday. A caseload of inmates who had been scattered throughout the school was gathered together in one housing unit, or cottage, and an interdisciplinary staff (consisting of three correctional counselors, a clinical psychologist, a social worker and correctional officer) was chosen to implement a counseling and recreational program.

The goal of this projet was to determine what could be done in one cottage with the increase in staff and an interdisciplinary program effort. Seventy-five boys were randomly selected and assigned to the experimental group known as the "D.C.P. Unit." Another seventy-five boys were similarly chosen for assignment to a control group. Both groups participated fully in the regular institutional regimen. In addition, the "D.C.P. Unit" was introduced to a specifically designed experimental project—The Cottage Life Intervention Program. A secondary control group composed of boys in other cottages was added later during the project. Over a twenty-one month period, the three groups were compared on measures of institutional adjustment, interpersonal relations, intra-psychic changes and release follow-up data. The results were significant. The experimental group performed better than the control groups in institutional adjustment, scholastic achievement and the number of misconduct reports. Regarding interpersonal relations and intra-psychic changes, the experimental group likewise had more positive scores. In the area of recidivism rates, there were no statistically significant differences among the groups on eventual success in community adjustment. However, the experimental inmates who did fail remained in the community a significantly longer period of time and committed less serious offenses.[57]

The results of the Demonstration Counseling Project and its extensive research efforts (the first of its kind), led to the restructuring of the training school along functional unit lines, with each cottage having its own interdisciplinary staff. More significantly, this early, abbreviated version of unit management was an important step which greatly contributed to the initial experimentation with functional units within the Federal Bureau of Prisons.[58]

In 1963, the Federal Youth Center at Englewood, Colorado established what was termed a "unit system" consisting of "unit officers" in addition to the traditional correctional officers. Each "unit officer" worked with a caseworker whose office was situated in the housing area where inmates on their caseload were assigned. The classification team was composed of one department head, a caseworker and the "unit officer." This system at Englewood was yet another autonomous experiment in unit management.[59]

In January 1969, the ultra-modern, minimum custody Robert F. Kennedy Youth Center opened in Morgantown, West Virginia, replacing Washington D.C.'s hundred year old National Training School for Boys. This campus-like institution, consisting of housing areas grouped around a "community square," was the first Federal institution totally designed and operated according to a functional unit management system and a prototype of those currently in operation. The center included a specific inmate classification system using the Quay Typology, with different management and treatment strategies applied to the different groups of inmates.

Results of early research at the Kennedy Youth Center in terms of the effectiveness of its functional units and the establishment of a positive social climate were encouraging. Inmates reported more frequent contacts with staff and more often perceived them to be friendly, accessible, committed and able to help.[60]

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[56] Lansing, et. al., *op. cit.*, 43.

[57] Bureau of Prisons, "Preliminary Evaluation of the Functional Unit Approach to Correctional Management," unpublished report, 1975, 5–7. (Hereafter referred to as "Preliminary Evaluation, etc. . . .") See also Bureau of Prisons, National Training School for Boys, Demonstration Counseling Project, unpublished report, October 1962, 73–74.

[58] Lansing, et. al., *op. cit.*, 46–47; and "Preliminary Evaluation, etc. . . .", 6. Robert Martinson, who has gained prominence in recent years among correctional professionals for his book, "The Effectiveness of Correctional Treatment," lauds the D.C.P. study as being "well-designed" and of "high quality" and one of the few which showed a favorable recidivism outcome.

[59] In 1973 the Englewood facility became totally decentralized under unit management. Its progress under the new system is discussed later in this paper.

[60] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 7–8. Also Roy Gerard, "Institutional Innovations in Juvenile Corrections," *op. cit.*

A two-year post-release recidivism study was also very supportive of the functional unit management system there. A Bureau of Prisons evaluation report projected that: "The Kennedy Youth Center study provides the strongest evidence for a positive effect on community adjustment." [61]

During the late 1960's, following the passage of the Narcotic Addict Rehabilitation Act (NARA), the first drug abuse programs (DAP) were established in Federal correctional facilities at Danbury, Connecticut; Terminal Island, California and Alderson, West Virginia. These programs initially operated as functional units within centralized institutions, and their success in working with a different type inmate encouraged the further development of the functional unit concept. The so-called NARA/DAP staffing pattern—including a unit manager, psychologist, two case managers, four correctional counselors and one secretary for every one hundred inmates—has been considered the "ideal" for a functional unit of this type. These specialized units and the programs which they developed have also served as prototypes for many of the current units throughout the Federal Prison System.[62]

In 1972, unit management was put into operation at the Federal Correctional Institutions at Seagoville and Fort Worth, Texas. In view of the favorable results at these two facilities and the positive experiences with functional units already established, the Bureau of Prisons decided to decentralize management on a System-wide basis. At the same time, the Bureau developed a unit manager training program and provided managers from the first units with specialized middle-management training. By 1975, this program was strengthened and offered on a regular basis along with forty-hour programs for mid-level prison industries managers, correctional executives (associate wardens and similar positions) and department heads. There has also been the development of advanced level management training for experienced managers. This training, according to Lansing, et. al., is "a significant reason for the quality and continuity of units as they have developed throughout the system." [63]

While institutional decentralization was being carried out through the establishment of functional units, the Bureau of Prisons began a Central Office decentralization by creating five divisions and as many region offices.[64] Completed in 1975, regionalization allows day-by-day administration of such functions as case management, health and drug abuse programs, educational and vocational training, and correctional services to be handled by the regional offices and, in many cases, by the individual institutions themselves. The Central Office in Washington, D.C. still continues to establish policy, provide overall supervision, as well as planning, development, data-gathering, evaluation and research. Heads of all the Bureau's correctional facilities, ranging from penitentiaries to halfway houses, report to the regional directors who, in turn, answer to the Director in Washington. This restructuring through regionalization has greatly eased the handling of the Bureau of Prisons' many and diverse operations, much as the unit system has facilitated the operations of the individual institutions. In a way, regionalization and unit management appear to go "hand in hand."

EVALUATIONS OF SOME UNIT MANAGEMENT SYSTEMS

Since 1972, functional units have been implemented in Federal correctional facilities at a remarkable pace, considering the number of significant changes that must take place in the decentralization process at each institution. However, the Bureau of Prisons has not been concerned with mere numbers, but rather with

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[61] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 17.

[62] *Ibid.*, 3–4 ; 8–9. See also Lansing, et al., *op. cit.*, 44, and Gerald M. Farkas, David M. Peterson and Norman I. Barr, "New Developments in the Federal Bureau of Prisons Addict Treatment Program," Federal Probation, Vol. 34 (December 1970), 52–59. The Federal Correctional Institution at Danbury has since (1975) become totally decentralized.

[63] Lansing, et al., *op. cit.*, 46. The Bureau of Prisons requires all its new employees to attend a two-week "Introduction to Correctional Techniques" program in order to equip them with a broad overview of their roles and responsibilities. All career employees are rotated every three years through an advanced version of the above-mentioned program in order to sharpen and upgrade their job skills and knowledge. See Federal Bureau of Prisons, Annual Report—1975 (Washington, D.C. : Bureau of Prisons, 1975), 19–20.

[64] The five divisions are Correctional Programs, Planning and Development, Medical and Services, Federal Prison Industries, Inc., and the National Institute of Corrections. The head of each division reports to the Director of the Bureau of Prisons. The five regions are headquartered in Atlanta, Georgia ; Burlingame, California ; Dallas, Texas ; Kansas City, Missouri ; and Philadelphia, Pennsylvania. Each has its own regional director. The U.S. Parole Commission (formerly the U.S. Board of Parole) has also been regionalized. It has regional boundaries common to those of the Bureau of Prisons, and likewise has its offices at the same locations.

the success or failure of such a large-scale undertaking. Accordingly, in January 1975, Bureau research analysts developed a method whereby audits would be conducted at the various institutions which had converted to the unit system. These audits were to be thorough, in-depth evaluations by members of both the Central and respective regional offices who were experienced in unit management and its implementation. The auditors have visited these institutions, usually for a period of one week, and conducted interviews of administrators, unit staff, inmates, department heads and other key personnel. Although the audit is neither empirical nor experimental in nature, it has assisted institutions in refining their unit management systems and has provided a check "to insure institution compliance with Bureau of Prisons standards of quality and design of the new management concept." [65]

In addition, several concurrent scientific studies were begun in which evaluative data was to be collected in institutions both prior to and following the establishment of the unit management system. The main tools of measurement utilized for these studies were the Correctional Institutions Environment Scale (CIES), and a questionnaire developed by Dr. Robert Vinter of the University of Michigan. The former provides a measure of the social climate of an institution and its units based upon independent staff and inmate perceptions. Nine areas or "dimensions" are studied and various correlations are analyzed.[66] The Vinter study gauges the inmate's responses to questions pertaining to the various programs, living unit conditions, relatiodnships with unit staff members, etc.[67] The results of the audits performed and research data collected thus far have provided "a great deal of evidence that the functional unit system leads to a better institutional climate or interpersonal environment—one which is safe, humane, and minimizes the detrimental aspects of confinement." [68]

These positive results are reflected in Vinter studies such as those conducted at the Federal Youth Center at Ashland, Kentucky,[69] and the Federal Correctional Institution at Milan, Michigan [70] as well as the CIES studies at Milan [71] and Seagoville, Texas.[72]

Concerning the Milan survey, results from both the Vinter Questionnaire and the CIES "strongly support the position that there has been a substantial, positive increase in the social environment since the introduction of the functional unit system." [73] During this two-year, comprehensive study, there were no major changes in the administration, staff or type of inmate population. However, a second drug abuse program was instituted, living units were renovated and a unit for married inmates was begun. CIES profiles for both inmate and staff reflected positive changes in their perceptions of social climate during and after the introduction of the unit system there. In the Vinter studies, inmates gave increasingly favorable ratings to the counseling, recreational and vocational programs, saw the benefit of more frequent contact with unit staff, and pictured themselves as more involved in establishing program goals.[74] Perhaps the most

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[65] Lansing, et. al., *op. cit.*, 46.

[66] The dimensions which are "tapped" are: three relationship dimensions which measure the type and intensity of personal relationships which exist in a correctional program (Involvement, Support and Expressiveness); three treatment program dimensions which reflect the type of treatment orientation found (Autonomy, Practical Orientation and Personal Problem Orientation); and three system maintenance dimensions which have to do with how the unit or program functions (Order and Organization, Clarity and Staff Control). See Rudolph Moos, "Evaluating Correctional and Community Settings" (New York: John Wiley and Sons, 1975).

[67] The Vinter Questionnaire employs two separate anonymous forms in which items are presented in the form of checklists, four-point rating scales and five-point rating scales. In addition to the inmate questionnaire, there is also a staff questionnaire which measures their opinions about offenders, job descriptions and conditions, and behavioral change programs. (See Kling, *op. cit.*, 23).

[68] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 16.

[69] Loren Karacki, "Vinter Questionnaire Results for Ashland," unpublished report, Federal Bureau of Prisons, Washington, D.C., July 1974.

[70] Loren Karacki, "Preliminary Vinter Questionnaire Results for Milan, October 1975," unpublished report, Federal Bureau of Prisons, Washington, D.C., December 1975.

[71] Loren Karacki and Jerry Prather, "CIES Profiles for Milan, October 1975," unpublished report, Federal Bureau of Prisons, Washington, D.C., December 1975.

[72] Loren Karacki and Jerry Prather, "CIES Profiles for Seagoville, December 1974," unpublished report, Federal Bureau of Prisons, Washington, D.C., April 1975.

[73] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 12. Also Karacki and Prather, "CIES Profiles for Milan, October 1975," 3; and Karacki, "Preliminary Vinter Questionnaire Results for Milan, October 1975," 2–3.

[74] See footnote No. 70; also Lansing, et. al., *op. cit.*, 47–48.

impressive improvement was the three-fold increase in furlough approvals and the encouraging drop in furloug failures. "This suggests that decision-making by unit staff familiar with inmates in their units has value over the former centralized decision-making procedures." [75]

The above results were also corroborated by the testings at the Federal Youth Center at Morgantown, West Virginia [76] and the Federal Correctional Institution at Tallahassee, Florida.[77] The methodology utilized in all of these studies "has been good in terms of procedure; their results are clear despite the lack of more sophisticated statistical analysis." [78] This Bureau of Prisons evaluation continues:

"There have been problems with missing data (residents who do not take the tests, unusable protocols, etc.) but this is not thought to detract from the conclusions of the studies. It is evident that both staff and inmates have more positive attitudes about working and living with unit management, even though further improvements can be made." [79]

The CIES was also administered at the Federal Reformatory at Petersburg, Virginia to both a drug abuse and a general program unit. Both groups had similar living areas and freedom of movement about the institution, but the DAP unit was characterized by a small staff/inmate ratio. The DAP members (both staff and inmates) had much more desirable CIES scores than the general unit, and this was attributed to the intensive staff and program activities as well as the voluntary nature of the DAP program itself. An evaluation of this study concluded, with some confidence, that "unit staffing levels are an important consideration and that adding additional staff to increase program activities will have a very positive effect." [80]

Those Federal correctional facilities which have had unit management audits report encouraging results. These audits, together with the aforementioned empirical studies, have served as feedback mechanisms which can help provide for the further development and improvement of functional unit management.[81]

Other reports (such as those found in newspapers, journals, institutional publications, etc.) regarding functional units have emerged. The Federal Correctional Institution at Butner, North Carolina, described by Norman Carlson as "the cutting edge of a fundamental reexamination of the entire Federal correctional system. . . ," opened in May 1976 and has patterned its programs on the concepts outlined by Norval Morris in his work, "The Future of Imprisonment." [82] This modernistic facility operates on the unit system, and the only inmates who remain there beyond ninety days are those who so choose. By establishing a definite parole date early in the inmate's confinement, the Butner experiment, in time, hopes to assess in what kinds of programs and activities the various inmates want to engage, and to make a comparison of post-release success between those who did and did not participate. "To a very significant degree," remark Levinson and Deppe, "this concept places responsibility where it properly belongs—on the inmate." [83]

The Federal Correctional Institution at Englewood, Colorado, in two recent reports, mentions overcoming several potential problems, particularly between units and departments, primarily due to the positive cooperation among staff members at all levels. The 1977 report comments, "The intensive staff efforts to improve interpersonal relations and coordination in the institution, and the

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[75] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 12.
[76] *Ibid.*, 7–8.
[77] Loren Karacki, "Vinter Questionnaire Results for Tallahassee," unpublished report, Federal Bureau of Prisons, Washington, D.C., March 1975.
[78] Bureau of Prisons, "Preliminary Evaluation, etc. . . .", 16.
[79] *Ibid.*
[80] *Ibid.*, 13.
[81] *Ibid.*, 15.
[82] See New York Times, June 13, 1977, 18. The Butner facility has had its problems. The above article appeared a year after the institution had opened. So modern and comfortable are the accommodations that many inmates have complained they will not be able to maintain this kind of standard after release and are fearful of severe "anxiety attacks." Norval Morris' book, "The Future of Imprisonment," describes his principles for a new model of imprisonment, which Butner hopes to follow. Although Morris opposes traditional penal institutions (see footnote No. 1), nevertheless, he does admit that they are necessary for some offenders. He feels, however, they should allow for the widest possible program choice on the part of each inmate, and that small "living units" are essential. (See especially Chapter 4.)
[83] Robert B. Levinson and Donald A. Deppe, "Optional Programming: A Model Structure for the Federal Correctional Institution at Butner," Federal Probation, Vol. 40 (Jun 1976), 37–44. Inmate at Butner have been experiencing delays in being assigned their parole dates, which might "cripple" the "Morris Model" according to a New York Times article, June 13, 1977, 18.

management development seminar itself, were necessary to bring about greater cooperation and commonality of purpose among members of the institution." [84] This report concludes that although progress to improve shortcomings is not a "one shot affair," the functional unit approach, when properly administered, offers significant advantages over alternative approaches.[85]

An alcohol treatment unit was established in May 1973 within the centralized confines of the United States Penitentiary at Leavenworth, Kansas. This "therapeutic community" program consists of training in Transactional Analysis, Rational Self Counseling, biofeedback, and experiences in encounter and intensive confrontation groups. Control problems have been minimal and tentative statistics regarding inmate behavior upon release to the community have been encouraging. An article on this program informs us:

"Data that are collected in the future from such programs need to be carefully scrutinized and evaluated as it appears that the functional unit approach can be a highly effective means of assisting the incarcerated offender in the utilization of his innate potential to lead a productive, relatively crime-free life upon release to the community." [86]

A continuing effort is being made to further evaluate functional unit management at various Bureau of Prisons facilities. Steps have been taken to gather inmate performance information on a "pre" and "post" basis. Dr. Herbert Quay has been evaluating treatment programs at three institutions which are utilizing an offender typology and differential treatment as part of their overall functional unit operation. Information on inmates at these institutions will be gathered to ascertain what behavior and personality changes occur as the result of the differential treatment approach.[87] Information on Federal releasees is also being collected and evaluated in an effort to assess the impact of unit management on recidivism. However, all of these on-going research efforts are, relatively speaking, in their infancy. A longer period of time will be required to measure the true impact of unit management as a program and management tool, along with its effects on personal adjustment or post-institutional variables.

SOME INITIAL DIFFICULTIES WITH UNIT MANAGEMENT

By the end of 1977, the Bureau of Prisons, in about five years, had effected the transition to total unit management in twenty-six of its institutions. Although this has been accomplished with relatively few difficulties, and notwithstanding the many positive reports as previously discussed, there have emerged "areas of concern" or, if you will, problems.

Although ideal staffing patterns have been established,[88] the more than 150 units which now exist in the Federal Prison System were formed with a minimum of new personnel being added, and many facilities did not realize any increase in staff at all! As a result, several units have shared the same psychologist, have had less than the desired number of casemanagers, counselors or correctional officers, and often have had to operate with part-time clerical help. In some cases, other institutional positions were abolished in order to staff the units.[89]

Unit size, originally intended to be from fifty to one-hundred inmates, has not readily materialized. Limited staff, overcrowding, and the space problems created by the older facilities have made fifty man units practically nonexistent.

"More often the smaller units average 65 inmates, the larger units, planned for 100, usually have 130 and as many as 190 inmates. Although many evaluative efforts are indicating that the institution environment and other factors have improved considerably even with these larger units, those with numbers closer to the ideal staffing pattern are able to operate much more efficiently and effectively." [90]

In some institutions, administrators have eliminated the day unit correctional officers in order to obtain enough positions to staff new units, believing that an adequate number of unit staff could manage the officers' duties. Lansing remarks

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[84] A. J. Mackelprang and David E. Fletcher, "Managers and the Institution," unpublished report, Federal Bureau of Prisons, Englewood, Colorado, September 1977, 45.
[85] *Ibid.*, 46.
[86] Ron Ziegler, Robert Costello and George Horvat, "Innovative Programming in a Penitentiary Setting: Report from a Functional Unit," Federal Probation, Vol. 40 (June 1976), 49.
[87] Bureau of Prisons, "Preliminary Evaluation, etc . . . .", 19.
[88] See staffing pattern chart in footnote No. 39.
[89] Lansing, et al., *op cit.*, 45.
[90] *Ibid.*, 45–46.

that this move has deprived the correctional officers of a valuable training experience because much inmate activity occurs during the prime day hours, and it has limited their input into unit staff decisions. However, adjustments have been made in this area and today "few institutions continue without correctional officers on the daytime posts in units." [91]

At one stage during the implementation of functional units there was a feeling that some institutions could become "specialized" by offering a variety of groupings for not only the drug addicts and alcoholics, but also for married inmates, first offenders, and others.[92] Excessive specialization, however, can result in too few general units and thus limit inmate assignment flexibility, especially since the Bureau's institutional administrators usually cannot control inmate intake in either number or type. At any rate, the Federal Prison System appears to be functioning well with 75 percent of its overall population in general units; while institutions such as those at Oxford, Wisconsin; Lexington, Kentucky and Fort Worth, Texas consist mainly of specialized units.[93]

Overcrowding has long been a serious concern of our penal administrators, on all government levels. This problem is experienced in almost every Federal correctional facility, and with the increasing number of inmates being admitted every year, proponents of unit management understandably are calling for the construction of more institutions and the hiring of additional staff. During the 1970's, the Bureau of Prisons already has added nine institutions and four additional facilities are under construction.[94] In addition, it has stepped up its recruitment of new personnel.[95] Yet, as the overcrowding continues, it becomes the target of attack from many and varied sources.[96] It is questionable whether this acute problem will ever be resolved, given the present state of our social and political climate.

UNIT MANAGEMENT AT WORK—THE AUTHOR'S OBSERVATIONS

During 1977 and 1978 this writer, a United States Probation and Parole Officer, had the opportunity to visit two different Federal correctional facilities: the maximum custody penitentiary at Lewisburg, Pennsylvania and the medium custody institution at Danbury, Connecticut. Both have made the transition to unit management—Danbury in early 1975 and Lewisburg late 1976. While visiting these institutions I was able to observe their respective units in operation. Each facility is marked by structural and population differences which, of necessity, reflect in differences in the way each functions under unit management. Lewisburg, especially, had some very real problems to deal with in order to establish a decentralized operation.

The Federal Correctional Institution at Danbury was opened in 1939 and built to comfortably accomodate 600 inmates. The transition to unit management was accomplished without any significant problems and was set up according to the typical model described earlier.[97] Three of the seven units established were originally designated as NARA/DAP units, with program emphasis focused on the long-standing Daytop therapeutic community concept. The latter concept since has been somewhat modified and the Danbury units are now developing a more diversified program approach.[98] Moreover, one of the three units has been changed to a general population unit.

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[91] *Ibid.* 45.
[92] *Ibid.*, 46.
[93] *Ibid.*
[94] Rob Wilson, *op. cit.*, 21. There are also four correctional facilities on the "planning board."
[95] Bureau of Prisons, Annual Report—1976, 6.
[96] For example, the Metropolitan Correctional Center in New York City, which opened in July 1975 and designed with the unit management concept in mind, has been strongly condemned by U.S. District Court Judge Marvin Frankel because of its chronic overcrowding and improper classification system, in addition to the absence of a gymnasium, chapel and industries facilities. Frankel also ordered that inmates are not to be kept at this detention center for more than two months. (See New York Times, September 16, 1977, II; 3.) Also, the disastrous fire at the Federal Correctional Institution at Danbury, Connecticut on July 7, 1977, which claimed the lives of five inmates, brought much attention to its severe overcrowding. (See New York Times, July 8, 1977, 1; and Sepetmber 28, 1977, II, 14.)
[97] See Illustration No. 1.
[98] "Unit Management Audit: Federal Correctional Institution, Danbury, Connecticut; February 7–11, 1977," unpublished report, Federal Bureau of Prisons, Washington, D.C., March 3, 1977, 1. For an excellent account of the Daytop program, read Barry Sugarman, "Daytop Village: A Therapeutic Community" (New York: Holt, Rinehart and Winston, 1974).

There are some differences in the design of each of the units, but a "level system" has been established whereby each unit has regular housing quarters (which may be either open dormitories or cubicles), and preferred housing quarters (either private or semi-private rooms). Every unit has its own complement of staff, but with two exceptions: the psychologist is shared among the units, and the correctional counselors, who number two per unit, are presently handling the day-watch correctional officer coverage for their respective units. These are two shortcomings which were discussed earlier in this paper.

Upon their arrival at Danbury, inmates are assigned to a unit on a random basis with the exception of the two NARA/DAP modalities which, of course, handle specific problem areas. Within the units themselves the new inmates undergo a two-week admission and orientation period during which time they are observed, tested and interviewed by various staff members.[99] At the completion of this period, they are given a temporary work assignment. Approximately two weeks later, the inmate's unit team reviews his case and, in concert with him, determine a specific classification and treatment program. "Flexibility" is a key word, and if there has been some oversight or error in programming, the inmate can subsequently be transferred to another unit or program.

This writer's impressions of the unit management system at Danbury were, for the most part, of a positive character. Those inmates who were interviewed generally spoke well of their staff team and were favorable about the treatment given them. There were, however, some negative comments over certain aspects of institution policy. Specifically, a number of inmates believed that there was poor communication between the units and some departments at the institution. Others felt that there were many discrepancies in the furlough program. In this connection, the units were criticized for their lack of coordination with other agencies, especially with the probation officers in the districts to which they would eventually be released.[1] Inmates also voiced their dissatisfaction over the "dual role" of the counselors, and the Bureau of Prisons team which conducted the unit management audit in February 1977 found that there was "a definite need for additional custodial positions . . . in order that a permanent day watch officer is present in each unit so that counselors can function in their role as counselors."[2]

Overcrowding is a matter of great concern at Danbury. In the wake of the tragic fire in July 1977 which drew considerable media attention to this problem, several inmates were subsequently transferred to other Federal institutions to alleviate, at least temporarily, this ongoing problem.[3]

The audit team, in general, believed that the progress of the then two year old unit management system at Danbury was "slower than expected," but expressed hope that with its recommendations (some of which pertain to above mentioned problems) the institution would be able to progress "with utmost speed and develop to its fullest."[4] Notwithstanding the many areas needing improvement, perhaps the most positive observation given by the team which audited a difficult DAP unit was that of the unit staff's attitude:

"There is an excellent staff, they are dedicated, loyal and truly believe in the philosophy of this unit. They have worked together and the unit manager has built a team where unity and support for each other are very evident."[5]

Implementation of the functional unit system at the United States Penitentiary at Lewisburg, on the other hand, was not accomplished without an initial measure of difficulty. Since the Robert F. Kennedy Youth Center first employed units for total institution program management in 1969, unit management has spread

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[99] See Alex J. Cade, "A Proposed Inmate Orientation Program," in Hippchen, *op. cit.*, 139–149. Cade offers his concept of a 10-day "General Orientation Program."

[1] There can be improvement in this area. This writer has participated in an exchange program conducted between the Bureau of Prisons and the U.S. Probation System. The purpose of the exchange is to foster a closer relationship and better understanding between these two agencies, both of which have a unique and vitally important role to play with the offender. The procedure has been to have a probation officer and a casemanager "exchange jobs" for one week. While the probation officer becomes acquainted with the various unit functions at the institution, the casemanager is learning about the investigative and supervision duties the probation officer performs "on the outside." This writer's experiences in the exchange program have been very positive.

[2] "Unit Management Audit: Federal Correctional Institution, Danbury, Connecticut: February 7–11, 1977," 1.

[3] See footnote No. 96.

[4] "Unit Management Audit: . . . Danbury . . .", 1.

[5] *Ibid.*, 9.

steadily throughout the Federal Prison System. However, by mid-1976, none of the System's six penitentiaries had yet fully implemented it.

In the Federal penitentiaries there exist problems of physical plant, population, inadequate staffing and conceptual limitation—all of which present very real obstacles for the establishment of a decentralized administraion. These older, monstrous edifaces, which house the more violent inmate population, have been known for their traditional emphasis on safety, security and control.

The implementation of the unit system at Lewisburg came as a matter of expediency, rather than within the planned framework of a Bureau of Prisons time-schedule. Inmate violence, emphasized by the press,[6] became a source of concern to the public, the Congress, the Judiciary and the Bureau of Prisons, itself. In June 1976, following the revelation of at least eight inmate murders at Lewisburg, a Board of Inquiry was empanelled by the Bureau. In its findings, the Board cited haphazard management and a growing number of hardened young criminals as the major causes contributing to a volatile condition at the penitentiary.[7] The Board subsequently recommended establishment of a complete unit management system, and the Bureau of Prisons allocated twenty additional staff positions for its implementation.[8]

The physical layout of Lewisburg posed a number of logistical problems for effective unit management, and the first task of the planners was to develop a system whereby the secure housing areas would be occupied by those inmates needing the most control. The open areas would be reserved for those who could co-exist in a dormitory-type setting.

It was determined that the Lewisburg inmate population would be divided into seven units: one DAP unit, two units for those working in Industries, three management (general population) units, and one farm unit (an honor camp). The DAP and the two Industries units were to be voluntary. Unlike Danbury, newly admitted inmates are assigned for approximately two weeks to a specifically designed Admission and Orientation "Unit," which has an ongoing enrollment of about fifty inmates. This group is not a functional unit in a strict operational sense, but a "quasi unit" staffed only by two correctional counselors, in addition to the four Industries' case-managers who rotate their services on a part-time basis. The Admission and Orientation contingent is under the direct supervision of the warden's Special Assistant.

A modified version of the Quay Typology was developed, providing the basis for a Management Classification System (MCS). The MCS is aimed at: (1) increasing inmate accountability; (2) separating the more aggressive, violent inmates from the rest of the prison population; (3) providing differential control of inmates, thereby economizing operations by varying staffing patterns; and (4) promoting greater staff involvement, thus increasing levels of acceptance.[9]

Limiting unit size to an ideal of 100 inmates, in the face of a prison population numbering over 1,400, required a minimum of fourteen unit managers and concomitant unit teams. This was not economically feasible, and presented tremendous space problems as well. However, a workable plan was devised making the most efficient use of the new staff positions allocated. In addition, somewhat suitable arrangements were made for the housing and offices of the various units; with the two Industries units comprising the largest total number of inmates—presently about 470.

A unique, modified table of organization was developed, unlike that of any other Federal institution. As previously noted, the warden's Special Assistant was designated to supervise operations within the Admission and Orientation "Unit." In addition, two of the three general unit managers and the DAP unit manager were to report to the associate warden for programs (AWP). The remaining general unit manager and the farm camp unit manager were accountable to the associate warden for operations (AWO). Unit managers of the two

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[6] New York Times, June 3, 1976, 21; and August 10, 1976, 59. Lewisburg houses some of the most hardened criminals in the Nation, many of whom are from the Eastern city slums. Most of them are serving long sentences for serious and violent crimes. Nearly one-half of the prison population are under thirty years of age, and almost one-half have served at least two prior prison terms. Between March 1974 and May 1976 there were eight inmate murders committed at this penitentiary. (59)

[7] New York Times, August 10, 1976, 59.

[8] W. Alan Smith and C. E. Fenton, "Unit Management in a Penitentiary: A Practical Experience," unpublished report, Federal Bureau of Prisons, Lewisburg, Pennsylvania, January 1978, 3.

[9] W. Alan Smith, "Management Classification System (MCS)," unpublished memorandum, Federal Bureau of Prisons, Lewisburg, Pennsylvania, August 27, 1976, 2.

Industries units, however, were made directly responsible to the Superintendent of Industries who, in effect, would be on a level equal to that of an associate warden. In short, several upper level staff members would each share a piece of the unit management pie. This innovative set-up is diagrammed in Illustration No. 3.

The total unit management planning and implementation process at Lewisburg, the first Federal penitentiary to establish total functional units, took place in just under four months and without any serious problems.[10] During the system's first full year in operation, the number of serious incidents plummeted, with only one reported inmate homicide. Although there was resistence by some of the veteran staff members whose roles had been changed as a result of functional units, they have gradually adjusted to the transition. An improved interaction between staff and inmates was noticeable to this writer, who had visited Lewisburg prior to its conversion to unit management. As with Danbury, the need for additional correctional officers has also been a problem at Lewisburg.

Lewisburg has experienced some difficulties regarding the location of some of its unit staff offices vis-a-vis their respective inmates, with the exception of the recently constructed farm camp building. However, the present arrangement of unit offices with respect to their inmates' living areas seems to be the most feasible yet devised, considering the 45-year-old structure in which it is being housed.

The Industries units report a 25 percent increase in production since changing over to unit management, and additional shops are either being built or are in the planning stage. There appear to be fewer problems among inmates working in these areas, especially from troublesome "cliques" whose disturbances in the past often affected the behavior and performance of other workers.[11]

The inmates who were interviewed, while not essentially finding fault with unit management, did offer complaints about certain administrative policies, much in the order of those objections raised by the inmates at Danbury. Those unit staff members, department heads and upper echelon administrators with whom we had the opportunity to talk admitted there were some shortcomings in decentralization, such as the more than desirable number of inmates in some units; the need for additional staff, particularly correctional officers, to better handle the new management design; and the space problems created by the reorganization of inmate living areas. However, in the main, they commented favorably on Lewisburg's first year under the functional unit system and appeared cautiously optimistic as to its permanency in the Federal Prison System.

CONCLUSION

The functional unit management system, a relatively new concept in correctional administration which has been adopted as official Bureau of Prisons policy, has been implemented over the past few years in a significant number and variety of facilities within the Federal Prison System. This concept—the decentralization of a correctional institution's organization through the conversion of inmate population and treatment programs into small, manageable "units," manned by their own mini-staffs—has had a promising beginning. Concomitant with the establishment of these functional units has been a conscious effort to improve the inmate's classification process whereby he can best be placed into a unit whose program goals will more likely prepare him for a successful re-adjustment into the community.

Although Bureau of Prisons audits, scientific studies and other reports have been generally favorable thus far in their assessment of the unit management system, nevertheless, there is still the need for additional research, particularly in the area of recidivism rates. In the long run, this data will be essential in order to obtain a more representative picture of a functional unit's true effectiveness.

Having reviewed Bureau of Prisons data on unit management as well as related research material, and having observed this system in operation at two disparate Federal correctional facilities, this writer is confident of its place in the future of corrections. As expected, there have been some problems encoun-

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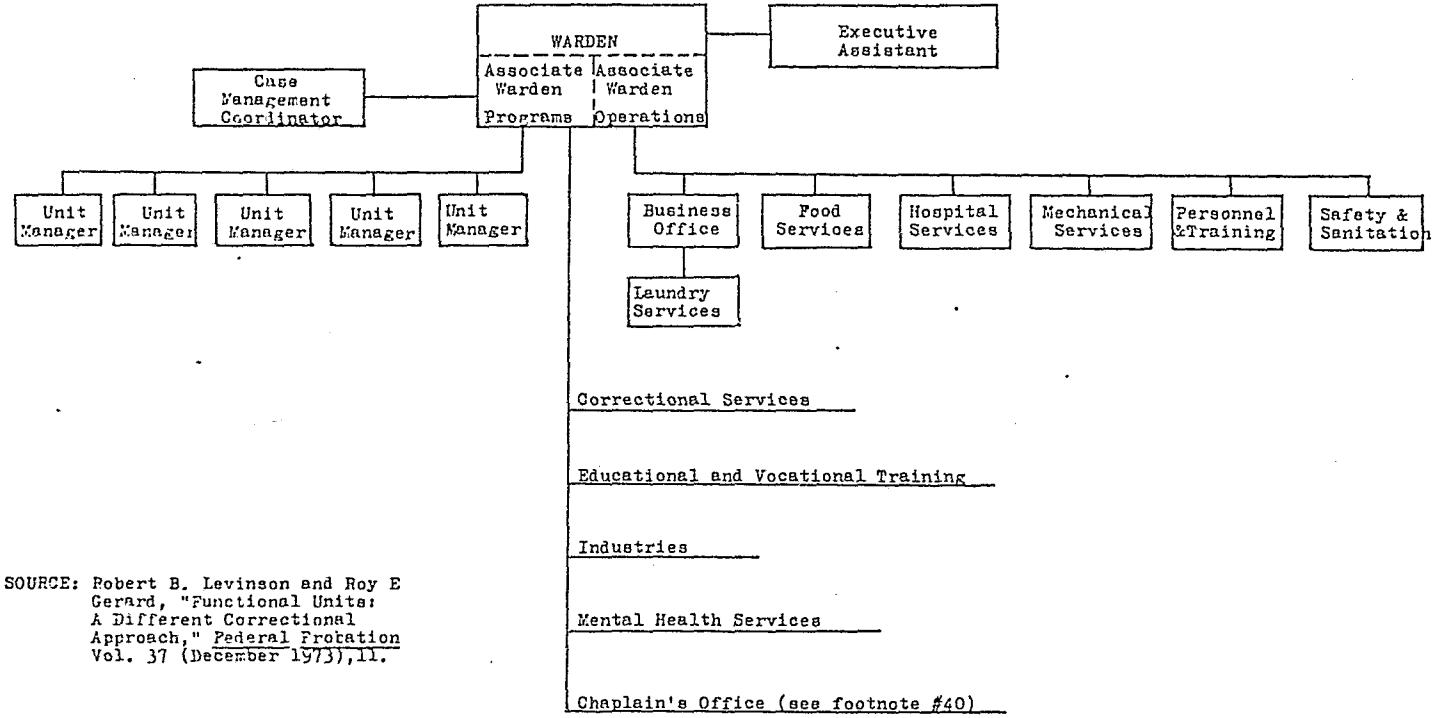
[10] See Smith and Fenton, *op. cit.*, 11–19, for a detailed account.

[11] Federal Prison Industries, Inc., a Congressionally created, independent corporate entity operational within the Bureau of Prisons, has been successful over the years in achieving production comparable to that of private industry. Morris and Hawkins, *op. cit.*, state that "The Federal System provides a model for all states in this respect." (130)

tered during and after the introduction of this restructured form of prison management. However, the already significant improvements over the traditional form of penal administration and the ambitious, on-going efforts to refine the concept are encouraging signs that the functional unit system will some day be a permanent fixture of management not only within the Federal Prison System, but in state and local correctional institutions as well.

TYPICAL FUNCTIONAL UNIT MODEL

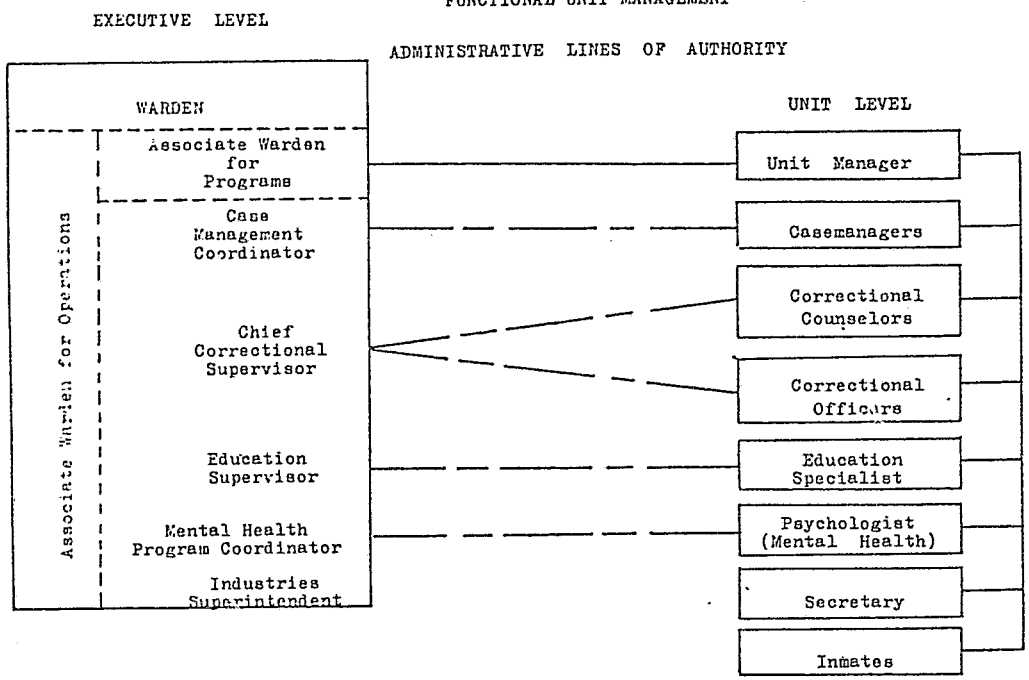
ILLUSTRATION #1



SOURCE: Robert B. Levinson and Roy E Gerard, "Functional Units: A Different Correctional Approach," Federal Probation Vol. 37 (December 1973),11.

FUNCTIONAL UNIT MANAGEMENT

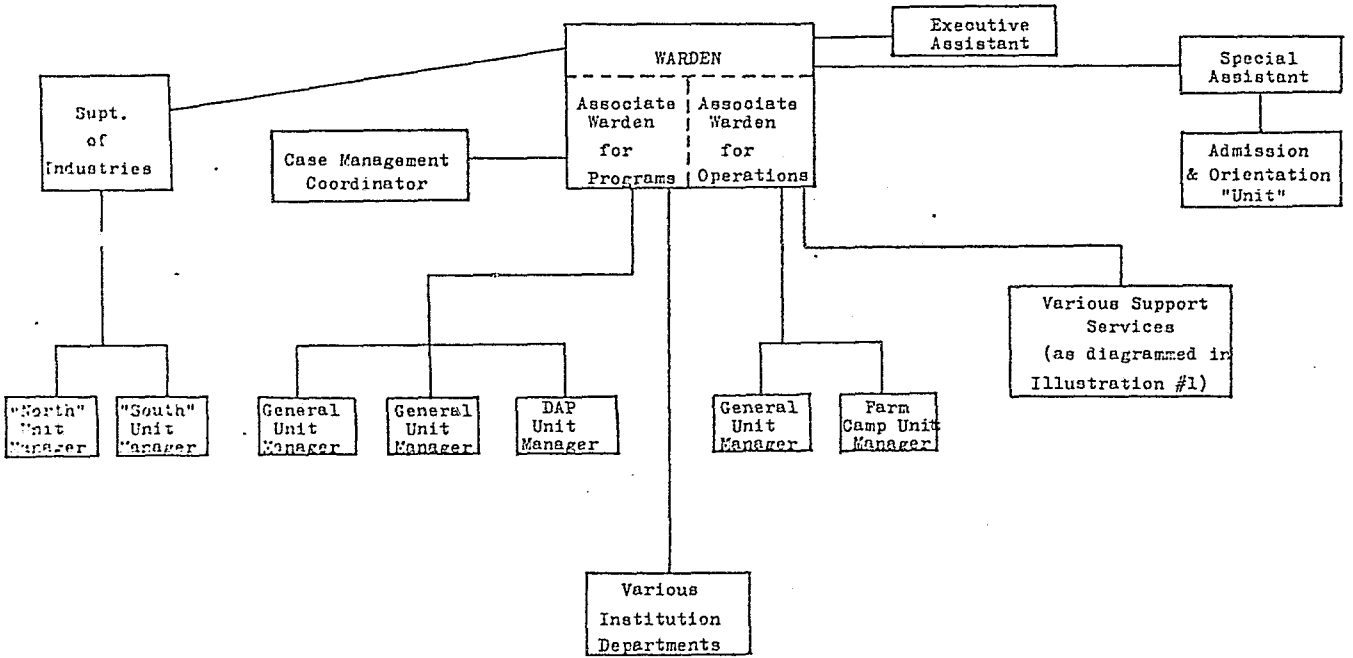
ILLUSTRATION #2



SOURCE: Robert B. Levinson and Roy E. Gerard, "Functional Units: A Different Correctional Approach," Federal Probation, Vol. 37 (December 1973), 13.

UNIT MANAGEMENT TABLE OF ORGANIZATION ILLUSTRATION #3

U.S. PENITENTIARY - LEWISBURG



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Unit Management Manual

(Policy Statement by Norman A. Carlson, Director, Bureau of Prisons)

1. *Purpose.*—To distribute the Federal Bureau of Prisons' Unit Management Manual.

2. *Discussion.*—a. This Manual will serve as a guideline for all institutions in the Federal Prison Service using Unit Management. It will standardize Unit Management operations and procedures for institution administrators and Unit Management staff.

b. The policies and procedures in this Manual have been broadly designed to permit adaptations by the local institutions, as is required by institution mission, staffing patterns and other variables.

c. This Manual will provide standards upon which inspections, evaluations and audits of Unit Management by Central Office personnel of the Unit Management Section, assisted by designated Regional Office staff, will be made.

d. This Manual is the product of Institutional, Regional, and Central Office effort. The Task Force and Editorial Committee came from a wide cross section of people who work with and in units. Draft copies were distributed to the Regional Case Management and Correctional Services Administrators for their input.

e. The Unit Management Manual will be revised as needed.

3. *Responsibilities.*—This new approach to correctional management which is being implemented in federal correction institutions requires a professional response by all members of Bureau of Prisons' staff, who share the responsibility for its continued growth and success.

4. *Distribution.*—Distribution will be in accordance with a published list to facilitate future changes being properly circulated. Requests for additional copies will be submitted with a letter of justification to the Chief, Unit Management Section, Central Office.

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8000. OVERVIEW OF UNIT MANAGEMENT

Unit Management is a new approach to correctional management in the Bureau of Prisons. This decentralized management approach is now being used in twenty-three of the federal institutions. There are plans to fully implement Unit Management in several remaining facilities in the next few years. Thus far, preliminary evaluations strongly suggest that this approach to inmate management is more humane, effective and efficient than the former, centralized approach.

The following chapter will define Unit Management, explain the goals and advantages of this approach, and discuss its development in the Bureau of Prisons. The Manual will also define standards which will be met by all institutions using Unit Management. While the Manual is designed to permit adaptations by institutions in many areas, a conformity to basic standards is expected to provide a general consistency of this management concept throughout the Bureau of Prisons.

In the Fall of 1975, an eighteen-member, multi-disciplinary task force representing eighteen different institutions met in the Central Office. They contributed a valuable consensus of basic Unit Management standards which became the basis for this Manual. Subsequently, an Editorial Committee of seven, representing five institutions and Central Office staff, prepared the final Manual. The

Manual will receive annual updating utilizing representatives from institutions, Central and Regional Office staffs.

8006. DEFINITION OF UNIT

A unit is a small, self-contained inmate living and staff office area, which operates semi-autonomously within the confines of the larger institution.

1. a small number of inmates (50–120) who are permanently assigned together;
2. a multi-disciplinary staff (Unit Manager, Case Manager(s), Correctional Counselor(s), full or part-time Psychologist, and Clerk-Typist) and Correctional Officers whose offices are located within or adjacent to the inmate housing unit; and permanently assigned to work with the inmates of that unit;
3. the Unit Manager has administrative authority and supervisory responsibility for the unit staff;
4. the unit staff has administrative authority for all within-unit aspects of inmate living and programming;
5. the assignment of an inmate to a unit may be based on age, prior record, specific behavior typologies, a need for a specific type of correctional program such as drug abuse counseling or on a random assignment basis.
6. All unit staff are scheduled by the Unit Manager to be working in the unit evenings and weekends, in addition to the presence of the Unit Correctional Officer.

8007. GOALS OF UNIT MANAGEMENT

Unit Management is an approach to inmate and institutional management designed to improve control and relationships by dividing the larger institution population into smaller, more manageable groups and to improve the delivery of correctional services. This is directly related to two major goals of the Bureau of Prisons:

1. to establish a safe, humane environment which minimizes the detrimental effects of confinement and;
2. to provide a variety of counseling, social educational and vocational training opportunities and programs which are most likely to aid inmates in their successful return to the community.

8008. ADVANTAGES OF UNIT MANAGEMENT

The advantages of unit approach to correctional management are:

1. It divides the large numbers of inmates into small, well-defined and manageable groups, whose members develop a common identity and close association with each other and their unit staff.
2. It increases the frequency of contacts and the intensity of the relationship between staff and inmates, resulting in:
   a. better communication and understanding between individuals
   b. more individualized classification and program planning
   c. more valuable program reviews and program adjustments
   d. better observation of inmates, enabling early detection of problems before they reach critical proportions
   e. development of common goals which encourage positive unit cohesiveness, and
   f. generally, a more positive living and working atmosphere for staff and inmates.
3. The multi-disciplinary unit staff member's varied backgrounds and different areas of expertise enhances communication and cooperation with other institution departments.
4. Staff involvement in the correctional process and decision-making opportunities are increased, further developing the correctional and management skills of the staff.
5. Decisions are made by the unit staff who are most closely associated with the inmates, increasing the quality and swiftness of decision-making.
6. Program flexibility is increased, since special areas of emphasis can be developed to meet the needs of the inmates in each unit; programs for a unit may be changed without affecting the total institution.

Each of these advantages provides an enriched atmosphere in which inmates may be more likely to prepare for a successful adjustment in the community.

8009. HISTORY OF UNIT MANAGEMENT

Unit Management is the result of many independent developments over twenty years, in the Bureau of Prisons. Twenty-five years ago in the Bureau of Prisons' institutions, a new inmate appeared before a group of department heads called a Classification Committee. Here he was informed of the programs and work in which he would be involved during his incarceration. Generally, he had little input into the decisions. This procedure was an improvement over the previous practice of having a single staff member serve as the Classification Officer for the institution's total inmate population.

During the mid- and late 1950's, the Federal Reformatory at El Reno, Oklahoma, and the Federal Youth Center in Ashland, Kentucky, developed separate Classification Teams for each caseload. In the early 1960's the Demonstration Counseling Project was initiated at the National Training School for Boys (NTS) in Washington, D.C. A caseload of inmates was gathered together in one housing unit, and an interdisciplinary staff was selected to implement a counseling and recreational program. This early, abbreviated version of unit management was successful, and as a result, the entire institution was reorganized according to this model.

In 1963, the Englewood, Colorado Federal Youth Center established what was called a "unit system". This featured "Unit Officers" in addition to the traditional Correctional Officers assigned to the inmate living unit. Each Unit Officer worked with a Caseworker, who maintained an office in the inmate housing unit where inmates on their caseload were assigned. The Classification Teams were composed of one department head, the Caseworker and the Unit Officer.

The Robert F. Kennedy Youth Center at Morgantown, West Virginia was opened in 1969, and it was designed and operated according to a slightly modified Unit Management concept. This included a specific inmate classification system (Quay Typology), with different management and treatment strategies applied to the different groups of inmates.

As a result of the Narcotics Addict Rehabilitation Act of 1966, in 1968, the Bureau of Prisons' first Drug Abuse Programs were established at Federal Correctional Institutions at Terminal Island, California; Danbury, Connecticut; and Alderson, West Virginia. Soon additional "NARA" and Drug Abuse Programs (DAP) were established in other institutions.

Generally, these specialized drug abuse programs operated as units within institutions with centralized management (as those in the penitentiaries still do). Their operational success encouraged the further development of the decentralized unit concept of correctional management.

The "NARA" and "DAP" units' staffing pattern is considered the "ideal" for all functional units. It includes a Unit Manager, a Psychologist, two Case Managers, four Correctional Counselors, one Secretary, and round-the-clock Unit Correctional Officer coverage, for each 100 inmates. The many program ingredients which these specialized units developed have served as prototypes for many current units throughout the Federal Prison System.

In 1972, Unit Management was established at the Federal Correctional Institutions at Fort Worth and Seagoville, Texas. The positive experiences at these two institutions, combined with the favorable results of previously established unit programs, led to the Central Office decision to further expand the unit approach to correctional management throughout the Bureau of Prisons.

8010. RESEARCH AND EVALUATION

As was discussed in the Introduction of this manual, it is believed that there are numerous advantages to Unit Management in correctional institutions, when compared to the traditional, centralized management approach. The Office of Research, Central Office and the Regional Research Coordinator, are conducting ongoing evaluative studies of this new management concept.

Preliminary findings suggest that numerous positive results exist in many institutions where Unit Management has been implemented. The Unit Management Section has a coordinating role regarding some of the evaluative efforts and works cooperatively with the Office of Research. Primary responsibility for the actual research and evaluation belong to the Office of Research. Institutions desirous of initiating their own evaluative projects are expected to inform both the Office of Research and the Unit Management Section. Similarly, copies of all past research by institutions regarding Unit Management should be forwarded to both offices.

8011. UNIT STAFFING PATTERNS

The Bureau of Prisons has determined guidelines for unit staffing patterns:
50–80 Inmate General Units: 1 Unit Managers; 1 Case Manager; 2 Correctional Counselors; 1 Clerk Typist; ½ Psychologist; ⅕ Educational Representative; and Correctional Officers (3 Shifts per day, 7 days per week).
80–120 Inmate General Units: 1 Unit Manager; 2 Case Managers; 4 Correctional Counselors; 1 Clerk Typist; ½ Phychologist; ⅕ Educational Representative, and Correctional Officers (3 shifts per day, 7 days per week).
50–75 Inmate Specialized Units: 1 Unit Manager; 1 Case Manager; 2 Correctional Counselors; 1 Clerk Typist; 1 Psychologist; ⅕ Educational Representative; and Correctional Officers (3 Shifts per day, 7 days per week).
76–120 Inmate Specialized Units: 1 Unit Manager; 2 Case Managers; 4 Correctional Counselors; 1 Clerk Typist; 1 Psychologist; ⅕ Educational Representative; and Correctional Officers (3 Shifts per day, 7 days per week).
The Bureau of Prisons has been implementing Unit Management in its institutions without the benefit of obtaining any new positions. As a result, most of the new units are not yet staffed at the desired level. It is hoped that in the future these units will receive the needed additional staff, which will allow them to more effectively and efficiently perform their jobs.
It is expected that no unit will have more than 120 inmates. Larger numbers result in a significant increase in pressure on staff and a reduction in their ability to adequately fulfill their responsibilities. While temporary overcrowding affects most facilities at various times, administrators of institutions where existing units are larger than this limit should make all possible efforts to remedy the situation.

8020. STAFF ROLES IN UNIT MANAGEMENT

Unit Management brings about the alteration of numerous traditional staff roles and creates several new ones. The most obvious new role is that of the Unit Manager. This person is responsible for implementing a program within the unit which provides responsible staff supervision and inmate decision-making authority. Much of the Unit Manager's authority was previously the responsibility of other Department Heads, such as the Chief of Classification and Parole, and the Chief Correctional Supervisor.
This chapter is to broadly define roles of many staff who are directly related to Unit Management. It is by no means exhaustive or conclusive. It attempts to generally, rather than specifically, describe how various key personnel interact where Unit Management is utilized. It provides general guidelines permitting more specific definitions to be developed based upon local needs.

8021. CENTRAL AND REGIONAL OFFICE STAFF ROLES

The Unit Management Section, Central Office, has the responsibility for all matters relating to Unit Management. Responsibilities of the Section include:
1. Operating the Unit Manager Training Program for all newly appointed managers;
2. Conducting staff assistance visits and audits of Unit Management in all institutions;
3. Coordinating research and evaluation efforts of Unit Management;
4. Establishing policy for Unit Management in all institutions;
5. Providing technical assistance to state and local correctional systems.
The Chief, Unit Management Section, is responsible for the administration of the Section. He is assigned at least one Correctional Programs Specialist and a Secretary.
The Regional Offices will not have any Unit Management administrative counterparts at this time. It is expected that in the future, when Unit Management is more fully implemented, authority presently located in the Central Office will be delegated to the Regions. However, routine operations matters (Case Management, Custody, etc.), which occur in units and need higher level assistance, will be handled through the appropriate specialists in the Regional Offices. Concerns which specifically refer to Unit Management will be referred to the Central Office.

8022. THE INSTITUTION ADMINISTRATION AND UNIT MANAGEMENT

Unit Management results in much of the decision-making authority which was previously centralized or the responsibility of other departments, being delegated to Unit Managers. At the same time, the administration continues to be ulti-

mately responsible for the proper running of the institution. Therefore, ongoing dialogue between the Unit Managers and the administration is essential.

Unit Managers will serve as consultants to the administration in inmate management matters. By frequent monitoring of unit operations, and regularly scheduled meetings which include the Unit Managers, other concerned Department Heads, and the administration, a high level of communication and understanding may be achieved.

8023. WARDEN

The unit approach to correctional management has not altered the fact that the Chief Executive Officer of the institution retains final authority and responsibility for all matters occurring within the institution.

With Unit Management, there is a delegation of decisionmaking responsibility for most aspects of inmate services and programs to unit staff. This will include much of the case management, security, sanitation, maintenance, and other routine operational responsibilities.

In an institution with Unit Management, the Chief Executive Officer will usually delegate supervisory and monitoring responsibilities for units to the Associate Warden.

8024. ASSOCIATE WARDEN

As noted previously, the decentralizing of correctional institutions delegates much decision-making responsibility to Unit Managers. Since the administration retains ultimate responsibility for all matters, the Associate Warden should have the expertise to understand and monitor the units, to insure quality programs and operations.

The Associate Warden is the immediate supervisor of Unit Managers and the primary liaison between them and the Warden.

Guidelines, dissemination of policy and parameters within which the units are to work shall be set forth as part of the leadership responsibilities of the Associate Warden to assure that the philosophy and policy of the Bureau of Prisons is adhered to and the total mission of the institution is accomplished.

8025. CASE MANAGEMENT COORDINATOR

The Case Management Coordinator is a Department Head whose role is in transition. This position may eventually be phased out in some institutions operating under Unit Management and the responsibility assumed by the Unit Manager and the Senior Case Manager.

In institutions which are still utilizing this position, the responsibilities include training of Case Managers, and unit Secretaries, monitoring of case management practices, and providing quality control for case management. This person also has served as a consultant and technical advisor to the units on case management matters. These responsibilities may eventually fall to the Unit Managers and Senior Case Managers with the Associate Warden giving overall general direction for the entire unit operation.

8026. CHIEF CORRECTIONAL SUPERVISOR

The Chief Correctional Supervisor is the Department Head whose primary responsibility is the security of the institution. With the unit approach to correctional management, some of this responsibility is delegated to Unit Managers and their staff.

The Chief Correctional Supervisor serves as an advisor, consultant, and monitor for Unit Managers in matters pertaining to the unit security. Either the Chief Correctional Supervisor or the Unit Managers will initiate contacts as need arises. The Unit Managers and Chief Correctional Supervisor are expected to maintain a cooperative working relationship, especially since they have areas of responsibility which overlap.

When there is a question regarding security matters which affect the unit and the institution, the Chief Correctional Supervisor will have final authority. Whenever possible, decisions concerning emergency matters regarding a unit should be made jointly by the Unit Manager and Chief Correctional Supervisor. Combining the technical expertise of the Chief Correctional Supervisor with the Unit Manager's first-hand knowledge of his unit, will enhance the quality of decisionmaking.

8027. CORRECTIONAL SUPERVISOR

The Correctional Supervisors have delegated authority for institution security matters in the absence of the Chief Correctional Supervisor.

This person serves as an advisor, consultant, and monitor for Unit Managers in matters pertaining to unit security.

While there will be variations between institutions, routine operational matters require that the Correctional Supervisors and unit staff work together to assure the highest quality communications and decision-making.

8028. UNIT MANAGER

The Unit Manager is the administrator and supervisor of a multi-disciplinary team of staff members who are assigned to work in that unit. As department head supervisors, the Unit Managers will assume their share of responsibilities, including participation, on institution committees, promotion boards, serving as duty officer, and other related administrative functions.

The Unit Managers have responsibility for all matters pertaining to his unit. These will include Case Management, Security, Correctional Programs, Safety, Sanitation, etc. This person has ultimate responsibility for developing and monitoring or stringent inmate file accountability practices, file checkout procedures, and file security operations. The Unit Manager serves as an on-going adviser to the administration in matters pertaining to inmate management and programs.

While the Unit Manager is responsible for all activity within the unit, on occasion and by design, some other Department Heads such as the Chief Correctional Supervisor and Case Management Coordinator may have responsibilities which will overlap with those of the Unit Manager. The expertise of these and other specialist Department Heads is available to the Unit Manager, and their cooperative relationships will insure an effective unit operation.

The Associate Warden will regularly monitor unit operations and programs to make certain that authority and responsibility which has been delegated to the units is effectively managed.

8029. CASE MANAGER

The Case Manager is directly responsible to the Unit Manager and has major responsibility for case management matters within the unit. With other unit staff, the Case Manager will assist with unit program development, adhere to security procedures, counsel with unit inmates, and participate in other unit operations as directed by the Unit Manager.

While this position is directly responsible to the Unit Manager, some of his training and technical assistance will come from the Case Management Coordinator. However, with the Case Management Coordinator role being in a state of transition, these responsibilities may eventually fall to the Unit Managers and Senior Case Managers with the Associate Warden giving overall general direction for the entire unit operation. This will facilitate the quality of performance, assure continuity between units, and assist the Unit Manager with the Case Manager's training needs. The amount of case management technical assistance required by each unit may be related to the level of case management expertise which the Unit Manager and the Case Manager possess.

8030. CORRECTIONAL COUNSELOR

The Correctional Counselor's work is scheduled by the Unit Manager and counselors should not be removed from work assignments by other institution staff without consultation with, and permission from the Unit Manager. Emergency situations such as escapes, riots, etc., are exceptions.

In institutions where there are a reduced number of Correctional Officers assigned to units and a shift is not covered, unit staff may be delegated the direct responsibility for unit security by the administration. When that occurs, it is expected that the scheduling of hours and responsibilities will not be disproportionately assigned to Correctional Counselors.

The Correctional Counselor's primary responsibility is the counseling of assigned unit inmates. This may include formal, unplanned counseling and formal group and/or individual counseling. Other duties will be designated by the Unit

Manager. However, it is expected that counseling and being directly available to the unit inmates will consume the majority of the Correctional Counselor's

8031. UNIT SECRETARY

When staffing permits, one Secretary is assigned to each unit, under the supervision of the Unit Manager. This person is permanently assigned to the unit, and the duties are chiefly those of a clerical/secretarial nature. Unit Managers may elect to broaden the Secretary's responsibilities to include informal or formal counseling, participation in Unit Team Meetings, or Unit Disciplinary Committee Meetings, etc. The Unit Secretary under the direction of the Unit Manager has responsibilities for daily file accountability, file mantenance, and monitoring of strict file check-out procedures. Such broadened responsibilities, except in cases of an approved Upward Mobility Training Program, will be reflected in the Secretary's official position description.

The Unit Secretary will receive technical assistance and training from the Case Management Coordinator/Records Department Manager, Unit Manager and others as appropriate.

8032. UNIT CORRECTIONAL OFFICERS

A Correctional Officer assigned to a unit has a post with unique training opportunities and responsibilities. The first responsibilities are the inmates' accountability and security of the unit. All other duties will vary between units and institutions and are to be considered secondary. The Unit Correctional Officer is the first-line consultant to the unit staff regarding security matters which affect the unit and institution.

Security matters affecting the unit should be brought to the attention of the Unit Manager by the Correctional Officer, who in turn will confer with the Chief Correctional Supervisor. In the absence of the Unit Manager, the Operations Correctional Supervisor will be notified for appropriate action.

The Unit Correctional Officer should become involved in the program operations of the unit. Unit Managers are expected to facilitate this paritcipation for Correctional Officers assigned to their unit. Permanently assigned unit staff member will maintain a working atmosphere encouraging the Unit Correctional Officer's maximum input as an important member of the unit staff.

8033. UNIT EDUCATION ADVISOR/REPRESENTATIVE

The Education Advisor is the Unit Team's consultant in all education matters, and this person normally will be a permanent member of the Unit Team. This person sees that all of the unit inmates are properly tested and informed of available educational opportunities. This person may also be responsible for monitoring and evaluating unit inmates in education programs, and will provide counseling in education matters as needed.

8034. UNIT PSYCHOLOGIST

This person is generally responsible for the performance of diagnostic, therapeutic, research, educational, and evaluative functions relating to psychological services. This individual plans, organizes, participates in and provides professional expertise for unit counseling programs. This function ncludes the assessment of inmate needs and the design of corresponding programs to meet those needs.

The Unit Psychologist may provide supervision and training for students and interns.

This individual is under the general supervision of the Unit Manager. The extent of services provided will be dependent upon whether the psychologist is assigned to the unit on a full or part-time basis.

8035. UNIT RELIGIOUS REPRESENTATIVE

It is recommended that institutions provide each unit with a part-time staff member, consultant or volunteer from the Chaplain's Office. This representative will be a consultant to unit staff and inmates on religious matters, and could also

have a role in unit programs. Primary supervision of the Religious Representative would be the responsibility of the Chaplain's Office.

8040. CORRECTIONAL PROGRAMS IN UNITS

Introduction

This chapter includes a variety of correctional programs which are currently being used in units throughout the Bureau of Prisons. Program needs will vary from unit to unit, and at different times within the same unit. It is each Unit Manager's responsibility to monitor and update unit programs to insure their relevancy to the unit inmates.

No specific program approach is endorsed or required. However, it is expected that Unit Managers will offer those programs needed to meet the needs of their assigned inmates. Appropriate counseling, for instance, will be provided for interested inmates. How that need is fulfilled, is the option and responsibility of each Unit Manager.

A primary expectation of Unit Management is achieving and maintaining quality communications between staff and inmates. Some Unit Managers choose to use Town Hall Meetings to help in this area, while others do not. What is expected is that each unit will continue a high level of communication; the selection of the method is each Unit Manager's choice.

Each of the programs mentioned in this chapter have been satisfactorily used in many units. The list is not exhaustive. However, it does provide guidelines and standards which should be maintained.

8041. CORRECTIONAL COUNSELING

While Correctional Counseling is normally associated with Correctional Counselors, it can be initiated by any staff members. The Unit Team and the inmate should determine the need and establish the purpose of the correctional counseling sessions. Correctional Counseling can focus on such problems as developing good work habits, learning to communicate and get along with others, being responsible, coping with stress, occupational development, etc. All staff members are encouraged to participate in correctional counseling.

8042. GROUP COUNSELING

It is the philosophy of the Bureau of Prisons that inmates have the opportunity to improve their emotional and physical well-being. Group counseling can assist motivated inmates in developing an increased understanding of themselves, resolve inter-personal conflicts, learn constructive problem-solving techniques, increase his ability to understand and communicate with others, and identify short and long-range goals to promote personal growth. Group counseling can also be an effective approach to resolving problems within a unit. Group counseling enhances the communication between staff and inmates, which is essential in developing and maintaining an effective program and inmate control.

8043. INDIVIDUAL COUNSELING

Individual counseling sessions will generally be initiated when the Unit Team and the inmate determine the need. Normally, a specific problem area will be identified and the purpose of the individual counseling session agreed upon. Due to the amount of staff time required for individual counseling sessions, they should be used discriminately for those inmates who have a genuine need and who utilize these sessions productively.

Individual counseling will normally be conducted by staff members who have skill and interest in this approach. The staff member should have the ability to understand and recognize various personality disturbances and the ability to assist the inmate in personal growth. Often the staff member will receive consultation from the Psychology Department.

8044. GROUP PSYCHOTHERAPY/INDIVIDUAL PSYCHOTHERAPY

Psychotherapy differs from other counseling approaches in that it is generally conducted by qualified mental health staff. This often includes an in-depth diagnosis and treatment of personality dynamics and behavioral disorders. Either an individual or group approach may be used.

8045. INMATE AD HOC, ADVISORY GROUPS AND COMMITTEES

Inmate Ad Hoc, Advisory Groups and Committees are a frequently used method for providing inmates with the opportunity for involving themselves in unit programming. Ad Hoc, Advisory Groups and Committees provide a two-way communication between unit staff and inmates which is necessary for any healthy unit program. They provide a forum whereby difficulties can be averted, and they allow for inmate input relative to all aspects of unit programming. They tend to promote a feeling of increased self-worth on the part of the inmates, and they are a good means for unit staff to stay abreast regarding various activities on the unit.

These groups are especially popular and effective because they are less cumbersome than large dormitory and Town Hall Meetings. Inmates specific duties, extent of authority and group structure should all be clearly defined and adhered to.

The Unit Manager is responsible for establishing procedures for selecting inmates to assure that the entire unit population is being represented and that the mission for which the committee was formed is being accomplished. Inmate involvement should be documented in the unit plan. The Unit Manager will carefully monitor these activities to maintain program integrity.

8046. UNIT TOWN HALL MEETINGS

Town Hall Meetings have proven to be an effective tool for enhancing positive communication between inmates and staff. Town Hall Meetings, by definition are regularly scheduled meetings involving all unit staff and inmates. They provide a means for disseminating information, debate and discussion, and often resolve inmate and staff concerns. It is important that these meetings be only for issues that concern the unit, not a forum for discussion of individual case management matters. No Town Hall Meetings will be held without consent and participation of unit staff.

Meeting structure and participation requirements will be different in various units. Meetings should be held at such times when all inmates and staff are available, to minimize interference with institutional operations. A clearly structured, well-organized procedure should be followed to allow for an orderly running of the meeting. Published agendas for the meeting will keep the meeting efficient. Guidelines on "How to Run a Town Hall Meeting" are available from the Unit Management Section, Central Office. It is important for the Warden and other top administrative staff to attend these meetings occasionally.

8047. PEER COUNSELING

Using inmates as peer counselors is recommended when qualified inmates can be identified. Peer Counselors may have insights into unit operations and their peer's problems which gives them a special value in counseling services. Ongoing training in individual and group counseling is particularly important because most inmates lack experience and will need help in this area.

When peer counseling is utilized, it is essential that there is a careful selection process, that their roles are clearly defined, and that their activities are monitored by staff. Precautions will be taken to insure that the peer counselor is not labelled as "staff" or assumes staff responsibilities.

8048. UNIT ORIENTATION

Most institutions will have an Admissions and Orientation Program. Some programs will be centralized because of the nature of the institution, while others may be decentralized. There also may be a combination of both.

Regardless of the approach adopted by the institution, each unit will be responsible for its own orientation program. This program will serve to inform new inmates of the unit program, operations, and to get the inmate into the "mainstream" of the unit activities as quickly and effectively as possible. It is essential that inmates meet staff on a planned basis within the first 24 hours after assignment to the unit.

Orientation programs will be written, well-planned, and a method for documentation of the inmate's progress through the program should be used. Unit Orientation Programs should be reviewed annually.

8049. UNIT PRE-RELEASE PROGRAMS

Each unit should design a viable, on-going release program which recognizes that the inmate's preparation must begin as soon as he is initially committed to the institution. The emphasis is to aid the inmate in making a successful reintegration into the community. This program should meet realistic and acceptable release plans which are in line with the inmate's needs and desires. The program itself may be a combinaiton of the dissemination of information via lectures, video tapes, guest speakers, and/or the accumulation of documents, licenses, and certificates needed by the inmate upon release.

The scope of the program may incorporate some of the following: Use of furloughs for release planning; work/study release units; program information about after-care agencies; CTC transfers; lectures from local, state and Federal agencies; a job readiness course; condition of parole and group problem-solving as tailored to meet inmate needs.

Unit Pre-Release Programs are viewed as being desirable. However, a supplemental centralized program for the entire institution may be necessary to insure economy of resources. To insure a continuous, comprehensive release program, one unit staff member might be designated as the Pre-Release Coordinator.

8050. LEISURE TIME—RECREATION PROGRAMS

Constructive use of leisure time is an extremely important area for unit inmates. Positive experiences in this area are easily transferred to the community. To have a viable unit recreation program, a unit Recreation Committee can be valuable to plan activities and act as liaison with unit staff.

The Unit Manager should keep several factors in mind when planning activities via the Recreation Committee: Unit age and interest; physical plant; avoidance of institutional functions to eliminate redundancy or overlap, etc.

Suggested activities are:

1. Monthly tournaments in table games;
2. Seasonal contests at times such as Christmas, New Year's, etc.
3. Inter-Unit competition in billiards, ping-pong, table games, etc.;
4. Hobby crafts.

The unit should work closely with the Recreation Department to avoid conflicts and insure a realistic, quality recreation program.

8051. INMATE HOUSING LEVEL SYSTEM

One of the inevitable facts of institutional life is that inmates will establish preferred living areas within each unit. Unit staff, through conscientious planning and management, will recognize this phenomenon to develop a meaningful housing level system. It will serve as an incentive and reward for whatever goals the staff establish, aiding in the control of the inmates.

If a unit elects to utilize a level system, it will be written into the unit plan. Written guidelines will be distributed to the unit population and will provide clear delineation between each housing level.

Inmate input will help to develop a valuable housing level system which will be realistic and accepted by unit inmates.

8052. CONSULTANTS

The use of consultants depends upon the availability of funds and the community resources. The 305 Cost Center may provide funds that can be utilized for consultants. Institutions and units may share their funds and consultants to make better use of these resources.

Consultants are usually employed at the initiative of individual units to perform a specific task. This usually includes staff training, leading counseling groups, peer counselor training and others. Generally, they will require basic orientation in custodial practices. Retaining, contracting and terminating their services will be unit responsibilities in consultation with the Business Manager.

Consultants may be used for research and evaluation purposes, staff and program development, workshops, counseling programs and specialized training.

8053. STUDENTS

The Bureau of Prisons promotes and encourages students to enter the correctional field. Many educational institutions find the Bureau of Prisons' facilities to be a positive training ground. When students are utilized, the Unit Manager

will provide structured training and supervision. Individual units should develop a strategy to recruit, train and utilize college practicum students or interns.

Personal interviews are essential in determining the stability and character of the student as well as addressing the person's capability and needs. While students are gaining experience in the correctional setting, they can contribute fresh and innovative ideas to unit correctional programs.

The correctional institution is a complex and confusing situation for many students. It is expected that only mature students who can responsibly handle their placement will be recruited. Normally, graduate level students best meet this criteria.

8054. VOLUNTEERS

Volunteers are useful to augment unit programs. They should be used to supplement, and not replace, regular staff members. Generally, the Unit Manager has the responsibility for the recruitment, orientation and supervision of volunteers. The institution Training Officer and/or Correctional Supervisor may assist in their orientation in the critical areas of contraband, control and fundamental security procedures and basic staff/inmate relations.

Services provided by volunteers should relate to the unit philosophy and program. It is important that clearly defined objectives and roles be provided. It is essential that volunteers be screened and their efforts be continually monitored.

8055. COMMUNITY ACTIVITIES

Staff and inmate participation in community activities can provide many benefits for all concerned. The type and location of the institution determines the extent of a unit's involvement in community programs. Unit Managers should utilize community resources in terms of the benefits they can provide for the community, institution and inmates.

Some of the benefits to be considered are:

1. Provides a means of normalization for inmates—contact with the "real" world;
2. Provides an incentive for inmates as they seek to improve and maintain their institution status in order to be able to participate in such an activity;
3. Provides an inmate with the opportunity to contribute to the community, which increases feelings of selfworth and responsibility;
4. Provides inmates with a positive experience for their use of leisure time;
5. Assists in the development of good public relations between the institution and the community;
6. Assists community organizations in accomplishing their objectives.

Other community activities that can be considered are: Special recreational programs, athletic events, field trips, and educational programs.

The Unit Team will be selective in terms of the inmates who will participate. The Unit Manager and staff will carefully monitor the program.

Community activities always require cooperation with various departments, especially the correctional department. The Unit Manager will work closely with all institutional staff to maintain the objectives of the program. Staff will be sen sitive to the special concerns of the community.

8060. MANAGEMENT OF A UNIT

Introduction

A unit which received major decision-making responsibilities from the administration is a small, but complex organization. The generalist Unit Manager has many areas for which he is responsible. Few Unit Managers are thoroughly familiar with the many responsibilities facing them, including security, case management, personnel, supervision, training, safety and sanitation, unit programs, budget management, research, etc. The effective Unit Manager must develop expertise in each of these areas. This person will often consult with the specialist department heads for assistance in raising his own proficiency, and to see that it is maintained at the necessary level.

This chapter will mention the major areas of responsibility on which a Unit Manager focus his attention. Because of the variety of units in the Bureau of Prisons, and local needs, some guidelines are broad and permit and encourage local adaptation. Other categories are more specific and the standards to be met are more precise.

8061. HOURS OF DUTY/ANNUAL LEAVE

Unit Managers are responsible for establishing the working hours of their unit staff. It is expected that every unit will have evening and weekend staff coverage of the unit in addition to the presence of the Unit Correctional Officer(s). All unit staff will be scheduled for some evening and/or weekend coverage to insure their availability to inmates during leisure hours and to become familiar with the total unit operation. The presence of unit staff at those times also contributes to better control of the unit inmates.

Unit Managers, to fully monitor their total unit operation, must also be present during some evening and weekend hours. With these guidelines, it is expected that each Unit Manager will develop a schedule which provides the best possible coverage.

Annual Leave procedures should be developed to provide uninterrupted inmate services while insuring employees are granted annual leave. The Unit Managers should schedule annual leave in advance for all employees for whom they have responsibility. Correctional Counselors should be granted leave by the Unit Managers, and the Unit Managers, through consultation with the Chief Correctional Supervisor might be granted temporary Correctional Counselor coverage. The Unit Manager's annual leave should be approved in advance and scheduled by the Associate Warden.

8062. SAFETY AND SANITATION

The Bureau of Prisons maintains high standards in the areas of sanitation. The appearance of a unit reflects its pride and the quality of the management. High sanitation standards can be a positive force for fostering responsibility and pride in the unit inmates.

Unit Managers are responsible for the appearance and cleanliness of their unit. Many units have had success in utilizing inmate sanitation committees. These committees may enhance a sense of individual and group responsibility. Sanitation standards are observable objectives and provide a means of evaluating an individual inmate's level of responsibility and progress as well as the unit's level of efficiency.

Safety within the unit encompasses not only the physical plant, but also includes the responsibility of unit staff to provide an environment where inmates can live without fear of intimidation, reprisal or unsafe conditions.

Unit staff is responsible for periodic inspection of the unit for fire hazards and any other hazards to safety and periodic safety lectures during Town Hall Meetings. During periodic shakedowns, staff should be aware of flammable materials as well as unauthorized tools. Timely confrontations from improper use of unit equipment and horseplay that could result in inmate injury are also responsibilities of unit staff.

8063. SECURITY

United Management results in the delegation of many security responsibilities to Unit Managers and their staff. These responsibilities may include providing count assistance, security shakedown inspections, contraband control, daily notations and review of unit logs, completion of bar taps, submission of security checks as required by Bureau and local policy and awareness of Post Orders.

Continuous cooperation between unit staff and the custodial department will insure that security duties are accepted, practiced, monitored, and upgraded. While unit staff have many responsibilities, maintaining high security standards will always be a primary requirement.

8064. PERSONNEL DEVELOPMENT AND EVALUATION

Unit Managers should review staff constantly to assess strengths and weaknesses. While evaluation and formal training are governed by Bureau and institutional policies, the use of staff meetings, daily close-outs, unit in-service training programs, opportunities for acting capacities, recognition of superior work, etc., are excellent methods of fostering personnel development. Whenever possible, cross training of unit staff is encouraged.

Regular evaluations and frequent informal review of performance with all unit staff will allow for efficient, positive career development. Thorough documentation of employee performance throughout the year is a good management practice. When employee evaluations occur, reference is made to the performance standards by which the employee will be rated.

The Unit Manager will assure that current position descriptions and performance standards are maintained and understood by all unit staff.

Unit Managers will work closely with the Personnel Department to insure that personnel practices are being followed. Specific Personnel Policy Statements and Evaluation forms the Unit Manager needs to be familiar with are:

1. Merit Promotion Plan.
2. Performance Evaluation Plan.
3. Incentive Awards and Recognition.
4. Master Agreement and Supplemental Local Agreement.
5. Standards of Employee Conduct and Responsibility.
6. Grievance Procedure and Disciplinary Action Procedures.
7. BP ADM 110—Performance Evaluation.
8. BP 117—Promotion Readiness Evaluation (Non-Supervisory).
9. BP 118—Promotion Readiness Evaluation (Supervisory).
10. E.E.O. Action Plan and E.E.O. Requirements.

8065. STAFF TRAINING

Staff Training is governed by Bureau policy and the Staff Training Officer should be consulted to assure that each staff member has fulfilled his level of required training. Optional training should be scheduled as individual needs dictate, utilizing Bureau of Prisons and outside resources. This training will allow for personal staff growth while enhancing unit and institutional operations. Training is an on-going effort, and unit staff will be reviewed for necessary training and development needs.

Training forms the Unit Manager should be familiar with are:

1. Optional Form 170—Application and Approval for Training.
2. BP ADM 57—Request and Authorization for Training.
3. BP–116—Employee Education and Training Record.

Review of the BP–116 with the concerned employees will be made a part of the annual performance evaluation.

8066. UNIT PROGRAM CHANGES

Unit Managers should be aware of the changing needs of their inmate population. This will require an on-going assessment of the relevance of unit programs. Program alterations occur in all units for various reasons. While Unit Managers or their staffs will make these adjustments, they will always be completed with the review and approval of the institution administration.

Major changes in Unit Management operations will be done in consultation with the Unit Management Section, Central Office and/or the Unit Management Section in the Regional Office.

8067. UNIT STAFF/INMATE RELATIONSHIPS AND COMMUNICATIONS

Healthy unit staff/inmate relationships based on mutual respect are essential in every unit. This is one of the major advantages of decentralized Unit Management. Good relationships foster an environment where communication, personal growth, and building a sense of "community" can take place. It is expected that each Unit Manager will develop a leadership role that assures the presence of this positive climate.

8068. UNIT STAFF MEETINGS

Unit staff meetings can be the core of a well-developed unit program and it is an essential part of any unit operation. A unit staff meeting provides the opportunity for all staff members to initiate and develop ideas, resolve problems, disseminate information, and enhance group solidarity. All unit staff members are expected to contribute and participate in these meetings.

Unit staff meetings should be held on a weekly basis in order to provide continuity and maintain group cohesion. All unit staff members including the Correctional Officers, should be required to attend these meetings. Although Correctional Officers are not always on duty, arrangements should be made to have them attend as often as possible. It is urged that minutes be kept of the staff meetings and widely distributed to familiarize other departments and the administration with unit operations.

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8069. UNIT BUDGETS: (305, 316 AND 317)

Cost Center 305 has been developed for Unit Management. Each Unit Manager under this Cost Center is a Project Manager. With the guidance of Bureau recommendations, institutions will develop this Cost Center for each unit which will meet local needs.

All Unit Managers should receive Cost Center/Project Manager training. Alcoholic Treatment, Drug Abuse and NARA Units continue to receive funding under Cost Centers 316 and 317. Local administrators and Unit Managers will determine the most effective procedures for unit budget operations when 305, 316 and 317 Cost Centers are utilized.

8070. UNIT TEAM MEETINGS

The Unit Team Meeting is an essential element of the unit operations in making sound decisions regarding inmate programs and activities. It is a multidisciplinary approach (Corrections, Case Management, Education and Psychology), to insure professional input from all areas of the institution which affect the inmate's institutional activities. The inmate will always be a member, unless he prefers not to be present. Each member is expected to attend the meetings thoroughly prepared to discuss the inmate under consideration. This will necessitate reading of case material, presentence reports, etc. and interviews with the inmate.

Unit Teams are composed of at least three (3) staff members, which may include the Unit Manager, Case Manager, Counselor, Educational Representative, Psychologist, Unit Officer and Secretary. The Unit Manager is expected to be present at most Unit Team Meetings. Though it is not required that he be chairman, he must monitor these meetings and the results in order to insure a quality operation.

Appeal of decisions made in the Unit Team Meetings should be through established appeal procedures. Review committees which operate under centralized management are no longer appropriate.

8071. UNIT DISCIPLINARY COMMITTEE AND INSTITUTIONAL DISCIPLINARY COMMITTEE

Where unit management exists in an institution, the Unit Disciplinary Committee (UDC) has the responsibility for taking initial action on Incident Reports incurred by unit inmates. Since unit staff members are more knowledgeable regarding their inmates, they are in a better position to take action which will best benefit the inmate and the institution.

The UDC has the authority and responsibility to impose all sanctions except forfeiture of good time, disciplinary transfers, placement in disciplinary segregation, and those which make an adjustment in parole dates. Unit Managers have the responsibility to insure that only appropriate cases are being referred to the IDC.

All unit staff members will be familiar with Bureau and local policies on inmate discipline.

8072. UNIT PLAN GUIDELINES AND FORMAT

Unit Plans are developed to define unit missions and goals, describe programs, defining responsibilities, and prescribe how the unit will evaluate its operation.

Each Unit Manager will develop and maintain a Unit Plan defining the unit operation in accordance with existing institution, Regional Office and Central Office requirements. It is encouraged that unit staff and inmates participate in the development of unit plans. Unit Plans should be developed and revised according to the Guidelines set forth in Operations Memorandum 8000.9, *Guidelines and Format for a Unit Plan*, dated 12–15–76.

8073. UNIT EVALUATION AND RESEARCH

Evaluation of the unit concept of correctional management as it affects many area of the institution is essential and is a high priority in the Bureau of Prisons. Considerable effort has been directed towards this end, and to date, some of the results of these efforts have been published and distributed.

An effective ongoing evaluation program is a necessary element at every stage of the Unit Management process. These programs are necessary to provide information at the local, Regional, Bureau and Department of Justice levels.

Local evaluation and research programs may be relatively simple or may evolve into sophisticated programs depending upon the needs and personnel resources of the respective unit.

Unit-based evaluation and research may include any combination or all of the following items: Incident Reports; Unit Performance Reports; Work/School/Vocational Training Reports; Staff Contact Reports; Hospital Call-outs; Weekly Inspection Reports; Furlough Reports; Escapes; CTC releases; Assaults; Psychological Testing; Management by Objectives, etc.

Institutional administrators and Unit Managers are urged to develop a systematic evaluation procedure. The Office of Research and the Unit Management Section, Central Office, and the Regional Research Coordinator, will provide institutions with recommendations for research/evaluation which would be helpful for Bureau needs.

8074. WEEKLY SCHEDULE OF UNIT ACTIVITIES

To enhance the Unit Management process at the local level, it is suggested that each unit publicize a weekly schedule of activities. This schedule should include on-going unit activities as well as special events. Wide distribution of this schedule is urged so that all concerned are aware of what is occurring within each unit.

Weekly unit schedules may be compiled for all units and distributed as a single document to concerned departments. This communication technique should contribute to further understanding of all unit programs and operations by other institution staff.

8075. EVENING CORRECTIONAL PROGRAMS

Unit counseling groups, team meetings, as well as leisure time activities, can often be scheduled for evening hours. Evening programming reduces call-outs during the day, which in turn alleviates conflict with various institutional departments, such as Industry. Evening programming allows the inmate to function without interruption during the normal work day. It also encourages greater staff/inmate interaction at a time when unit inmates are more available.

Local needs and staffing patterns will determine the extent of Evening Programs. Unit staff schedules should reflect appropriate programs coverage on evening and weekends.

8076. INMATE FILES

Under most Unit Management systems, inmate files are decentralized and secured in the individual unit office. Although some delegation is necessary, the Unit Manager is accountable for their security and control. Files should be maintained in a fireproof cabinet with a clear method of accountability being established for the removal and return of the file.

Care must be taken in the organization and documentation of the files with special attention being given to compliance with FOI and Privacy Act procedures.

The Unit Manager is responsible for complying with all inmates records related functions identified as "unit functions" in accordance with Policy Statement 7900.56, dated August 17, 1976.

8077. COMMON RULES FOR ALL UNITS

When establishing unit rules and regulations, Unit Managers will keep in mind the effect they have on other units and on overall institution operations. Many rules and regulations in the units can be standardized without jeopardizing unique unit missions. Often unhealthy competition can be avoided if units adopt similar rules for similar situations.

Unit Managers will review proposed changes with other Unit Managers, affected department heads, and the administration, prior to implementation.

8078. ACTING UNIT MANAGERS

Various unit staff members will have the opportunity to be Acting Unit Manager. This experience can serve as a means of developing unit personnel, assess level of capability and responsibility as well an encouraging and recognizing the staff members' abilities. All unit staff should have the opportunity to assume this role.

Cross training with other services can be invaluable training experience to further enhance an understanding of unit operations.

8085. UNIT MANAGER TRAINING PROGRAM

In the Summer of 1972, the first Unit Managers began to receive specialized middle management training. This course has been refined to include the many skills Unit Managers must develop.

The Unit Manager Training Program is operated by the Unit Management Section, Central Office, with assistance provided by knowledgeable Regional Office and institutional staff. The training is usually held in one of the Staff Training Centers. Various management and support personnel frequently monitor the training to increase their understanding of the decentralized, unit approach to correctional management.

8090. RATING AND REVIEWING UNIT STAFF

Since the inception of Unit Management, there has been much discussion about procedures for the rating and reviewing of unit staff. The 1975 Task Force on Unit Management Performance Standards, Regional Office Administrators and Central Office staff have all contributed to the procedures which were recently finalized. It is expected that these rating and reviewing standards will be adhered to in all institutions. Unusual conditions requiring adaptations should be brought to the attention of the Chief, Unit Management Section, Central Office, and the Unit Management Coordinator in the Regional Office.

8091. UNIT MANAGER

The Unit Manager will be rated by the Associate Warden and reviewed by the Warden.

8092. CASE MANAGER

The Case Manager will be rated by the Unit Manager. The Associate Warden will review the Case Manager's rating.

8093. CORRECTIONAL COUNSELOR

The Correctional Counselor will be rated by the Unit Manager and reviewed by the Associate Warden.

8094. UNIT SECRETARY

The Unit Secretary will be rated by the Unit Manager and reviewed by the Associate Warden.

8095. UNIT CORRECTIONAL OFFICER

The Unit Correctional Officer who receives the majority of his supervision from the Unit Manager (Day and Evening Watch) during the rating period, will be rated by the Unit Manager, with input from the 5x8 cards from the Correctional Supervisors. Unit Correctional Officers who receive the majority of their supervision during a rating period from the Correctional Supervisor, will be rated by the Correctional Supervisor, with input from the Unit Manager on the 5x8 card. The Chief Correctional Supervisors will review. Sick and Annual Relief Officers will also be rated by the Correctional Supervisors and reviewed by the Chief Correctional Supervisor.

8096. EDUCATION REPRESENTATIVE

The part-time Unit Education Representative will be rated by the Supervisor or Assistant Supervisor of Education, with input from the Unit Manager. The Supervisor of Education or Associate Warden will review.

8097. UNIT PSYCHOLOGIST

The Unit Psychologist, who is assigned permanently to a unit on a full-time basis, will be rated by the Unit Manager with input from the Chief of Psychology. A Psychologist who is assigned on a part-time basis to a unit will be rated by the Chief of Psychology with input from the Unit Manager(s). The Associate Warden will review.

DRUG ABUSE TASK FORCE REPORT

OPERATIONS MEMORANDUM

1. *Purpose.*—To circulate the report of the Drug Abuse Task Force.

2. *Explanation.*—Attached is a copy of the report of the Drug Abuse Task Force which was approved at the last Executive Staff meeting. I am very concerned that we have credibility and accountability in Drug Abuse/Alcohol Unit Programs in our system. The standards set forth in this report will help achieve high quality Drug Abuse/Alcohol Unit Programs.

Regional Unit Management Administrators and the Regional Psychology Services Administrators in each region should work together in auditing Drug Abuse/Alcohol Units to determine which units meet these standards and the needs of the units which do not. Any needs for expansion of these specialized units should also be part of this review.

By October 1, 1978, each Region should send a complete report on each DAP/Alcohol Unit Program to the Assistant Director, Correctional Programs Division. The Unit Management Section, Central Office will compile a status report on these specialized units for the Executive Staff for the November meeting.

3. *This operations memorandum is cancelled May 30, 1978.*

U.S. GOVERNMENT MEMORANDUM

MARCH 15, 1978.

Subject: Drug Abuse Task Force.

To: Norman A. Carlson, Director, Bureau of Prisons.

The following summary of recommendations is the result of the concerns of the Drug Abuse Task Force. The areas concentrated on are detailed in a full report.

Our charge included reviewing the quality of program offerings, staffing and integrity in management of resources.

Recommendations:

1. Alcohol Abuse, Chemical Abuse, NARA and Drug Abuse Units will be defined as Drug Abuse units.

2. Drug Abuse units continue to be provided funds for Operational and Consultant needs. Operational money is not to be spent on major equipment, basic institutional needs, or services provided elsewhere in the institution. Consultant money will be spent only for services which cannot be provided by staff of the institution.

3. Consultants will be used in conjunction with a unit staff member.

4. Consultants may be used for training staff in various counseling techniques and modalities, when institution or Bureau resources are not available.

5. Alcohol units and the Chemical Abuse units be included in the funding provided out of the existing Cost Center 317 budget.

6. Drug and Narcotics Surveillance program and testing for Alcohol Abuse be funded and managed under Cost Center 319.

7. For a Drug Abuse unit of 100 or less, the minimum staffing pattern will be: 1 Unit Manager; 1 Case Manager; 2 Correctional Counselors; 1 Clerk/Typist; 1 Psychologist; Part-Time Educational Representative; Correctional Officers on all shifts.

8. Under the supervision of the Unit Manager, the Unit Psychologist will coordinate the consultant activity in the unit and provide a well rounded program.

9. Minimal standards for all program involvement by unit staff will be established. (Description in Full Report)

10. There will be three phases of program involvement. The standard must have:

A. An Introductory/Opting Out Phase.

B. Intensive Program Phase.

C. Pre-Release Phase (See Full Report).

11. Establish a definite standard before an inmate can be considered as having completed a program or can be certified as completing the program. (See Full Report)

12. A system of data collection be established. (See Full Report)

13. Research projects relating the Drug Abuse will be approved prior to funding by the Unit Management Administrator, Central Office and the Research

Director of the Bureau. Both will be responsible for signing for authorization of Drug Abuse funds used in research projects.

14. The research should be useful to management at all levels and written in non-technical terms.

15. The Bureau Research Department be responsible for establishment of liaison to the field for disseminating and interpreting Drug Abuse Research Information and Reports.

16. The data available in the Inmate Information System be made retrievable to the units by establishment of a unit code designation.

17. The Unit Manager monitor his program on a regular basis, using the internal audit.

18. The Regional Unit Management Administrator and Regional Psychology Administrator will audit each Drug Abuse program annually.

19. Drug Abuse/Alcohol Unit Managers will develop a training plan reflecting the specific type of training needs for staff which are necessary for the Drug/Alcohol unit.

20. A minimum standard of one (1) specialized training program be provided for each staff member in a Drug Abuse unit.

21. All staff in a Drug Abuse unit will complete a course in drug education.

22. Regional Directors will review positions in Drug Abuse units to see if positions are being used fully and that maximum productivity of program and operational standards are being achieved. The Regional Unit Management Administrator will present plans for bringing institutions which do not meet the minimum standard up to an acceptable level. In FY 1979 high priority will be given to relocating positions where there is a need to meet the standards.

23. All institutions establish a Drug Abuse Unit. Positions should first be sought locally; with Regional Directors attempting to assist through reallocation of positions.

24. Funding for existing units not now having an adequate financial base will be through existing funds.

25. New Drug Abuse units will be implemented and financial resources distributed in the regions only when it is certified that the unit meets the basic standards which are set forth for Drug Abuse units.

26. Experimentation with different combinations e.g., Chemical Abuse/Substance Abuse will be encouraged.

REPORT OF THE DRUG ABUSE TASK FORCE—CONCERNS AND RECOMMENDATIONS

The Drug Abuse Task Force met in the Central Office Conference Room on January 31, 1978 through February 1, 1978, to review Drug Abuse/Alcohol/Chemical Abuse. The main responsibilities of the Task Force were outlined in Operations Memorandum 8500.8, dated January 3, 1978. Director Norman A. Carlson met with the Task Force and related his concerns regarding the effectiveness of Drug Abuse units, the setting of standards for Drug Abuse units, staffing of Drug Abuse units and funding of Drug Abuse units. At the present time there are 26 Drug Abuse units in 21 institutions; five Alcohol Abuse units, and two Chemical Abuse units. These units provide direct services to inmates. Approximately 30% of the inmates in Bureau of Prisons institutions indicate having had a history of drug abuse.

Recommendation

1. For the purpose of this Task Force reports Alcohol Abuse units; Chemical Abuse units; and NARA/DAP units will be considered under the inclusive designation as Drug Abuse units.

FUNDING OF DRUG ABUSE PROGRAMS/UNITS

Concern

The Task Force is concerned about the allocation of Drug Abuse money. At the present time the Drug Abuse money is allocated from the Central Office to the Regions to the local institutions. At the Central Office level the responsibility for allocating Drug Abuse monies lies with the Chief of Unit Management. However, at the present time $100,000 is taken out of the Drug Abuse funds for research purposes. The Task Force questions the use of these monies.

The local institution is allocated money for operational and consultant budgets in Drug Abuse units. There is a double funding issue involved in the Operational aspects of Drug Abuse programs. Money allocated for Drug Abuse programs should be used directly for program purposes rather than purchasing equipment and services which are already taken care of in the institutional budget. At the present time there is a wide disparity in the use of Drug Abuse funds, and in some cases are used for other programs. It was felt that basic operational needs should be funded through the institutional M & O Budget while consultants, testing, and training and inmate program needs money will be available to the Unit Manager out of the 317 Budget.

Alcohol treatment programs are being carried on in five separate units in the Bureau of Prisons and two Chemical Abuse programs combine both Drug Abuse programs and Alcohol programs. Funding for these alcohol programs has been difficult to maintain. For some time these programs were funded out of the 316 budget (Psychological Services) but when Alcohol programs were switched to Unit Management no provision was made for funding for these programs.

The Bureau is involved in a random selection Narcotics Surveillance program consisting of urine analysis in all its institutions. Over and above this 5% sampling, Drug Abuse units have a higher rate of urinalysis sometimes resulting in as much as 20% sampling of their unit populations.

Concern was expressed as to whether this could be carried on under the present policy, and where funding for this program would be provided. At the present time Cost Center 319 has been established for the Drug Abuse Surveillance Program. Future policy which is in the draft stage will reflect reporting procedures for the 5% category and for specialized testing of drug users.

Recommendations

2. The Drug Abuse units be provided money for Operational and Consultant needs. Operational money is not to be spent on major equipment, basic institutional needs, or services provided elsewhere in the institution. Consultant money will be spent only for services which cannot be provided by staff of the institution.

5. Alcohol units and the Chemical Abuse units be included in the funding provided out of the existing Cost Center 317.

6. Drug and Narcotic Surveillance program and testing for Alcohol Abuse be funded and managed under Cost Center 319.

STAFFING PATTERNS OF DRUG ABUSE UNITS

Concern

Staffing patterns of Drug abuse units vary throughout the Bureau of Prisons. This is usually dependent upon the degree of staffing conversion that was or can be made in the local institution. In the beginning of the NARA unit positions were available to establish well staffed units. However, in the most recent months staffing patterns in Drug Abuse/Alcohol units have required a much larger ratio of inmates to staff because of our overcrowded institutions. There should be a higher level of staffing in specialized program units which is needed to provide intensive unit programs. The following staffing pattern will be considered necessary to maintaining a quality type program in specialized units.

7. For a Drug Abuse unit of 100 or less, the minimum staffing pattern will be: 1 Unit Manager; 1 Case Manager; 2 Correctional Counselors; 1 Clerk/Typist; 1 Psychologist; Part-Time Educational Representative; Correctional Officers on all shifts.

Additional staff will be added as number of inmates and intensity of program develops at a ratio of 1 Case Manager per 75 inmates and 1 Correctional Counselor per 40 inmates. Assignments to these special units will take into consideration staff training and interest in intensive treatment programs.

UTILIZATION OF COMMUNITY RESOURCES

Concern

It is recognized that there are certain types of programs and services which cannot be provided by regular institution staff. These must come from Community Resources. The major community resource available to the specialized unit (Drug Abuse or Alcohol) is the consultant. Consutants have too often been used to supplement programs that should be provided by unit staff, and in in some cases have taken over the responsibility of programs in Drug Abuse units. In these cases

staff have often reverted back to a basic general operational type of posture in the units relinquishing the program responsibilities to the consultants. This creates many problems for the institution and avoids responsibilities which should be accepted and taken on by the staff.

Recommendations

3. Consultants will be used in conjunction with a unit staff member.

4. Consultants may be used for training staff in various counseling techniques and modalities, when institution or Bureau resources are not available.

8. Under the supervision of the Unit Manager, the Unit Psychologist will coordinate the consultant activity in the unit and provide a well rounded program.

STAFF RESPONSIBILITIES

Concern

Drug Abuse units have been developed around the premise that a major part of the utilization of staff resources will be devoted toward programs and activities which impact the dependency needs and problems of the inmate involved. Expectations of staff members of specialized units have often not been defined at the Central Office Regional or Institutional level. Therefore, in many cases, the Drug Abuse unit or Alcohol treatment unit has been little different in design or program from the general type units developed throughout Unit Management. To maintain integrity in these areas it becomes very necessary to establish standards for utilization of institutional staff and resources.

Recommendation

9. The following is set forth as a minimal involvement in program areas for staff in specialized units.

A. The Unit Manager has administrative responsibility for the entire unit, its program, and staff.

B. The Psychologist will be responsible for development, evaluation, and coordination of unit therapeutic and training programs. The Psychologist must have a minimum of two groups a week.

C. Each Case Manager in addition to Case Management responsibilities, will be expected to conduct at least one group per week.

D. Each Correctional Counselor will have a minimum of two groups per week and will provide ongoing contact with all assigned inmates, in accordance with Policy Statement 7300.125, Correctional Counseling Program.

E. The Education Representative will spend a minimum of 8 hours in unit related responsibilities, data and expertise in developing the inmate's Educational/Vocational Training program. The Educational Representative will be a regular voting member of the Unit Team.

PROGRAM COMPONENTS OF DRUG ABUSE UNITS

Concern

One of the areas which has caused frequent difficulties in Drug Abuse unit programming has been the determination of exactly what the program should consist of. There are wide variations through the Bureau of Prisons regarding these programs. At the present time each manager has the option of developing his particular program. There is often confusion on the part of the inmate in knowing just what is expected of him for completion of a Drug Abuse program and similar confusion on the part of the staff regarding the things that should be placed in a particular program. The recommendations given below will set standards for program components.

Recommendation

10. Every Unit must have three phases of program involvement.

A. *Introductory and Opting Out Phase.*—(1) An intensive Orientation program to the unit and the institution.

(2) Evaluation by the Unit Staff.

(3) A Drug Education class which devotes time to explaining the different types of drugs and their effects upon the human body and mind.

(4) Exposure to the different program modalities which are offered by the unit.

(5) At least one Group Counseling meeting weekly.

(6) At least a half day work assignment while awaiting classification.

B. *Intensive Programming Phase.*—(1) A contractual agreement spelling out the things which the inmate and staff have agreed upon as being effective approaches to the inmates' problems of dependency on alcohol or drugs.

(2) There will be a identifiable unit program modality. Each unit will provide at least one major modality with options and alternatives for those inmates who find that they cannot accept or participate in the primary modality.
(3) Group and Individual Counseling.
(4) Classes or groups in Personal Development.
(5) Psychotherapy—Group or Individual.
(6) A unit Narcotics and/or Alcohol Surveillance program.
(7) Social Skills Development Program.

C. *Pre-Release Phase.*—Each unit will have a pre-release or community readiness program to provide continuity between unit program and community support services.

(1) Appropriate aftercare information will be disseminated to the individual inmate, including:
a. A list of community resources.
b. Expectation of Parole Performance.
c. Listing of support groups in the community.

(2) Aftercare will be recommended for inmates who have drug dependency problems and follow up services provide for inmates with alcohol problems. Urine analysis/Breathelizer tests should be included in the program. Counseling, emergency services, job counseling, housing assistance and other assistance to meet the inmate's needs should be included.

(3) The aftercare contractor or follow up service in the community should be invited and encouraged to come to the institution and meet with the inmate.

(4) The pre-release program is outlined in the Unit Management Manual, Policy Statement 8000.1, and Aftercare Manual, Policy Statement 8500.1.

EXPECTATIONS OF INMATES IN DRUG ABUSE UNITS

Concern

The inmates in Drug Abuse units need to know what is expected in consideration for completion (Certification) of the program.

Recommendation

11. Establish a definite standard before an inmate can be considered as having completed a program or can be certified as completing the program. Such a standard should include, but is not limited to:
A. An orientation period of at least 40 hours which has both individual and group orientation, fully documented in the inmate file.
B. A minimum of 100 hours in counseling and/or psychotherapy.
C. A demonstrated knowledge of Drug information and its various problems and effects on body.
D. A demonstrated pattern of good work habits.
E. Good institutional adjustment.
F. A demonstrated pattern of clean urine analysis.
G. Completion of at least 40 hours in a pre-release program set up by the unit.
H. Preparation for aftercare in the community.
I. Work assignments—minimal of a half day.
J. Recreation and/or Leisure program within unit.
K. Communication type meetings.
L. Community involvement if appropriate to the institution.
M. Inmate Progress Assessment.

EVALUATION AND RESEARCH

Concern

There should be an ongoing evaluation program within the unit which will evaluate program and inmate participation. Local program evaluation should give the institutional Executive Staff adequate information to assess whether the program is really accomplishing what it should. It should help the local DAP/NARA/ALCOHOL Abuse Unit Manager to determine whether his staff are carrying through with their responsibilities in counseling, program development operations and "treatment" of the drug/alcohol dependent inmate.

Recommendations

12. A system of data collection be established which will show the following:
A. The number of inmates and months of post release success as reflected by unit assignments.

B. The institutional adjustment of inmates by units.

C. Comparison of units within institutions, institutions within regions; and regional priorities.

13. Research projects relating to Drug Abuse will be approved prior to funding by the Unit Management Administrator, Central Office and the Research Director of the Bureau. Both will be responsible for signing for authorization of Drug Abuse funds used in research projects.

14. The research should be useful to management at all levels and written in non-technical terms.

15. The Bureau Research Department be responsible for establishment of liaison to the field for disseminating and interpreting Drug Abuse Research information and reports.

16. The data available in the Inmate Information System be made retrievable to the units by establishment of a unit code designation.

17. The Unit Manager monitor his program on a regular basis, using the internal audit.

18. The Regional Unit Management Administrator and Regional Psychology Administrator will audit each Drug Abuse program annually.

STAFF TRAINING

Concern

In order to develop and maintain viable Drug Abuse programs in the Bureau training of staff is a necessity. Intensive type programs require training of staff to assure quality performance. This training should be over and above that which is presently provided by the Bureau for all of its employees.

Recommendations

19. Drug Abuse/Alcohol Unit Managers will develop a training plan reflecting the specific type of training needs for staff which are necessary for the Drug/Alcohol unit.

20. A minimum standard of one (1) specialized training program be provided for each staff member in a Drug Abuse unit.

21. It is expected that all staff who work in a Drug Abuse unit will complete a course in drug education.

IMPLEMENTATION OF RECOMMENDATIONS

Concern

It is a concern that implementation of the recommendations be done in order to restore and create integrity in the Bureau Drug Abuse Program. The following recommendations are made to achieve this goal.

Recommendations

22. The Regional Directors with the assistance of their Regional Administrators review positions in Drug Abuse Units to see if positions are being used fully and that maximum productivity of program and operational standards are being achieved. The Regional Unit Management Administrator will present plans for bringing institutions which do not meet the minimum standard up to an acceptable level. The Regional Directors will give high priority in FY 1979 to relocating positions where there is a need to meet the standards which are set forth.

23. All institutions establish a Drug Abuse Unit. Positions should first be sought locally; with Regional Directors attempting to assist through reallocation of positions.

24. Funding for existing units not now having an adequate financial base will be through existing funds.

25. New Drug Abuse units will be implemented and financial resources distributed in the regions only when it is certified that the unit meets the basic standards which are set forth for Drug Abuse units.

26. Experimentation with different combinations e.g., Chemical Abuse/Substance Abuse will be encouraged.

Conclusion

The goal is to meet the needs of Bureau of Prisons inmates through providing such units and to maintain integrity, high standards and accountability in the Drug Abuse programs.

Drug Abuse Programs should be available to all offenders in the Bureau of Prisons.

The program must meet established standards and be evaluated annually.
Staffing Patterns and Staff Expectations must be standardized through Bureau.
Inmates must be advised of their program responsibilities.
Research and evaluation must occur on an ongoing basis.
Present funding is adequate to support Drug Abuse/Alcohol units.

MEDICAL EXPERIMENTATION AND PHARMACEUTICAL TESTING: POLICY STATEMENT

(Policy Statement by Norman A. Carlson, Director, Bureau of Prisons)

1. *Purpose.*—To state Bureau of Prisons policy regarding medical experimentation and pharmaceutical testing.

2. *Policy.*—It is the policy of the Bureau of Prisons that medical experimentation and pharmaceutical testing shall *not* be conducted on inmates.

3. *Explanation.*—This policy precludes the use of inmates as subjects for any non-therapeutic medical experimentation including the use of unestablished drugs and unapproved medical tecniques. This applies to any inmate in the custody of the Attorney General, and assigned to the Bureau of Prisons regardless of his location, i.e., in a Bureau of Prisons facility or in a jail, state institution or other facility.

It is not intended that this policy in any way limit the use of accepted diagnostic and therapeutic measures, nor the collection of data relative to the use of such measures, when they are performed for bonafide medical indications under acceptable medical supervision.

4. *Exception.*—This policy shall not preclude the employment of the U.S. Department of Health, Education and Welfare's approved experimental diagnostic and therapeutic measures that may be warranted for the diagnosis or treatment of a specific inmate when recommended by the responsible physician and approved by the Director or his designee. Such measures must have the full informed consent of the inmate and be conducted under conditions approved by the U.S. Department of Health, Education and Welfare. This would include, for example, the transfer of an inmate to the Clinical Center at the National Institutes of Health for experimental cancer chemotherapy.

5. *Implementation.*—This policy is effective immediately.

MATERIAL SUBMITTED BY JOHN N. WILLIAMSON

QUESTIONS AND ANSWERS ABOUT LIFESPRING

WHAT IS LIFESPRING?

Lifespring is an organization specializing in personal growth trainings. It was founded in January 1974 by John P. Hanley and a group of four others who had extensive experience in educational and business trainings.

As part of the human potential movement, Lifespring provides a complete program of growth beginning with the Basic and continuing to advanced levels. Participants may take only the Basic Training, or continue through the entire program. Family Trainings are also offered for Lifespring graduates and their children.

Lifespring operates a Business Division which presents handtailored trainings to corporate management personnel throughout the country on a contract basis.

The Lifespring Foundation is a non-profit agency which is active in each of our cities. The Foundation focuses on providing significant service for the community on a local level, and is involved in the educational field on a national level.

Headquartered in San Rafael, California, Lifespring has offices and offers trainings in these cities: Seattle, Washington; Portland and Eugene, Oregon; San Francisco, Los Angeles, Orange County, and San Diego, California; Phoenix, Arizona; Philadelphia, Pennsylvania; Washington D.C.; and Vancouver, British Columbia.

WHAT IS THE LIFESPRING BASIC TRAINING?

The Lifespring Basic Training is a 50-hour program carefully designed and structured to stimulate personal growth. It provides a safe supportive environ-

ment where participants experience more of who they really are. For most, the result is far reaching—a more satisfying, fulfilling and joyful life that requires less effort.

The Basic Training is an unusual educational experience. There is no content to be learned, no new information to be studied or skills to be mastered. Instead, significant personal growth comes as a result of self awareness and acceptance. Each of us already has everything necessary to achieve and be all we want in our lives. The trainer expertly allows participants to reach a personal realization of this truth. A variety of proven and accepted techniques are employed, including meditation, fantasy, group sharing, role playing, two person and small group exploration processes, games, and peer feedback.

The Basic Training takes place on five consecutive days—Wednesday, Thursday and Friday evenings, plus all day Saturday and Sunday. A post-training session is held 10 days later. Graduates are asked to attend a personal interview the week after the training to talk about their experience of the training and to discuss their further participation in advanced Lifespring trainings.

Tuition for the Basic Training is $250. Afer completing the Basic graduates can return on a space-available basis to re-experience the training as they desire free of charge.

WHAT HAPPENS IN THE BASIC TRAINING?

Registration takes place at 6:30 p.m. Wednesday with the training beginning at 7:30. After a brief introduction, the trainees agree to abide by a simple set of ground rules for the training. These ground rules include:

1. Trainees must maintain absolute confidentiality of other trainees' experiences.
2. Trainees must be on time and be seated before the music that starts each session ends.
3. No watches or clocks are to be worn or referred to during training hours.
4. Trainees are to ask questions, talk and share only when they have been acknowledged by the trainer.
5. Trainees shall not discuss or disclose the processes of the training with people who have not done the training.
6. Smoking, eating and drinking beverages is allowed outside the training room only.
7. Trainees shall not use consciousness altering agents during the training. Although coffee, tea, cocoa and cola are allowed, the following are typical of agents that are not allowed: alcohol, pain killers, uppers, downers marijuana, cocaine sleeping pills, LSD, etc This rule applies in and outside of the training until the completion on Sunday night.
8. Trainees are to remain in the training room except for breaks.
9. Trainees are to wear their nametags in a visible location during training hours.
10. Note taking and recording devices are not allowed in the training.
11. Trainees are not to sit next to someone they knew prior to the training.
12. Trainees are to follow the directions of the trainer.

People who have a medical excuse for exempting themselves from any of these ground rules may do so.

The first evening then proceeds and is divided between the trainer discussing the most important concepts that underlie the training, and the participants experiencing several processes or exercises. The processes are designed to familiarize the trainees with the structure of the training and to asssit them in clarifying their objectives in taking the Basic.

Each major segment of the training has three parts: (1) a didactic part where the trainer discusses and gives instructions for the process which follows; (2) an experimental part where the trainees participate in an individual, one-on-one, or group process; and (3) sharing, where the participants relate their experience of the process to another trainee or to the whole group if they wish.

This structure is repeated throughout the rest of the training. Thursday evening is primarily spent examining how we experience what happens to us. We look at the extent of our responsibility for what happens to us and that portion that is controlled by other people and outside forces. On Friday night the training explores the making, keeping, and breaking of agreements. We also look behind the images we present to the world and the games we play in our lives. On Satur-

day, we examine our willingness to take risks, such as reaching out to others with no expectations, and our willingness to enjoy life and explore all sides of our personalities.

During the final day of the training, we focus on what we really want to have, to do, and to be in our lives. We also look at the attitudes that unconsciously control the quality of our relationships. Most graduates report experiencing an overwhelming sense of self-acceptance, appreciation and personal power by the end of the training on Sunday.

HOW DOES THE BASIC TRAINING ACTUALLY WORK?

The training process assists us in becoming aware of and confronting many of the debilitating beliefs and fixed attitudes about ourselves and others that all of us accumulate and unconsciously cling to. Although unaware of most of these personal beliefs, most of us are literally controlled by them. They filter all our perception, allowing us to experience only what we believe we will experience. The experience of the training demonstrates that if we are not experiencing total satisfaction in certain areas of our lives it is because we have unconsciously assumed we can't or won't. The feelings of lightness, power and ease that graduates describe after the training are simply a result of their getting in touch with the limiting assumptions that block them.

WHAT IS THE TRAINEE'S RESPONSIBILITY IN THE BASIC TRAINING?

There are no prerequisites to taking the Lifespring Basic Training. Trainees are asked only to participate actively. The Lifespring point of view is that the greatest value in life comes from a willingness to participate fully in it. Similarly, through their participation, trainees create for themselves the value they receive from the training.

About one quarter of the training time consists of the trainer lecturing about or discussing the concepts behind the training. During more than half of the program the participants are engaged in various processes. Some of the processes are individual mediations or guided fantasies. Others are small group discussions, games, or role playing exercises. Most of the processes involve two trainees working together to explore a particular issue. The remaining 25 percent of the training consists of trainees sharing their experience with their partner, with other trainees or with the trainer.

MUST THE TRAINEE REVEAL PRIVATE ASPECTS OF THEIR LIVES?

Trainees are not required or pressured to divulge anything about themselves that they do not wish to share. It is an agreed upon training requirement that everything that is shared is held in the strictest confidence by the other participants, the trainer, and the staff.

WHERE DOES THE LIFESPRING BASIC TRAINING COME FROM?

The Lifespring Basic Training does not derive from one particular theory or philosophy. Instead, its roots are less formal and more practical. They reflect a positive view of people and their capacity to grow. It draws from a variety of theoretical perspectives that have proven effective. It is also a living training that continues to evolve and improve as more is learned about human behavior.

The Lifespring perspective is consistent with the work of a number of modern educators and psychologists including Abraham Maslow, Fritz Perls, Gordon Allport, and Carl Rogers. These theorists believe that each of us has an infinite capacity to experience more joy, fulfillment and generally have life work better.

The Lifespring Basic Training is the practical application of this point of view. It views living as a here and now experience. It views people as having unlimited potential and knowledge within them, and it holds the view that becoming aware of this internal store of resources does not have to be a long or difficult procedure.

HOW DO I KNOW THE TRAINING IS FOR ME?

People take the Basic Training for a variety of reasons. Some want to change something about themselves; some feel great about themselves and are there to expand their self awareness; others come out of curiosity; many come simply because a friend or relative asked them to take the training; a few take the train-

ing to prove it will not work for them, and some have no idea what motivated them to take the training. There is no "right" reason for taking the training. As long as one is willing to participate in the training, its value will be experienced.

While the training is supportive and safe, it is not recommended for those with a history of emotional disorder or those currently experiencing severe emotional difficulties. Lifespring is not therapy, and should not be artificially injected into an established therapeutic relationship. Those who have been in therapy within the last six months must obtain their therapist's signed agreement to take the training.

HOW DO I KNOW THE TRAINING WORKS?

Probably the most convincing evidence to a potential trainee that the training works comes from friends and loved ones who have taken it and received value from it. In fact, it is primarily this word-of-mouth communication that has led to the growth of Lifespring. It is only because the training works that Lifespring has prospered.

WHAT GUARANTEE DO I HAVE THAT I WILL BENEFIT?

Because the training has been so successful in the past, Lifespring guarantees the Basic Training. Anyone who completes the training and does not receive the value that he or she wanted can request and receive a refund of the full tuition. Only about three percent of the Lifespring graduates request refunds, while 97 percent are more than satisfied with the results.

HAVE ANY FORMAL STUDIES INDICATED THAT THE TRAINING REALLY WORKS?

In late 1977 Lifespring began a major study to measure the short term and long term effects of the Basic Training. The testing program is utilizing the Personal Orientation Inventory (POI) developed by Dr. Everett Shostrom. The POI is well respected by the research community as an instrument to measure the level of an individual's intrapersonal actualizing behavior. The POI measures such concepts as level of self-worth, self-reliance, independence, flexibility, and sensitivity to the needs of others. These are all aspects of actualizing that the Basic Training is designed to develop.

Over the last 14 years the POI has been used extensively in published studies of programs intended to increase the participant's level of self-actualizing behavior. The programs that have been studied include: public school and college human relations courses, psychology courses, communications workshops, meditation trainings, encounter groups, personal development trainings, as well as individual and group therapy. To date Lifespring has tested 1827 trainees both before and ten days after the training. These people are tested again six months after the Basic Training. This is reportedly the largest study of its kind ever undertaken.

The results so far from the testing program are very impressive. The POI shows significance beyond the 1% level of confidence for all 12 scales measure by the POI. This means that the results obtained would have happened by chance only one time in a hundred.

These overall results suggest that the Lifespring training produces changes which in all groups is at least as great as and usually greater than that shown by any other method for which POI test scores are available.

Dr. Shostrom reports, "The results from the six month follow up testing are even more significant. These results indicate that the effects of the training are enduring. For each of the 12 POI scales the six month results are at least as high as and in most cases higher than those measured 10 days after the Basic Training.

On the basis of the data so far collected in the study, the results suggest that Lifespring is making a significant contribution to the mental health of a large segment of our population.

Lifespring's efforts to assess the quality of its trainings are indicative of Lifespring's commitment to public accountability for its trainings and to improving the trainings based on results of their effectiveness.

WHAT DO GRADUATES SAY ABOUT THE TRAINING?

Often trainees are totally surprised at what they discover about themselves. One graduate, a licensed psychologist, said: "I discovered that I had much more to learn about myself than I had thought. The Lifespring Basic Training provided me with a refreshing environment in which to expand my personal awareness and to plumb my innermost parts."

Often the impact of the training is experience as feelings of renewal, lightness and ease about life. Graduates generally are more accepting of themselves. They feel secure in knowing that they have the power to take charge of their lives. There is greater clarity about what they want to be and do, and there is a general sense that life takes less effort than before. A prominent West Coast businessman put it this way: "For the first time I could see exactly what I needed to make me happy. And, I discovered it had nothing to do with what I'd always thought was important or necessary in my life. In fact, when it hit me, and I saw how damn simple it was, I didn't know whether to laugh or cry."

Most people report an increased sense of fulfillment. They say there is more zest in their lives, that they have more energy, and that their careers suddenly work better. One attorney said: "Each day my life takes on new dimensions. My effectiveness in my law practice has greatly improved."

Another common reaction from graduates is that their self-confidence expands, there is a heightened feeling of self worth and a greater ability to develop warmer and more rewarding relationships. "By becoming more honest with myself," said one graduate, "I was able to be more honest with others. As a result, all my relationships have improved tremendously."

I'M CONSIDERING TAKING THE TRAINING, BUT I'M APPREHENSIVE. IS THIS A COMMON FEELING?

Yes, Because the Lifespring training is unlike the standard, lecture-oriented seminar or classroom eductaion we are used to, most of us are apprehensive at first. We have no frame of reference with which to compare the training, and little idea of what the training will really be like. These feelings of uncertainty, skepticism and apprehension are a natural part of the training itself. If you have any questions or concerns about the training please call or write the Lifespring center in your area.

IS ACADEMIC CREDIT AVAILABLE FOR PARTICIPATING IN THE LIFESPRING TRAINING?

Lifespring and California State University—Fullerton, through its extension division have made arrangements to award graduate and senior-level undergraduate credits in Education for participation in any of Lifespring's training programs. The course requirements are to complete the training and to write a two-page evaluation of the experience. The fee for each unit of credit is $15. These credits may be transferred to your university as an elective. For further information contact your nearest Lifespring Training Center.

Basic training—3 units.

Interpersonal experience—4 units.

Training coordinator program—5 units.

To find out if these credits may be transferred to your school, we suggest you contact your Registrar's office directly.

Lifespring is currently working to institute college credit programs with state universities in each area in which we have a training center.

IS THERE TRAINING BEYOND THE BASIC LIFESPRING TRAINING?

Lifespring's Basic Training provides the tools to build a strong foundation for personal growth. For those who are deeply committed to continued growth and wish to build upon this, delving further into their own potential. Lifespring offers an intensive five-day seminar called the Interpersonal Experience (IPE). The methods used are similar to those of the Basic Training except they are in greater depth and more personalized.

The IPE classes are limited in size and are conducted on five consecutive days, Wednesday through Sunday. Tuition is $650. Participation in the IPE requires completition of the Lifespring Basic Training.

For IPE graduates, Lifespring offers an advanced leadership training called the Training Coordinator Program (TC). TC is a results oriented, 70-day experi-

ence that consists of three weekend trainings, once-weekly early morning meetings, and a service commitment to Lifespring. During this training, the Lifespring staff assists the participants in creating and manifesting the results they desire in their lives. There is no tuition charge for the TC program.

Finally, Lifespring also offers a four-day Family Training for parents who have graduated from the Basic Training and their children, ages 6 to 17. Tuition for each child is $175. There is no charge for their graduate parents.

WHAT PLACE IS THERE IN MY LIFE FOR LIFESPRING AFTER I COMPLETE THE TRAINING?

Lifespring offers a substantial support system to graduates. About half of the graduates continue on to the IPE training and many complete the TC program.

In addition, there is an excellent workshop program available. These are usually free-of-charge. For example, Lifespring offers workshops on prosperity and abundance, relationships, sexuality, weight control, nutrition and health, creativity, turning on personal power, communications, and other topics of interest to the graduates.

Also, many graduates have found it valuable to re-take the Basic Training periodically. Graduates may do this as many times as they desire for free. The Basic Training can always provide a safe environment for examining where our lives are at that moment.

Finally, Lifespring sponsors social events for its graduates.

HOW ARE LIFESPRING TRAINERS SELECTED AND TRAINED?

Lifespring chooses as trainer candidates mature individuals who are personally warm, spontaneous, charismatic, emphathetic and support other's growth without imposing their own judgements. It is important that potential trainers also be emotionally healthy and have their own personal life in order. Lifespring believes in diversity. Consequently the backgrounds of its trainers include, for example, former policemen, farmers, artists, engineers, businessmen and women, teachers, entertainers, psychologists and college professors.

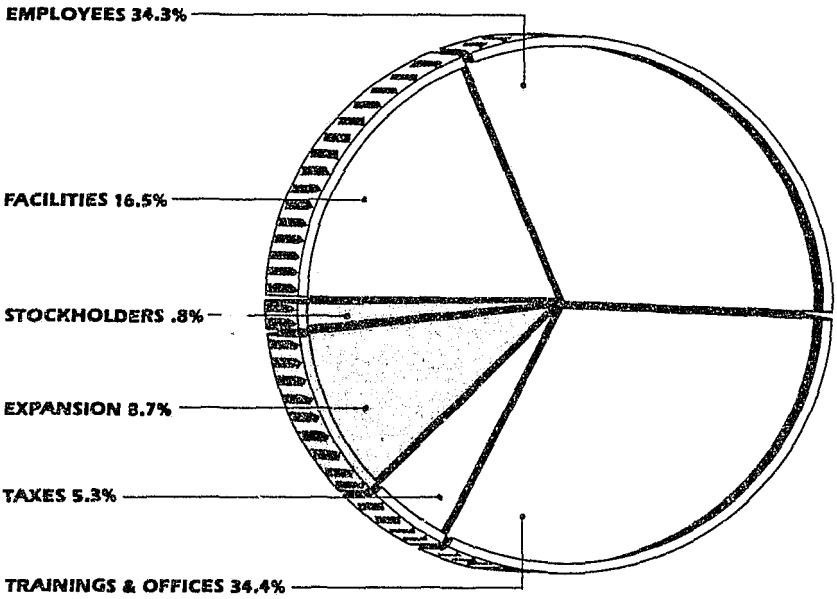
Lifespring's program for preparing trainers is rigorous and demanding. It includes: 1. extensive work in the candidate's own personal development; 2. practice in simulated training situations; 3. workshops with outside experts in education, psychology and other areas related to the training and; 4. months of work with senior trainers progressively assuming more responsibility for the training itself. The training of a Basic Trainer continues throughout his or her career with Lifespring. There are weekly trainer meetings, regular intensive seminars that focus on developing specific training skills and workshops designed to assist trainers in their own personal growth.

WHERE DOES THE MONEY GO THAT LIFESPRING EARNS?

Most of the tuition that trainees pay goes to cover the direct expenses incurred with putting on the trainings. In fact, in 1977, 88.3 percent of Lifespring's gross earnings was spent on the trainings themselves.

Now that it is clear Lifespring will become financially successful, the corporation has established three major goals to which it is concentrating its profits. One goal is the expansion of Lifespring into new cities. In 1977 Lifespring established six new training centers and three additional centers were established the first six months of 1978. The second goal is for Lifespring to become an established contributing member of the communities in which it has centers. For example, as Lifespring generates sufficient working capital it has begun a program to purchase or lease permanent training and office facilities in each of its cities. A third major corporate goal is the support of a revitalized Lifespring Foundation, a non-profit agency that will be making a significant impact on education and poverty in the United States and Canada in the years ahead.

The pie-shaped chart below displays how Lifespring's gross revenue was distributed in 1977.



[From the Lifespring Family News]

THE LIFESPRING TRAINING: IS IT EDUCATION OR IS IT THERAPY?

(By John P. Hanley, President)

It is fascinating to me that so many people seem to assume that if a training experience is concerned with enhancing emotional awareness or growth then the experience must necessarily be therapy. An analogy I think is appropriate here is that Lifespring is to emotional well-being as physical education is to physical health. When one's body falls below a certain level of efficiency it is appropriate to consult a physician for assistance in getting the body functioning adequately again. In such circumstances active physical exercise may be harmful to the body's well-being. Once the body is functioning normally, however, one no longer needs a physician and, in certain cases continuing medical attention could inhibit further physical development. Rather, to expand the body's physical capabilities beyond "normal" health, the appropriate activity is disciplined physical exercise. Healhy individuals wanting to expand their physical well-being may decide to consult a physical education specialist, practice yoga, or join an exercise class.

The same holds true for the emotional or personal awareness side. When someone—gets into emotional difficulty, is in serious distress, or is unable to cope effectively in society, it is appropriate to ocnsult a licensed therapist who is trained to deal with emotional illness. Yet, for an emotionally stable person who wishes to expand or deepen his/her experience of life, therapy is not necessarily an appropriate activity. In fact, therapy could prove counter productive in these situations. Such an individual may want—to read about higher human consciousness, become active in a church, travel, join a consciousness raising discussion group, start acting, or take human potential workshops such as Lifespring.

Given the controversy concerning whether the human potential movement is therapy or not, it is important to keep in mind that the facilitation of increased self worth, self integration, self awareness, emotional growth and improved relationships has traditionally, in Western culture, been the responsibility of education, not medicine. Education's central role in developing "the whole man" has been a cornerstone of virtually every major philosophical tradition. In the last half century all of the major educational movements in this country have re-

affirmed the importance of the schools' role in assisting the students' emotional and social development. Furthermore, almost every local community's stated goals for their schools include personal, social, and emotional objectives as well as intellectual and vocational ones.

What is new today is that safe, effective and reliable educational techniques, such as those used in the Lifespring trainings, have been developed so that the emotional and social goals of education can be realized rather than merely voiced.

I acknowledge that many of the Lifespring processes are also used in therapeutic situations. One of the major strengths of the Lifespring training is that it intentionally utilizes the most effective experiential processes available. However, this fact has nothing to do with determining whether Lifespring is practicing therapy rather than, say, education or adult entertainment. For example, suppose I am giving someone a mixture of water, glucose and electrolytes. With only this information it would be impossible to determine whether I am a physician treating someone for shock, a coach giving one of my athletes Gatorade, or a soft drink salesman serving a customer.

Similarly, suppose I am leading a group of people through a fantasy process. I could be a therapist doing group therapy, a professor teaching a course in school curriculum theory, a theater company director preparing his cast for the next production, someone entertaining friends at a party, or a Lifespring trainer conducting a training. In other words, merely knowing the content of an interaction between me and a group of people tells us nothing about the nature or context of the interaction.

Techniques like those employed in the Lifespring training such as meditation, fantasy, group sharing, cathartic exercises, games and peer feedback are increasingly being used in a wide range of settings including public school classrooms, college courses, club groups, churches, growth centers, educational TV and child rearing. In the last few years dozens of books have been written for the general public describing processes and techniques similar to those used by Lifespring for use in classrooms, clubs and other educational and informal settings.

The fact that the origin or content of a particular technique or approach has nothing to do with the essential character of the trainer-trainee relationship is generally recognized today among scholars and practitioners. For example, in recent years several of the most influential leaders of the psychoanalytic community have made major contributions to education by demonstrating how their theories and techniques could be used effectively in the schools (for example, see Freedom to Learn by Carl Rogers; Schools Without Failure by William Glasser; and Some Educational Implications of the Humanistic Psychologies by Abraham Maslow).

One of the most telling differences between therapy and Lifespring is the position each takes toward its participants and their development. The domain of therapy is the provision of relief for the troubled mind, the person who is experiencing chronic and debilitating distress. The "legitimate" clients of therapy are individuals whose condition is classifiable in terms of the Diagnostic and Statistical Manual of Medical Disorders.

Clearly not every human problem, every human desire to improve one's emotional or spiritual well-being implies a mental disorder. In fact, efforts to expand the medical (illness) orientation of therapy to the normal or growth oriented participants of Lifespring and other human potential trainings is potentially very regressive. A number of serious books have been written recently on exactly the issue of the dangers implicit in the expansion of the therapy mentality to the general population (see, for example, The Death of Psychiatry by E. Fuller Torrey, M.D.).

If Lifespring were implying that it is providing treatment, or engaging in diagnosis, or promising cures, then we would indeed be practicing therapy. But we are not making such claims. In fact, we very conscientiously inform people that Lifespring is not therapy. It is a training experience designed for individuals whose lives are working just fine. Nobody needs the Lifespring training, and if someone has a history of emotional difficulty or is currently in therapy, we do not recommend taking the training. Although I do not find it particularly helpful to classify Lifespring as anything, it is clear to me that Lifespring is far more accurately classified as informal adult education than as therapy.

[From the Lifespring Family News]

POINT OF VIEW

(By Dr. John N. Williamson)

Before joining Lifespring nearly a year ago I was the Director of Planning and Policy Development for the National Institute of Education (NIE), the federal agency charged with improving the quality of education through research and development.

For more than two decades the federal government has supported major efforts to reform the public schools. Most of these efforts have fared very poorly. In fact, virtually every serious study of school effectiveness in the past fifteen years indicates that, despite massive government sponsored reforms, school achievement is not generally improving and may be declining. For example, College Board scores declined rather dramatically between 1963 and 1975. Also it appears as if a sizable percentage of students graduate from high school without sufficient reading, writing, and computational skills to handle the everyday requirements of adult life. These are disturbing findings. When I left, the federal government was totally confused about what to do. This confusion also permeates the state and local levels of education as well as the general public.

The problem is that in formulaing our solution we are trapped by our common sense point of view of where to look for relief in this intolerable situation. Our common sense tells us that the answer must be out there. It must depend on such factors as the school's resources; the educational level of the teachers; the school curriculum; or the social, racial, and economic characteristics of the student body. In other words, the answer must depend upon the things schools can either have or do.

For example, my sense is that the "back to basics" backlash we are witnessing in the country today is the angry resolve of a public and a profession determined to do something. It is a response that is deeply imbedded in our makeup as a nation—when in trouble power through. Focus our efforts more narrowly on clearly specified objectives. Concentrate the resources and time directly on teaching the basic skills. See that the students are disciplined. Establish minimum standard requirements. Institute rigorous step-by-step instructional programs. Cut back on the non-skill oriented "frills." And develop a system to fix the blame for failure. For most people this response, possibly worded more palatably, seems perfectly reasonable. From the point of view that dominates educational policy making in Washington and is reinforced by the common sense of the general public there seems to be no other alternative. After all, what else can we do when we seem to have tried all the innovative ideas and nothing has worked?

Operating from this point of view that the trouble was that we had not yet found the combination of things the schools could have or do that would work, the search for these critical factors dominated the educational policy scene in the late sixties and early seventies. However, some of the research findings have cast serious doubt on this approach. For example, eminent sociologists like James Coleman and more recently Christopher Jencks concluded after exhaustive study that there was no identifiable combination of social or school factors that if changed would predictably lead to better and more equitable student achievement. This conclusion while bitterly protested has not been effectively rebutted, and it certainly reinforces the nation's disappointing experience in the school reform efforts the last two decades. If Coleman and Jencks are correct, our common sense point of view about where the answer lies for the schools is in serious trouble. It is becoming increasingly clear that the key to our dilemma is not outside in the things society and the schools can have or do differently. If this is indeed the case, then our entire frame of reference, the set of lenses we have been looking through, is challenged.

The notion that the answer may not be out there should come as no great surprise to those of us who have experienced the Lifespring trainings. We know from the trainings that our lives are not determined merely by our genetic inheritance and some independent objective environment that confronts us. There is a critical third variable, our volition or ability to choose. We literally create our experience of life based upon our beliefs about ourselves and how we expect the universe to react to us. Scientific exploration of the idea that our ordinary awareness of life is a personal construction and not a direct snapshot of external reality is probably the most active research trend today in the

psychology and the physiology of consciousness. Our perception of the world is filtered. We select only a small percentage of the input that the universe offers. We interpret this filtered input through categories, or a belief system. What we experience are the categories rather than an objective reality. In other words, we experience what we believe we will experience.

If we believe that the world is out to get us we will experience life as a victim. If we believe we are worthy of love, we will experience loving relationships. If we believe we are powerful we will do what it takes to create results in our lives. If we believe we cannot produce those results we will do whatever it takes to confirm that belief and fail. The resources our schools may or may not have or the things they may or may not do are not what determines whether they work or not. It all has to do with our underlying beliefs and expectations. The key is inside; in the unconscious belief systems of our students, their teachers, their families, and their communities. If teachers unconsciously believe their students will not learn or their schools will not succeed nothing they do will work. All their efforts to the contrary will be shallow gestures. If a student believes he or she cannot learn or will not succeed, none of our doingness will overcome the resistance. The fallacy of the back to basics movement and the vast majority of educational reform efforts in this country has been the failure of our common sense point of view to recognize that: the critical variables in learning are the limiting personal beliefs of our students; the critical variable in teaching is the consciousness of our educators; and the critical variable in our education system is the intention of our communities.

The message of the trainings is that our schools are working exactly as well as we believe they will. True educational reform just like true personal growth involves a transformation of consciousness, an expansion of our point of view about what is really going on in our personal lives and our social institutions. This transformation is one that allows us to see that each of us is 100 percent responsible for our lives. Life is working out exactly the way we believe it will. And that the only thing standing in our way are these self imposed beliefs. We know from our personal experience that, when this transformation takes place, it is freeing. Life just seems to work out better and with more ease. The things we need to have come. And the things we need to do get done. They are the result not the cause of our well-being. Our schools and communities can also experience this transformation of point of view. It will be a major goal of the Lifespring Foundation to bring this message to education.

[From the Lifespring Family News]

THE PERSONAL ORIENTATION INVENTORY

(By Everett L. Shostrom, Ph. D.)

Last October Lifespring began a major study to measure the short term and long term effects of the Basic Training. The testing program is utilizing the Personal Orientation Inventory (POI) which I developed in 1963. The POI is well respected by the research community as a test to measure the level of an individual's intrapersonal actualizing behavior. The POI measures such concepts as level of self-worth, self-reliance, independence, flexibility, and sensitivity to the needs of others. These are all aspects of actualizing that the Basic Training is designed to develop.

Over the last 14 years the POI has been used extensively in published studies of programs intended to increase the participant's level of self-actualizing behavior. The programs that have been studied include: public school and college human relations courses, psychology courses, communications workshops, meditation trainings, encounter groups, personal development trainings, as well as individual and group therapy. To date Lifespring has tested 962 trainees both before and ten days after the training. These people will be tested again six months after the Basic Training. To my knowledge this is the largest study of its kind ever undertaken.

The results so far from the testing program are very impressive. The POI shows significance beyond the 1% level of confidence for all 12 scales measured by the POI (see Figure 1). This means that the results obtained would have happened by chance only one time in a hundred.

These overall results suggest that the Lifespring training produces changes

which in all groups is at least as great as and usually greater than that shown by any other method for which POI test scores are available.

Furthermore, based on the findings of two previous studies reported by Foulds (1971) and Percival (1977) it can be anticipated that the analysis of the 6 month follow up results yet to come will show even more dramatic changes.

To conclude, on the basis of the data so far collected in the study, the results suggest that Lifespring is making a significant contribution to the mental health of a large segment of our population. And if the six months' study holds up, we may conclude that there is also a rather permanent change and not just a transitory one.

I am pleased with Lifespring's efforts to assess the quality of its trainings. It is indicative of Lifespring's commitment to public accountability for its trainings and to improving the trainings based on results of their effectiveness.

[From the Lifespring Family News]

THE LOVE ATTRACTION INVENTORY

(By Everett L. Shostrom, Ph. D.)

Last month I reported on the results to date of Lifespring's efforts to measure the short term and long term effects of the Basic Training. In this report I will discuss the results of a similar evaluation of the Interpersonal Experience (IPE) training. The IPE testing program is utilizing the Love Attraction Inventory (LAI) which I developed to measure the essential elements of love or caring in human relationships. Feeling and attitudes of one member of a partnership toward the other are measured in terms of the following six scales: 1) Agape or the capacity to feel a sense of unconditional love toward one's partner. This is a charitable, altruistic form of love in which one feels deeply for the other individual as another unique human being; 2) Friendship, which is a helping, nurturing form of love. Friendship is a love of equals based on an appreciation of the other person's worth; 3) Eros, a romantic, or erotic, sexual form of love; 4) Empathy or love reflecting the capacity of a person to feel for another; 5) Self-Love, the ability to accept one's own full range of positive and negative feelings toward one's partner; and 6) Deficiency-Being Love, or love for another's beingness as a person rather than for what they can do for one. It is an admiring, respectful love, an end in itself.

Thus far Lifespring has tested 453 IPE trainees both before and ten days after the Training. The LAI will be administered to them again six months after the IPE to measure its long term effectiveness. As with the POI results for the Basic Training, the IPE evaluation results so far are very impressive. The LAI shows significance in a positive direction beyond the 1% level of confidence for 5 of the 6 scales measured by the test (see figure). This means that the growth measured on these scales would have happened by chance only one time in a hundred. Consequently, one can conclude that the IPE training was responsible in the growth that occurred between the pre and post tests.

I would like to comment briefly on the EROS scale of the LAI, the one scale for which positively significant results were not obtained. The LAI has roots in both Abraham Maslow's work and C. S. Lewis' work on self-actualizing individuals. It was originally constructed about 10 years ago. As I look at the test items it seems to me that the actualizing person as defined by Maslow at that time seemed to have certain qualities of possessiveness, inquisitiveness, and jealously which do not seem to be as much in fashion in today's culture. The test results do not imply that the LIFESPRING sample is not sensual or tender in their primary relationships but rather that they do not follow the degree of possessiveness, inquisitiveness, and jealously that Maslow's group did 10 years ago. Perhaps in the future we will have to revise the items on the LAI to reflect this cultural shift.

The Interpersonal Experience is a training that impacts virtually all areas of a person's life. The LAI measures the trainings' impact on certain elements that affect an individual's ability to experience a strong primary relationship. From the results that have been obtained so far, it would appear that graduates of the IPE have an increased capacity to form and maintain loving and caring primary relationships. It is difficult to imagine a more significant contribution that a training could make to the welfare of the families and communities of our nation in an era that is often characterized by loneliness and alienation.

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[From the Lifespring Family News]

GROWTH PROCESS INVENTORY

(By Everett L. Shostrom, Ph. D.)

Lifespring is entering the eleventh month of the largest evaluation study ever undertaken in the human potential movement.

I've reported in the two previous issues of The Family News the results of the Personal Orientation Inventory (POI) test of the Basic Training and the Love Attraction Inventory (LAI) test of the Interpersonal Experience. Now I would like to report on the results of the Training Coordination Program, the third and most advanced training in the Lifespring program.

The Training Coordinator (TC) Program is an advanced leadership training open to graduates of the IPE. Its purpose is to translate into greater day to day results the growth experienced in the Basic and IPE.

The TC Program is utilizing the Growth Process Inventory (GPI) which Jane Leonard and I have developed as its evaluation instrument. The GPI is designed to measure growth along five basic polarities. The polarities are each measured in dimensions of "manipulating" and "actualizing." Every one of us has some aspects of each polarity; we are all a unique combination of actualizing and manipulating qualities.

The first polarity measured is Anger. On the manipulating end of the scale, one would blame and attack others, and feel burdened. On the actualizing end of the polarity, one would handle one's anger by being assertive, and treating others and oneself with dignity and respect.

The next category is Love. On the manipulating end of this polarity, one would be pleasing, placating, and feel dependent. On the actualizing end of the scale, one would express one's love by being genuinely caring and by balancing both giving and receiving.

The third category measured is Strength. Manipulating strength is demonstrated by striving and achieving, defensiveness, and rigidity. Actualizing strength would be expressed with openness and vulnerability by one who has an authentic sense of personal power, self-worth, and competence.

The fourth category is Weakness. One who expresses weakness through manipulation would withdraw and play helpless, and generally avoid others. A more actualizing person would express weakness by accepting and allowing for his or her vulnerability, trusting in a deeper and more profound power which is part of his or her inner being.

The fifth polarity measured is Control. One who controls manipulatively would use and dominate others. On the other end, a more actualized person would deal with control by cooperating with others. This form of cooperation is based on trust in others and oneself.

When one has learned to accept and express one's different polarities, a new sense of self and life emerges. This is the sixth category, called Core. The Core reflects our inner being, or our "diamond," where harmony and meaning permeate.

To date Lifespring has tested a total of 291 participants in the Training Coordinator program. The GPI was given during the first weekend training and again the third weekend two months later. It also will be administered six months after the completion of the TC Program. The results of the TC Program as measured by the Growth Process Inventory are very impressive. These results are displayed in the graph. The growth experienced by the TC participants is statistically significant in all six categories of the GPI. In the Control category there are less than 5 chances in 100 that the growth experienced was due to something other than the TC Program. For the remainder of the categories there is less than 1 chance in 100 that the growth did not result from the training.

Based on the results of the GPI, it would appear that graduates of the Training Coordinator program have a greater ability to handle anger constructively, to love more unconditionally, to express strength and vulnerability with openness, to accept and surrender to one's weaknesses, and to interact more cooperatively with a secure sense of trust in oneself and others. These results indicate that Lifespring's Training Coordinator Program is a powerful and effective capstone to the Basic and IPE trainings. These three trainings, the Basic, the IPE, and the TC Program are clearly making a valuable contribution to the lives of thousands of people in this country and Canada.

LIFESPRING FOUNDATION PRISON TRAININGS

SEPTEMBER 16–20, 1974

OREGON STATE PENITENTIARY.—Activitites Room.
Trainers: W. R. Revell, James Moore.
38 Maximum Security inmates.
Rex Newton, Prison psychiatrist.
John Noland, Director of Recreation.

DECEMBER 13–17, 1974

OREGON STATE PENITENTIARY.—Activities Room.
Trainers: Charlene Afremow, James Moore.
25 Maximum Security inmates.
1 woman staff member—Director of Activities.
1 workshop followed the training.

APRIL 10–14, 1975

OREGON WOMEN'S CORRECTION CENTER, Salem.—Activities Room.
Trainers: Charlene Afremow, Dennis Becker.
30 women inmates.
2 women staff members.
2 workshops followed the training.

DECEMBER 27–30, 1976

OREGON STATE PENITENTIARY, Salem.—Activities Room.
Trainers: Lee Green, Gail Griggs.
23 inmates.
John Noland, Director of Recreation/Therapy.
2 workshops followed one year later—Relationships/Communication.

JUNE 13–16, 1977

OREGON WOMEN'S CORRECTION CENTER, Salem.—Activities Room.
Trainers: Lee Green, Katherine Campbell.
27 women inmates.
2 workshops followed the training.
15 minute documentary film of the training was produced, which is in the possession of the Correction Center.
2 staff members were present.
Lifespring made scholarships to the general public Basic Training available for the wives and girlfriends of the maximum security inmates. There were several who took the Training.

COMMENTS ON LIFESPRING FOUNDATION TRAINING AT THE OREGON STATE PENITENTIARY

John Noland, recreational therapist: "I have seen many positive results of the Lifespring seminar that was held at OSP. The inmates who finshed the course were all enthused, and seem to be able to assess their situations, and take an honest look at themselves. They seem to be making more constructive use of their time. They have gotten involved in educational and vocational programs. I personally feel that it has helped me in understanding both myself and other people better. I accept responsibility and am able to perform my duties better."

Indian Club Staff Adviser: "Members of the Club were excited at doors, and new trains of thought that were being opened and explored. Not all members took advantage of the opportunity to take an honest look at themselves and their motivations. The ones that did were rewarded. A few have shown a remarkable change in their approach to problems, and environment. In others the change is not that apparent, but I believe all were affected to a degree, depending on what they were willing to give to receive. I believe the program is beneficial to anyone but particularly for people who are incarcerated and have a surplus of personality and living conflicts. I would like to see programs made available to the entire population at OSP."

James M. Simmons, inmate: "Just thought I would drop you a quick line in regards to some feedback from us. As to how we got off on the seminar. I would recommend it to anyone who is really sincere about getting in touch with him/her self. My awareness since attending Lifespring is very much noticeable. I've taken what I could use out of Lifespring and applied it to my everyday life. I hope this letter has been of some help to you as far as getting a program going in other prisons. 'Cause for sure there are a lot of people in prison who are very much looking for themselves. And Lifespring is a good tool to use. If it was only to reach one person. Then it would all be worthwhile. And I am sure it will reach far more than just one person. For I can see it working around me."

Ray Satan Smith, inmate: "When Lifespring was first mentioned to me by Sidney Stone, I couldn't help but feel this was an opportunity for a change, for Lord only knows I was in a rut. And through my experiences during the seminar, I was able to leave my doubts, guilt, indecisions, and other junk behind: I traveled from a plane of suspicion to that of well-being. The seminar was a very rewarding experience and I recommend Lifespring to all institutions, low-income communities, and social service organizations. And my recommendation would be the sooner Lifespring begins training with juvenile delinquent programs and prisons, the better."

"Personally, a lot has been happening with me since the seminar. I am more confident, understanding, fair and loving. I have seen tremendous changes in some of the participants I am closely associated with. Actually, it is kind of hard to believe, but seeing is believing. It's good to know I am among the lucky, for those who did not take Lifespring walk with cane and cup."

Randy Binning, inmate: "Participation in the Basic Lifespring seminar most assuredly brought about two major changes in me and my perception of my world.

"I am now aware that I am more than a completely separate entity forced to battle the rest of the world to satisfy my needs. I feel a part of a unified whole, with no more desire to harm any part of this than to cut off my own hand.

"Secondly, I realize that I'm not, nor ever have been, simply a leaf in the wind, victimized by childhood environment, malicious authority, etc. I have chosen, consciously or not, every step I have taken, and the consequences which naturally followed.

"This outlook is a radical change for me after spending seven and a half years in prisons for violent crimes by the age of 25."

COMMENTS ON LIFESPRING FOUNDATION TRAINING FROM THE WOMEN'S CORRECTION CENTER, SALEM, OREG.

Marsh Wardell: "I can handle people on a one to one basis. I've learned to control my hostility * * * I don't react hostile anymore. I don't shout obscenities. I found out that everybody's human. We all have feelings and that it's not wrong to hurt, to cry, or express your emotional feelings in whatever form is natural for you. Facing the fact that not everybody loves you doesn't mean that somebody doesn't * * *. It's easy to say it hurts, I love you, I care, and not feel guilty. I've learned that there are still people that are willing to share a piece of their world with another human being regardless of where they are or what they've done without asking why. And I feel I've made some super good friends because they are super good people."

Yolanda Marie Martin: "I can sit down and converse with another person and understand their side and then understand myself * * *"

Anonymous: "I have found that my hangups are my own, I don't want to blame others for my problems * * * I came to the training thinking I knew myself, now I see there ain't nothing gonna stop me from getting what I want outside. I know myself better now and like myself * * * I feel the training would really help families, help to cut the gap among family members. I feel this place would be so much more comfortable, especially if the staff would take (it). We'd all still do our same trips but they would be easier to cope with."

Cheryl Holley: "It's been a very, very rewarding experience—it's been a very touching experience, one I'll never forget and I'll always use these experiences in my life and I mean that with all my heart * * *. I found out that if I take the time to work things through in my head and take the time to listen to myself—I can do it! I feel that I can approach situations now—I was hiding behind a mask of confusion a lot. Now I don't have to. I didn't want

to deal with my court matters, I'd procrastinate and cry about the whole situation and say "Why Me?" Now I'm willing to deal with—Hey—I'm dealing with it and even feel good about doing it!'

COMMENTS ON LIFESPRING FOUNDATION TRAINING FROM THE CORPSMAN AT TIMBERLAKE JOB CORPS

Dave Carroll: "I feel like a new man. I feel like a million dollars—more than a million because I know that my life is worth more than any money I'll ever make."

Darrel Dibble: "Lifespring helped me in a lot of ways—I'd find myself running into situations up here and I'd think back on Lifespring and what they were telling me and I'd kind of shine things on—shine light on the hassles. Like, I have to talk to a staff person or something. One guy is really narrow minded—I don't like him, but I just do what he says. Normally, I'd start arguing with him or something. Now I have a choice—he wins and I win."

Johnny Griffin: "I enjoyed the thing * * *. Seemed like I really got along with everybody. It seemed like we didn't have arguments or talk loud mouth. Everybody respected each other and how everybody feels and that's all."

Marty Parsons: "I've made new friends. Before hardly anyone would talk to me. I can talk to people about anything now."

Andre Hicks: "From that day on * * * the night of Lifespring—I don't see no stop signs, all I see is green lights. And I'm not going to get a ticket because why should I get a ticket when I stay in the speed limit? Everyone else is going around the corner hitting poles and if I take the time to turn the corner right, I know what I'm getting into and I know what to get away from.

"Lifespring is like a lost and found thing. I mean I lost all my faith and when I hit Lifespring, I got it all back."

Doug Davies—Head Counselor: "I see more on purpose, clear and honest communication and better understanding between staff and corpsmen who have done the training. Corpsmen are being more open in expressing their feelings and even when negative, it is open and not expressed with animosity.

"Almost without exception, the corpsmen who started the training but who didn't finish are now inquiring as to when there will be another training so they can participate. Staff that have not gone through are asking questions and indicating an interest in becoming involved. Clearly, they see something has happened on the Center. They wonder, 'How come they are getting along?' "

Al Gonzales—Staff Aide: "Not only for the corpsmen, but for me, I find I have a different outlook on things. I find that I'm better able to stand my ground without backing off. I can commit myself more to what I say and to what I want to do. Lifespring helped some of the corpsmen too. There are those who have committed themselves more to the program, who realize what they want and who want to become more involved in the Center. Some of them have gone into becoming Corpsmen Leaders, Council Members, and are running for offices on the Center. The corpsmen are, in general, more considerate toward staff and one another."

COMMENTS FROM GRADUATES ABOUT THEIR RESULTS FROM THE LIFESPRING BASIC TRAINING 6 MONTHS AFTER PARTICIPATING

Shelly Staniforth, San Francisco Bay Area: "It has been of extreme value in my counseling efforts with junior high age children with discipline problems, and has helped me reach deeper to aid and correct some of the daily problems these students bring to me."

Darrell Leonhardt, Orange County: "My relationship with my wife has become closer and more open. My work is expanding into areas I was afraid to let it go before and my beliefs in religion have become much clearer and more real to me and my life."

Linda Kearney, Portland: "I have become extremely confident and acknowledge my own self-worth and ability. I have done a lot of writing (including a song) and know I am a good writer. I have taken risks in relationships by just being myself and have truly loved being me."

Cathy Gilbert, Orange County: "I teach remedial reading—the effort I got

from my students zoomed after I made each of them very important to me and tried to make them feel important to themselves."

Norman Crandall, Orange County: "The results were unbelievable to me and haven't stopped. Difficult goals have already been achieved with little effort."

Carole Leonhardt, Orange County: "My marriage has grown from near divorce to a beautiful relationship that continues to grow. I've been asked to be part of two corporations, and I made a decision to continue with law school which I nearly quit."

Bob Reilly, San Francisco Bay Area: "My production and satisfaction with my work has increased 100-fold over the last six months and I see no limit as to its growth. My relationship with all of my loved ones has intensified and we have grown closer and more loving."

Virginia Sipe, Portland: "Lifespring gave me an opportunity to turn my life around and do with it the things I have wanted but felt I could not have. I have had a good life and have been successful in obtaining the material things I wanted but I had lost the peace that I had felt as a child. My husband and I are experiencing great joy, great laughter, great serious talks, and a relatively easy time in solving problems that do arise."

Frank Forster, Portland: "Lifespring has been a very beneficial part of my life. I don't find it to be a cure-all, but it offers a lot of good tools and the means to use them."

Lifespring Questionnaire Preliminary Analysis

Lifespring is conducting a survey to determine the specific effects of the Lifespring Basic Training. These are the initial results based on the responses of 112 graduates.

MARITAL STATUS AT THE TIME YOU TOOK THE BASIC

A. Single and living with partner, 12/11%.
B. Single and not living with partner, 25/23%.
C. Married and living with partner, 51/45%.
D. Married and not living with partner, 8/7%.
1. Divorced, 11/10%.
2. Widowed, 5/4%.

HAD YOUR PARTNER TAKEN THE BASIC?

1. Yes, 45/47%.
2. No, 51/53%.

DID YOU TAKE THE BASIC WITH YOUR PARTNER?

A. Yes, 21/22%.
B. No, 75/78%.

OCCUPATION

1. *Business Professional*, 20/18.5%.
   1. Own own business, 5/4.5%.
   2. Company president, 2/2%.
   3. Supervisor, 4/4%.
   4. Business manager, 5/4.5%.
   5. Accountant, 3/3%.
   6. Consultant, 3/3%.
2. *Business Skilled*, 18/16.5%.
   1. Sales, 7/6%.
   2. Clerical, 5/4.5%.
   3. Loan Officer, 1/1%.
   4. Administrative assistant, 1/1%.
   5. Real Estate Broker, 4/4%.
3. *Service Professional*, 12/11%.
   1. Elementary, secondary teacher, 6/5.5%.
   2. Licensed therapist, 1/1%.
   3. Banker, 2/2%.
   4. Dentist, 1/1%.
   5. Registered Nurse, 1/1%.
   6. Social worker, 1/1%.

4. *Service Skilled*, 5/4.5%.
   1. Fireman, 1/1%.
   2. Hair stylist, 1/1%.
   3. Child care, 1/1%.
   4. Waiter/Waitress, 2/2%.
5. *Technical Professional*, 7/6.5%.
   1. Engineer, 7/6.5%.
6. *Technical Skilled*, 6/5.5%.
   1. Contractor, 3/3%.
   2. Truck driver, 1/1%.
   3. Mechanic, 1/1%.
   4. Carpenter, 1/1%.
7. *Communications*, 3/3%.
   1. Lawyer, 3/3%.
8. *Arts Professional*, 5/4.5%.
   1. Musician, 1/1%.
   2. Advertising designer, 2/2%.
   3. Painter/sculptor, 2/2%.
9. *Other*, 32/30%.
   1. Homemaker, 11/10%.
   2. Lab tech, 3/3%.
   3. Seaman, 1/1%.
   4. Unemployed, 3/3%.
   5. Student, 3/3%.
   6. Other, 10/9%.

ANNUAL SALARY

1. $5,000–10,000, 24/27%.
2. $11,000–15,000, 11/12%.
3. $16,000–20,000, 22/25%.
4. $21,000–30,000, 17/19%.
5. $31,000–50,000, 7/8%.
6. $51,000–75,000, 6/7%.
7. $76,000–100,000, 2/2%.

EDUCATIONAL LEVEL

1. High School, 13/12%.
2. Associate or trade school degree, 9/8.5%.
3. Some college but no degree, 35/33%.
4. Bachelor's degree, 27/25%.
5. Master's degree, 16/15%.
6. Doctorate, 5/4.5%.

AGE

1. 18–25, 16/15%.
2. 26–35, 42/39%.
3. 36–45, 30/28%.
4. 46–55, 16/15%.
5. 56–65, 4/3%.

SEX

Female, 60/54%.
Male, 52/46%.

1. How was your tuition paid for this Basic?
   A. I paid the full tuition myself, 93/84%.
   B. A friend or family member paid my tuition, 13/12%.
   C. I had a Lifespring scholarship, 3/3%.
   D. My employer paid my tuition, 0/0%.
   E. I paid part of the tuition and someone else paid the balance, 2/1%.
2. Experience with Lifespring trainings prior to this Basic.
   A. This was my first Basic, 92/82%.
   B. I was reauditing the Basic and had not taken IPE, 16/14%.
   C. I was an IPE graduate, 3/3%.
   D. I was a current or graduate TC, 1/1%.

3. Experience with non-Lifespring trainings prior to this Basic.
   A. This was my first experience with formal growth trainings, 80/71%.
   B. I had experienced only one or two other formal trainings, 28/25%.
   C. I had experienced three or more other formal trainings, 4/4%.
4. Experience with Lifespring trainings since completing this Basic.
   A. I have not participated in any Lifespring trainings, 41/38%.
   B. I have reaudited the Basic and have not taken the IPE, 7/6%.
   C. I have taken the IPE only, 15/14%.
   E. I have taken the IPE and reaudited the Basic, 5/5%.
5. Experience with non-Lifespring growth trainings since Basic.
   A. I have not participated in any non-Lifespring growth trainings, 89/80%.
   B. I have experienced one or two non-Lifespring trainings, 17/15%.
   C. I have experienced three or more non-Lifespring trainings, 5/5%.
6. To what extent have you participated in Lifespring workshops?
   A. Not at all, 22/20%.
   B. One or two events, 32/30%.
   C. Three or four events, 25/23%.
   D. More than four events, 29/27%.
7. To how many guest events have you taken guests since the Basic?
   A. None, 18/17%.
   B. One or two events, 33/31%.
   C. Three or four events, 21/19%.
   D. More than four events, 36/33%.
8. How many people have you been responsible for putting into a Basic?
   A. None, 32/29%.
   B. One or two, 41/37%.
   C. Three or four, 14/13%.
   D. More than four, 24/21%.
9. Have your family, friends, and co-workers generally supported your involvement with growth trainings?
   1. Yes, 91/83%.
   2. No, 19/17%.
10. What has happened to your primary relationship since taking the Basic?
    A. I did not have a primary relationship during the Basic and have not formed one, 13/12%.
    B. I did not have a primary relationship during the Basic and have formed one, 9/8%.
    C. I had a primary relationship during the Basic and have the same one, 68/61%.
    D. I had a primary relationship during the Basic and I no longer have it, 14/13%.
    E. I had a primary relationship during the Basic and have formed a new one, 7/6%.
11. Were you employed at the time of the Basic?
    A. Yes, 87/78%.
    B. No, 8/7%.
    C. I was a homemaker, 13/12%.
    D. I was a student, 3/3%.
12. What has happened to your work since the Basic?
    A. I am a homemaker, 15/14%.
    B. I am still employed with the same job, 61/55%.
    C. I have changed jobs, 27/24%.
    D. I am still unemployed, 3/3%.
    E. I was unemployed and have since gained employment, 5/4%.

    The following statements have these five choices for responses:
    A. Much more true of me since the Basic.
    B. Slightly more true of me since the Basic.
    C. Slightly less true of me since the Basic.
    D. Much less true of me since the Basic.
    E. There has been no change.
13. My relationship with my mother is full and real.
    A. 28/29%.
    B. 52/54%.
    C. 0/0%.
    D. 1/1%.
    E. 16/16%.

14. My relationship with my father is full and real.
    A. 30/34%.
    B. 43/48%.
    C. 2/2%.
    C. 2/2%.
    E. 12/14%.
15. My primary relationship is honest and intimate.
    A. 52/53%.
    B. 35/35%.
    C. 2/2%.
    D. 4/4%.
    E. 6/6%.
16. My relationship with my children is full and real.
    A. 34/41.5%.
    B. 34/41.5%.
    C. 0/0%.
    D. 0/0%.
    E. 14/17%.
17. My relationship with my boss is satisfying.
    A. 35/42%.
    B. 31/36%.
    C. 6/7%.
    D. 2/2%.
    E. 11/13%.
18. My relationship with my co-workers is satisfying.
    A. 45/45.5%.
    B. 44/44.5%.
    C. 3/3%.
    D. 0/0%.
    E. 7/7%.
19. My relationship with my friends is honest and real.
    A. 66/60%.
    B. 39/35%.
    C. 0/0%.
    D. 0/0%.
    E. 5/5%.
20. I have made new friends of significance.
    A. 66/59%.
    B. 30/27%.
    C. 0/0%.
    D. 2/2%.
    E. 13/12%.
21. I have achieved the results I strive for.
    A. 33/29%.
    B. 69/62%.
    C. 1/1%.
    D. 0/0%.
    E. 9/8%.
22. I have achieved bigger results in my life.
    A. 52/48%.
    B. 41/38%.
    C. 2/2%.
    D. 10/9%.
    E. 4/3%.
23. I am clear about my major goals in life.
    A. 47/44%.
    B. 43/40%.
    C. 5/5%.
    D. 2/2%.
    E. 10/9%.
24. I have begun or plan to begin to further my education.
    A. 33/30%.
    B. 40/37%.
    C. 2/2%.
    D. 1/1%.
    E. 33/30%.

25. I take risks.
    A. 63/57%.
    B. 42/38%.
    C. 0/0%.
    D. 0/0%.
    E. 6/5%.
26. I am productive in work/school.
    A. 46/43%.
    B. 50/46%.
    C. 4/4%.
    D. 0/0%.
    E. 8/7%.
27. I am being acknowledged by others for the results I produce.
    A. 38/36%.
    B. 49/46%.
    C. 3/3%.
    D. 0/0%.
    E. 17/15%.
28. I am physically healthy.
    A. 39/37.5%.
    B. 37/36.5%.
    C. 5/5%.
    D. 1/1%.
    E. 22/21%.
29. I recover from physical illnesses quickly.
    A. 42/40%.
    B. 33/32%.
    C. 4/4%.
    D. 0/0%.
    E. 25/24%.
30. I feel that I have control of my physical health.
    A. 55/49%.
    B. 38/34%.
    C. 0/0%.
    D. 0/0%.
    E. 19/17%.
31. I feel energetic.
    A. 52/47%.
    B. 45/40%.
    C. 1/1%.
    D. 0/0%.
    E. 13/12%.
32. I exercise regularly.
    A. 26/24%.
    B. 50/46%.
    C. 3/3%.
    D. 0/0%.
    E. 30/27%.
33. I do not have physical accidents.
    A. 26/25%.
    B. 34/33%.
    C. 6/6%.
    D. 0/0%.
    E. 37/36%.
34. I am able to reduce stress.
    A. 62/57%.
    B. 41/38%.
    C. 0/0%.
    D. 0/0%.
    E. 6/5%.
35. I weigh what I would like to weigh.
    A. 21/20%.
    B. 43/40%.
    C. 1/1%.
    D. 5/5%.
    E. 27/25%.

36. I do not rely on medication.
    A. 38/35.5%.
    B. 29/27%.
    C. 4/4%.
    D. 0/0%.
    E. 36/33.5%.
37. I feel that I look good.
    A. 55/50%.
    B. 41/38%.
    C. 5/5%.
    D. 2/2%.
    E. 6/5%.
38. My friends comment that I look physically fit.
    A. 36/37%.
    B. 43/44%.
    C. 4/4%.
    D. 0/0%.
    E. 14/15%.
39. My skin tone is clear.
    A. 28/26%.
    B. 48/45%.
    C. 2/2%.
    D. 1/1%.
    E. 28/26%.
40. My eating habits are good.
    A. 19/17%.
    B. 55/49%.
    C. 7/6%.
    D. 5/5%.
    E. 26/23%.
41. I express negative emotions constructively.
    A. 36/32%.
    B. 65/59%.
    C. 3/3%.
    D. 2/2%.
    E. 4/3%.
42. I express myself fully.
    A. 52/46%.
    B. 56/50%.
    C. 1/1%.
    D. 0/0%.
    E. 3/3%.
43. I am able to say no when I want to.
    A. 63/59%.
    B. 41/39%.
    C. 0/0%.
    D. 0/0%.
    E. 2/2%.
44. I am in touch with the spiritual side of myself.
    A. 51/51%.
    B. 31/31%.
    C. 3/3%.
    D. 0/0%.
    E. 15/15%.
45. I feel there is an underlying oneness in the universe.
    A. 60/60%.
    B. 24/24%.
    C. 2/2%.
    D. 0/0%.
    E. 14/14%.
46. I am accepting of possible mystical experiences in others.
    A. 74/73%.
    B. 18/17%.
    C. 0/0%.
    D. 2/2%.
    E. 8/8%.

47. I have had intensely joyful experiences.
    A. 66/63%.
    B. 32/31%.
    C. 2/2%.
    D. 0/0%.
    E. 4/4%.
48. I sometimes feel what might be called "grace" or "being blessed."
    A. 50/50%.
    B. 34/34%.
    C. 0/0%.
    D. 0/0%.
    E. 16/16%.
49. Life seems to require less effort.
    A. 58/56%.
    B. 42/40%.
    C. 1/1%.
    D. 1/1%.
    E. 2/2%.
50. My life is generally satisfying.
    A. 52/50%.
    B. 48/46%.
    C. 2/2%.
    D. 0/0%.
    E. 2/2%.
51. I feel that life is abundant.
    A. 53/52%.
    B. 44/43%.
    C. 0/0%.
    D. 0/0%.
    E. 5/5%.
52. My life is full of fascinating things to do.
    A. 51/57%.
    B. 30/30%.
    C. 1/1%.
    D. 0/0%.
    E. 7/8%.
53. It is easy to get completely absorbed in what I am doing.
    A. 44/46%.
    B. 43/44%.
    C. 4/4%.
    D. 0/0%.
    E. 6/6%.
54. I find beauty in my day to day life.
    A. 49/48%.
    B. 49/48%.
    C. 0/0%.
    D. 0/0%.
    E. 4/4%.
55. I am not afraid of dying.
    A. 37/38%.
    B. 32/33%.
    C. 2/2%.
    D. 0/0%.
    E. 26/27%.
56. I usually have peace of mind.
    A. 41/39%.
    B. 51/55%.
    C. 1/1%.
    D. 0/0%.
    E. 5/5%.
57. I feel accountable for what happens in my life.
    A. 85/83%.
    B. 15/15%.
    C. 0/0%.
    D. 0/0%.
    E. 3/2%.

58. I appreciate myself for who I am.
    A. 69/66%.
    B. 34/33%.
    C. 0/0.
    D. 0/0.
    E. 1/1%.
59. I feel confident in difficult situations.
    A. 55/49%.
    B. 53/47%.
    C. 1/1%.
    D. 0/0.
    E. 3/3%.
60. When I see something that should be done, I am quick to handle it.
    A. 39/37%.
    B. 53/50%.
    C. 4/4%.
    D. 0/0.
    E. 9/9%.
61. I accept negative feedback without being defensive.
    A. 40/38%.
    B. 57/55%.
    C. 3/3%.
    D. 0/0.
    E. 4/4%.
62. I am in touch with my own inner values and live by them.
    A. 45/45.5%.
    B. 49/49.5%.
    C. 0/0.
    D. 0/0.
    E. 5/5%.
63. I do not take things personally.
    A. 25/24%.
    B. 61/59%.
    C. 7/7%.
    D. 0/0.
    E. 10/10%.
64. I am open and honest most of the time.
    A. 51/49%.
    B. 51/49%.
    C. 0/0.
    D. 0/0.
    E. 2/2%.
65. I relax and have fun.
    A. 55/53%.
    B. 39/38%.
    C. 2/2%.
    D. 0/0.
    E. 7/7%.
66. I am accepting of others, including those I may not like.
    A. 53/51%.
    B. 45/43%.
    C. 0/0.
    D. 1/1%.
    E. 5/5%.
67. I am sensitive to others.
    A. 52/50%.
    B. 42/40%.
    C. 2/2%.
    D. 1/1%.
    E. 7/7%.
68. I am committed to myself.
    A. 62/58%.
    B. 41/49%.
    C. 0/0.
    D. 0/0.
    E. 3/3%.

69. I am creative and use it constructively.
    A. 39/38%.
    B. 52/51%.
    C. 2/2%.
    D. 0/0.
    E. 9/9%.
70. I follow through on plans even when others disagree.
    A. 29/33%.
    B. 47/54%.
    C. 2/2%.
    D. 0/0.
    E. 10/11%.
71. I only make agreements I intend to keep.
    A. 38/37%.
    B. 50/49%.
    C. 2/2%.
    D. 0/0.
    E. 12/12%.
72. I keep my agreements.
    A. 34/34%.
    B. 51/50%.
    C. 2/2%.
    D. 0/0%.
    E. 14/14%.
73. I actively assist others.
    A. 45/45%.
    B. 35/35%.
    C. 3/3%.
    D. 0/0.
    E. 17/17%.
74. I am involved in my community.
    A. 15/16%.
    B. 36/38%.
    C. 9/10%.
    D. 0/0.
    E. 34/36%.
75. I am involved in hobbies and other activities.
    A. 35/35%.
    B. 45/45%.
    C. 6/6%.
    D. 0/0.
    E. 15/15%.
76. I have been in service to something greater than myself.
    A. 43/42%.
    B. 30/29%.
    C. 5/5%.
    D. 0/0.
    E. 24/24%.

TOTAL RESPONSES FOR STATEMENTS 13–76

A—2913/43.5%.
B—2711/40.5%.
C—261/4%.
D—45/1%.
E—741/11%.

A Preliminary Report on the Lifespring 6-Month Follow-up Evaluation Project

(By Everett Shostrom, Ph. D., and Tanis Janes, Director of Research and Communication for the Foundation)

In the three previous issues of the Family News we reported on the pre- and post-test results of the evaluation inventories that have been administered to participants of the Basic Training, the Interpersonal Experience (IPE), and

the TC Program. We would like to report here on the POI Control Group experience and on the initial results of the 6-month follow-up project.

An important part of the Lifespring evaluation project is to compare the growth experience of Basic Training graduates with the experience of similar people who did not take the training (a control group). In order to insure that the control group was similar to those people who take the Basic, the Control Group consists of people who came to guest events and chose not to take the Training. Forty-six (46) people agreed to serve as a control group. The people who cooperated in this study took the Personal Orientation Inventory (POI) twice, approximately 14 days apart. The Control Group demonstrated no significant personal growth on any of the POI scales during the 14 days. This experience is contrasted with the significant 14 days growth reported in the June Family News by the Basic Training Graduates. This contrast is further evidence to support the conclusion that the Lifespring Basic Training is effective in assisting people experiencing personal growth.

For the past 3 months Lifespring has been involved in a follow-up program to measure the lasting effects of the training. To date approximately 175 graduates of the Basic Training have returned to take the POI at their 6-month Class Reunions. The effects of the Basic Training on personal growth have not only been maintained, but appear to have increased over the last 6 months. These results indicate that the beneficial effects of the Lifespring Basic Training on people's lives are not just temporary but, in fact, do endure. When the follow-up testing program for the POI is completed later this year we will report in more detail on these results.

In addition to the POI, Lifespring has developed its own questionnaire to determine how graduates have experienced their lives since taking the Basic Training. This questionnaire is also being given along with the POI at Class Reunions. The questionnaire explores the graduate's experience of life in a number of categories including: primary, family, work, and social relationships; results related to career and personal goals; physical health; self concept and expression; spirituality; quality of life; and service to the community. Graduates are also asked to describe the specific changes that have occurred in their lives in the six months since the Basic Training. In the next several issues we will be reporting on the results of the questionnaire survey and how the Basic Training seems to have impacted specific areas of graduates' lives.

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The *est* Standard Training[1]

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est, San Francisco, Calif.

Key Words. Context · Training · Self · Process · Transformation · Enlightenment · Epistemology · Satisfaction · Responsibility · Space for communication

Abstract. The format of the *est* standard training is described. Relationships which participants develop in the training are: to the trainer, to the group, and to self. Three aspects of self are presented: self as concept, self as experience and self as self. Relation of these three aspects of self to the epistemology of *est* are discussed, as are the experiences of aliveness and responsibility.

Introduction

Since fundamentally, *est* is a context in which to hold one's experience, I want to begin this essay by thanking a number of people for providing me with a context in which to write it. To begin, I want to thank those who attended the panel discussion at the APA meetings in May 1976, and, in addition, I want to thank the reader for this opportunity to discuss the *est* Standard Training.

In the paragraphs that follow, I will present some information which may be useful as a context in which to examine *est* as an example of an 'awareness training' in relation to contemporary psychiatry. I want to say at the outset that I am not qualified to write about large scale awareness trainings in general, and I will not presume to tell you anything about psychiatry. What I want to do is share with you some of the format, intended results, and 'theory' of *est* as an example of a large-scale awareness training.

[1] Portions of the material contained in this essay were originally presented at a panel discussion on 'Psychiatry and Awareness Training in Large Groups' at the 129th Annual Convention of The American Psychiatric Association in Miami on May 13, 1976.

[2] Founder.

[3] Director of Research and Development.

My intention is to provide a context in which the reader can have something of an experience of *est* and to create an opportunity for the reader, not simply to have some new concepts but to have an experience of what *est* is, insofar as that is possible in an essay.

So, I want the reader to know that my ultimate purpose is not to tell you some facts you did not know. I do ask you to entertain the possibility that there is something you *do* know, which you have not been aware that you know. The *est* training is an opportunity to become aware that you know things you did not know you knew, so it is not a 'training' in the usual 'rule-learning' sense of the word, nor is it an ingraining, by repetition or any other means, of behaviors, attitudes or beliefs.

Fundamentally, then the *est* training is an occasion in which participants have an experience, uniquely their own, in a situation which enables and encourages them to do that fully and responsibly.

I am suggesting that the best way to learn about *est* is to look into yourself, because whatever *est* is about is in your self. There are some who think that I have discovered something that other people ought to know. That is not so. What I have discovered is that people know things that they do not know that they know, the knowing of which can nurture them and satisfy them and allow them to experience an expanded sense of aliveness in their lives. The training is an occasion for them to have that experience – to get in touch with what they actually already know but are not really aware of.

Format

The *est* Standard Training is designed to be approximately 60 h long. It is usually done on two successive weekends – two Saturdays and two Sundays – beginning at 9 a.m. and going until around midnight. Sometimes a day's session takes longer, sometimes a little less, since the sessions go until the results for that day are produced.

There are breaks about every 4 h for people to go to the bathroom, have a cigarette, talk, or do whatever they like. In addition, there is one break for a meal during the day. People usually eat breakfast before and dinner after if they are less tired than hungry. We have altered these times on occasion to adapt, for instance, to institutional schedules. The same results have been produced doing the training over ten weekday evening sessions of 6 h each with a break in the middle of each session, and over three consecutive weekend sessions of 10 h each with three breaks including a meal break. The point is there is nothing in the duration of the training that is intrinsic to the training.

Included in the tuition (now $ 300.00), in addition to the two weekends, are three optional seminars, called the pre-training, the mid-training, and the post-training seminars. These are approximately 3 h long, and are conducted in

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the evenings a few days before, between and a few days after the weekend training sessions.

The training is held for about 250 people at a time, who are seated on chairs, arranged theater style, in a hotel ballroom. The trainer stands on a low platform in the front of the room so that the trainer can see and be seen by everyone. There are support personnel who sit in the back of the room, who manage the logistics of the training. For instance, they inform those participants on medication (who sit in the back row), when it is time to take it. There are microphones, to facilitate people who want to say something or ask a question, and everyone wears a nametag so that the trainer can address people by name.

Sometimes people wonder about what might be called the harshness of the training – why the rules are so unbending. It became very clear to me about 5 years ago that the rules in life do not bend. In other words, if I fall down, gravity does not say 'Well, we're going to relax the rules a bit since you hurt yourself'. I think that it is important for people who are being given an opportunity to discover themselves, to discover for themselves that there are stable environments, certain facts of living, they cannot 'con' or persuade into changing for them, no matter how pitiable they are, and no matter how intelligent and dominant they are. So the people who handle the supervision of the training – the room, the number of chairs, etc. – have been trained to be very consistent – to go by the book. The purpose of going by the book is not that we think you ought to go by the book all the time – that kind of rigidity in a person is obviously a mistake. It is to accentuate that the physical universe always goes by the book and that, like gravity, life does not relax the rules just because you want it to or even because you need it to. Gravity does not care, you see. It simply is. At the same time, the training is conducted with love and compassion (not sympathy and agreement) and anyone who completes the training is clear in their experience of this love and compassion. They know that their true power and dignity has been recognized from the very beginning of the training.

There are three relationships which develop during the course of the training which provide a framework for the material of the training.

One is a relationship with the trainer, who begins the training with what resembles a lecture, although trainees soon realize that it is not actually a lecture. To be sure, the trainer stands in front of the room talking, but he says things like 'If you experience something completely, it disappears', and since he says that early on in the training, almost everybody thinks that it is not true. Some people reinterpret it to mean something else *like* that, but not quite that, which could be true for them. In other words, people begin to develop a relationship to the trainer, who presents certain data about experiencing life, which trainees can examine to see if what he is saying is true for them in their experience. There may be a give and take between the participants and the trainer for a while until everyone is very clear what the trainer said. That does not mean

anyone has accepted it. In fact, people are effectively cautioned against merely believing anything presented in the training. It just means everone knows that is what the trainer said, and everyone begins to develop his or her own unique relationship with the material the trainer presents, by seeing the unique relevance of what the trainer has to say to his or her own beliefs about and/or experience of living.

Another relationship which develops in the training is the trainee's relation to the group and to the individual members of the group. This develops out of an aspect of the training we call sharing, by which we simply mean telling others what is going on in the realm of your own experience. Initially, people raise their hands, one of the support people brings them a microphone, and they talk about something – be it an annoyance, or an insight, or their theory of the training, etc. Then, as the training goes on, people begin to share more fully what they are actually experiencing, until, toward the end of the training, people become able to share in a way we call 'getting off it' – relating things they have held on to perhaps for their entire lives – things they have been stuck with yet were unable to reveal they were holding onto, and now find they can let go of. About a quarter of the people in a given training share meaningful things of this sort. The rest either do not share or say conceptual kinds of things.

There is no confrontation from the group to a trainee or from the trainer to a trainee except in rare instances by the trainer. We ask trainees not to evaluate, judge or analyze each other's sharing, not to engage in a dialogue with each other, and on that basis to say whatever they have to say to the trainer, so that the training can occur within each indidivual's own experience, rather than in others' concepts or in the dynamics of the group. Those who choose to share, do so, and those who choose not to, find it is not required to realize the results of the training.

When people share, other trainees often find they can see their own story more vividly in someone else's experience than they can in their own. So a large part of the value people get in the training is the view they see of themselves in others' sharing.

The third relationship people experience in the training is an enhanced relationship to themselves, which in part, occurs during what we call processes. These are techniques in which people switch their attention from seeing their concepts about themselves, others and life, to observing directly their experience of themselves, others and life. This is done in an environment – or 'space' – that is safe enough for them to do that. That is, in a safe space, there is no expectation that you prove anything, or demonstrate anything, or keep up any appearances. In a safe space, whatever is so is not used to justify or explain or be consistent with a point of view. Processes are simply an occasion to look directly into one's experience and observe what's going on there, in safety.

For example, there is a process in which people are asked to select a prob-

lem from among those they have in life and to see specifically which experiences are associated with that problem – which body sensations in which specific locations in the body, which emotions or feelings, which attitudes, states of mind, mental states or points of view, which postures, ways of holding themselves, gestures, ways of moving, habitual actions and countenances, which thoughts, evaluations, judgements, things they have been told or read, conclusions, reasons, explanations and decisions, and which scenes from the past are associated with that problem. People discover remarkable things about their problems – for instance that there are body sensations felt when and only when that problem intrudes into their lives – a fact they had not noticed before.

Some processes last for 20 min, others for 90 min. People are usually seated during them, and afterwards they are invited to communicate whatever insights or awareness they had. In a very real sense, then, the trainees literally create the training for themselves.

People think there is *an est* training, when in fact, there is not. There are actually as many trainings going on in each training as there are individuals in the training, because people actually 'train' themselves, by handling on an individual basis those aspects of living that are common to all of our lives. Each part of the training becomes real for participants by virtue of experiencing themselves, not concepts derived from someone else's experience.

Thus, the training is not like a classroom in which the aim is to agree or disagree with a concept or a theory. In the training, we present spaces, or contexts, or opportunities, in a way that allows people to discover what their actual experience is. Participants in the training report and give evidence of obtaining value from getting beneath their concepts, their points of view, their unexamined assumptions, explanations, and justifications, to the actual experience of themselves, others and life.

To know oneself, as Socrates suggested, does not seem to provide the experience of satisfaction – of being whole and complete if one knows oneself in the same way as one knows about things. Thus one can know *about* love and not know love, just as one can know all the concepts of bicycle riding without having the experience or the ability to actually ride a bicycle. The training is about the experience of love, the ability to love and the ability to experience being loved, not the concept or story of it – and it is about the experience of happiness, and the ability to be happy and share happiness, not the concept, story or symbols of it. In short, the training is about who we *are,* not what we do, or what we have, or what we do not do or do not have. It is about the self as the self, not merely the story or symbols of self.

People often ask if the training is something one needs. The training is not something one needs. Now this statement is usually met, if not by surprise, then with outright disbelief. For, if the training is not something one needs, why should one do it.

The fact is, people usually come to introductory seminars when they see that their friends or family or associates who went to the training experienced a transformation or enlightenment which they themselves would like to experience. It is a natural part of the experience of transformation to share the opportunity to have the experience of transformation with others.

This becomes amusing after the people who had the hardest time understanding why their friends or loved ones were so excited and enthusiastic and eager for *them* to know about the training, finally do take the training, they then meet the same bewilderment in *their* friends and loved ones when *they* try to share it, because now *their* friends insist *they* do not need it either.

The fact is, no one *needs* the training. It is not medicine. If you are ill, you need medical attention. If you are mentally ill, you need therapy. The training is not medicine or therapy. If you are hungry, you need food. You need air. Actually you need someone to love and someone to love you. You need to feel some self-respect and the esteem of others. Without these, we do not function very well as human beings.

The training is none of these. It does not solve problems. It is true that some problems dissolve in the training, but not because it is the purpose of the training for people to work on their problems in the training. The training is not about people's problems *per se.*

What the training is about is related to those rare moments in life, which while rare, seem to come into everyone's life at some time or another. They are moments in which one is absolutely complete, whole, fulfilled – that is to say, satisfied. (I limit the word gratification to mean the filling of a need or desire, or the achievement of a goal. I use the word satisfaction to mean the experience of being complete.)

Each of us has experienced moments in our lives when we are fully alive – when we know – without thinking – that life is exactly as it is in this moment. In such moments, we have no wish for it to be different, or better, or more. We have no disappointment, no comparison with ideals, no sense that it is not what we worked for. We feel no protective or defensive urge – and have no desire to hold on – to store up – or to save. Such moments are perfect in themselves. We experience them as being complete.

We do not *need* to experience completion. People function successfully without such moments. Like the training, such moments are not something we 'should' have. Like the training, such moments do not make us any better. We are not smarter or sexier or more successful or richer or any more clever. These moments, these experiences of being complete, are sufficient unto themselves. Like the training, such moments are not even 'good' for you – like vitamins or exercise or things of that sort.

In the training, one finds there *is* something beyond that -- the opportunity to discover that space within yourself where such moments originate, actually

where you and life originate. In the training, one experiences a transformation – a shift from being a character in the story of life to being the *space* in which the story occurs – the playwright creating the play, as it were, consciously, freely, and completely.

Because the experience of being complete is a state change from the rest of life, the questions and instruments we usually apply to measure life do not apply. We shall need to develop a whole new set of questions – a new paradigm to approach the experience of being complete.

In the training, the experience of being at the effect of life – of having been put here, and having to suffer the circumstances of life, of being the bearer or victim of life, or at best, of succeeding or winning out over the burdens of life – *shifts* to an experience of originating life the way it is – creating your experience *as* you live it – in a space uniquely your own.

In that space, the problems of life take on an entirely different significance. They literally pale, that is, become lighter – or enlightened. One sees, quite sharply, that *who* one is simply transcends and contextualizes the content with which one has been concerned. The living of life begins to be what counts, the zest or vivacity with which one lives, what matters.

It has been said that this is a polyanna view – that I think there's no pain and suffering in life. That is not my view at all. There is no doubt whatsoever in my experience and observation that people do suffer, that there is pain in life. If we were to sit quietly in an empty room for a few minutes looking at what we do and how we live, and at how much time we spend doing things that we pretend are important to us, most of us would find that we spend more time pretending not to suffer than in creating the experience of our lives.

In my observation of life, I find that during most of the time we are interacting with others, we are pretending, and we get so proficient at pretending that we eventually no longer even notice that we are pretending. We become 'unconscious' of pretending. We forget that the actual experience of loving someone – in contrast to the pretense or concept of loving someone, or the 'act' or drama of loving someone – leaves one absolutely high, vivacious, and alive.

Yet, each of us behaves as if we were really three people. First, there is the one we pretend to be. No one escapes this. Every one of us has an act – a front – a facade – a mask we wear in the world that tells the world who we are pretending to be. We think we need this to get along in life and be successful.

Underneath that mask is the person we are afraid we are – the person who thinks those small, nasty, brutish thoughts we try to hide, because we think we are the only one who thinks them, until we are willing to accept that we do actually think them, and only *then* notice everyone else does too. Until we confront our own smallness, we do not experience our real size. The truth is, we can only be as high as we can confront and take responsibility for being low.

I am suggesting that it is useful from time to time to get in touch with why

it is we have to be intelligent or successful or wonderful or kind. I am suggesting that when we look underneath the facade we present, we will find a cluster of thoughts, emotions, attitudes, etc. which are the exact opposite to what we have presented. All of us who are given credit for being intelligent have feelings, thoughts, etc. of stupidity and ignorance. All of us who are given credit for being wonderful have doubts. In my observation (which includes a fairly intimate interaction with over 90,000 people) we *all* have doubts about the authenticity of the way we present ourselves in the world.

Some people find this idea annoying. If you have spent your whole life proving you are not a fool, it is annoying to be called a fool. (A fool is one caught in his own pretense.) We are all very careful not to make fools of ourselves or not be fooled. Many see it as the ultimate disgrace. Only a fool pretending not to be a fool would be afraid of making a fool of himself. A fool presenting himself as a fool would have no problem with it, just as one who knows he is not a fool would have no problem making a fool of himself. Similarly, a man secure in his masculinity has no problem expressing feminine qualities. Each time we try to prove we are not fools we reinforce the belief that we must prove that we are not.

Underneath these two 'selves' – the 'front' and the 'hidden' – is the one we really are – under the one we work at being, the one we try to be, the one we are pretending to be, and underneath the one we do not want to be, the one we are avoiding being, and the one we fear we are. The extent to which we can allow ourselves to confront – to experience and be responsible for – the pretense and trying, the avoidance and fear, *is* the extent to which we can be who we really are.

The experience of being yourself *is* innately satisfying. If who you really are does not give you the experience of health, happiness, love and full self-expression – or 'aliveness' – then that is not who you really are. When you experience yourself *as* yourself, that experience is innately satisfying. The experience of the self as the self *is* the experience of satisfaction. Nothing more, nothing less.

Satisfaction is not 'out there'. It cannot be brought *in.* You will never *get* satisfied. It cannot be done. When you want more and different or better, that is gratification, and while that is gratifying, we always want even more or even better. Satisfaction is completion, being complete – what has been called 'the peace that passeth all understanding'. It is a condition of well-being – a sense of wholeness and of being complete *right now* – a *context* of certainty that right now is completely all right *as* right now and that the next moment will similarly *be,* fully itself. Not a judgment of good or bad, right or wrong, just what is.

I do not refer to smugness or to naivete, or to a preoccupation with self achieved by shutting out the world. I do not mean narcissism. I refer to the quality of participation which generates enthusiasm in its performance and in its beholders. I refer to the kind of invigorating vitality that makes a difference in

the world. Most of those who explain what we ought to do in the world do not make a difference in the world.

To summarize what happens in the est training, then, I would say the following. It is a transformation -- a contextual shift from a state in which the content in your life is organized around the attempt to get satisfied or to survive -- to attain satisfaction -- or to protect or hold on to what you have got -- to an experience of *being* satisfied, right now, and organizing the content of your life as an expression, manifestation and sharing of the experience of being satisfied, of being whole and complete, now. One is aware of that part of oneself which experiences satisfaction -- the self itself, whole, complete, and entire.

The natural state of the self *is* satisfaction.

You do not have to *get* there. You cannot get there. You have only to 'realize' your self, and, as you do, you *are* satisfied. Then it is *natural* and spontaneous to express that in life and share that opportunity with others.

This explains, I think, the fact that people from all walks of life take the training, so that, with the exception that the group of graduates includes a higher percentage than the average population of better educated people and therefore the group also includes a higher percentage than usual of professionals, they are representative of the community at large. I say 'explains' with tongue in cheek of course, for by now you will have perceived that the only quality one must have to 'get' the est training is *self.*

So everyone 'gets' it, that is, has an experience of self as self. A few 'resist' because they have patterns of resistance that they are now completing (rather than dramatizing or reinforcing) as a part of expressing their being complete. Some do not 'like' it, others delay their acceptance, both also patterns now to be completed. Even these, in my experience, have it, and are covering it over, for a while, with considerations, explanations, or other contents which they are completing.

This is not a matter of concern to us, since the prinicipal intended result of the *est* training is a shift in the person's relationship to their system of knowing contents, or technically a shift in their epistemology. Thus, the contents of people's lives are not worked on *per se* during the training, since it is not the purpose of the training to alter the circumstances of lives or to alter peoples' attitudes or point(s) of view about the circumstances of their lives. It is the purpose of the training to allow people to see that the circumstances of their lives and that their attitudes about the circumstances of their lives exist in a context or a system of knowing, and that it is possible to have exactly the same circumstances and attitudes about these circumstances held in a different context, and that, as a matter of fact, it is possible for people to choose their own context for the contents of their lives. People come out of the training 'knowing' that in a new way. Now I mean something larger than 'knowing' or understanding. I mean that people experience being empowered or enabled in that respect.

They no longer *are* their point of view. They *have* one, and know that the one they have is the the one they chose, until now, and that they can, and probably will, choose to create other points of view. They experience, that is, that they are the *one who* defines the point of view, and not the reverse. They experience the intended result of the training, which is a shift in what orients people's being from the attempt to *gain* satisfaction -- a deficiency orientation -- to the *expression* of satisfaction already being experienced -- a sufficiency orientation.

This is so even for the experience of psychosis. In our research[4], we have asked independent investigators to look very carefully at the issue of harm. And while I am not fully qualified to discuss the intricacies of research[5], I can report that none of the research has shown any evidence that *est* produces harm. Now, although it has not proven that *est* does not harm, it is noteworthy that investigators asked to look carefully at this question have not found evidence of harm. Every indication we have suggests that there is a lower incidence of psychotic episodes either during the training or among the graduates after the training than in a comparable group.

Interestingly, those graduates of the training who have experienced psychotic episodes after the training, report that they experienced the episode in a different way after the training than when they had such episodes before the training. For example, in Honolulu, at the general hospital there, two of the people who had psychotic episodes were graduates, as were some of the hospital staff. The graduates who had psychotic episodes said that their experience of psychosis after the training differed from their experience of it before the training in that they had somehow gained the ability to complete their experience rather than manage it or control it, or suppress it. We could say that they seemed to move to mastery of the psychotic material rather than be the *effect* of it. So it would appear that the epistemological shift at the core of the *est* training is one which can be used to recontextualize even psychotic episodes, although they are so rare in our experience that this tentative generalization must be regarded as based on a very small sample. We are currently planning systematic controlled research on this and other issues.

The Epistemology of est

Properly speaking, *est* is not an epistemology, since epistemologies are ordinarily defined as ways of understanding the contents of experience, and *est* is not about understanding the contents of experience; it is about the source or

[4] Two formal, although preliminary, studies, including follow-up.
[5] cf. *Babbie*'s discussion, this volume.

generation of experience. We enter here into a region of discourse laden with initially baffling paradoxes, since we are dealing now with understanding understanding, as it were, a task perhaps not unfamiliar to psychiatry.

What makes *est* not simply another discipline or epistemology, as far as I can tell, is what makes relativity and quantum mechanics different from the disciplines which preceded them and that is that the disciplines which preceded relativity and quantum mechanics derived from epistemologies based on the sensorium. What is very clear to me is that *est* is not based on the sensorium, so I employ relativity and quantum mechanics because I need examples of disciplines which do not derive from sense experience. There are facts in relativity which do not 'make sense' yet there is a logic in relativity which is as hard and certain as the epistemology of classical physics, without being based on sense data, although – in an expanded context – in accord with it, i.e., allowing and even giving insight into it.

And, just as it is actually impossible to hold the data of relativistic physics in a classical context, so it is simply impossible to hold the data of *est* in the context of classical epistemology. In other words, I am using words derived from a prior epistemology to describe a later epistemology that does not fit within the prior epistemology. This is why a good deal of what I have to say often sounds uncomfortably paradoxical, and in some views, 'foolish'.

I am saying that what is different about the epistemology of *est* is that it moves beyond the sensorium to a reality which, while allowing sense experience, is not confined within it. It is neither rational, in the usual conceptual meaning of that term, nor irrational, in the usual emotional or affective meaning of that term. It is a supra-rational epistemology, beyond both of these classical alternatives. Just as we cannot reduce a relativistic space into Cartesian coordinates of x and y, so I hold, we may not reduce the space from which epistemologies derive, the context of epistemologies – what I call self – into classical conceptions of self, the self as a thing or as a point or at best as a process.

I do not mean to be arrogant in citing Einstein as a case in point of paradoxes of this sort. I do so because he represents the most familiar example of someone who somehow managed to convey relativity to a world in which there was no basis for understanding it. He often referred to the fact that it is theory which tells us what to look for, and initially put forward his theory without benefit of experimental verification. Then, when we looked, we found that light rays *did* bend on their way around the sun. Somehow, he said what could not be said. Similarly, in the *est* training, we say things you cannot say and people get things you cannot tell them.

Now, this is not really as paradoxical as it sounds, because the truth is, although you cannot fit an expanded context into a contracted one, you can fit a contracted context into an expanded one. It is simply the case that most of us are very reluctant to come up with an expanded context for our experience,

because we think that it invalidates our previous limited context, and thus presents a threat to what we think our survival is based on. Now, *there* is a paradox worth reckoning with, since, in my view, it is precisely the expansion of limiting contexts which not only vouchsafes survival but generates those rare experiences I have referred to as moments of spontaneous transcendence, or transformation. I mean experiences of self – not self as concept, or self as peak experience (the experience of self *by* self) – but the direct and unmediated experience of self *as* self, not limited by previous context. Or, indeed, by *any* context.

There you have it. For most humans, self is positional – a location in time and space – a point of view which accumulates all previous experiences and points of view. You are there and I am here. During the training there is a shift in the way one defines oneself – not merely in the way you think about your definition of self – nor merely in the way you believe your self to be – but in the actual experience of who you are as the *one who* defines who you are, not the definition. As self, you are no longer a content – another thing in the context of things – but the context in which contexts of things occur. You become a space in which one of the things, one of the contents is your point of view about who you are. You *are* no longer that point of view. You *have* it, as *one* of the experiences *you* have. You experience you as the one who *is* experiencing you.

I know this is an unusual way to use the words self and experience, and since I have no intention to mystify, let us move towards a schematic that may be useful in illustrating what I mean.

There is the experience of self *as* self, the experience of self *by* self, and the experience of self as symbol or thing.

If I ask you to describe what you are experiencing *right now*, almost everyone who decides to go along at all, without considering whether it is possible, starts a process in which they try to articulate what they are experiencing. *That* we experience is axiomatically assumed by almost all of us all of the time. It is as though it were a given. (Back in the 'old days' people may have said something like, 'What I'm experiencing is that I don't like it in this room. It's terrible. The whole thing is awful. I just got up on the wrong side of the bed today and nothing is going to work out.' Today we know better than that. Today we are hip. We know to describe what we are experiencing in experiential terms, rather than in conceptual terms.) We might begin with a description of the perception of our senses; go on to describing our body sensation; emotions and feelings; attitudes; states of mind, 'mental states'; our fundamental approach to circumstances, and our way of looking at things, i.e., our point of view; we might describe our motion or movement, kinesthesia; and we might describe the actual thoughts we are thinking right now; and what we are imagining or remembering. Let us locate all of these components of experience within the square in figure 1.

The square itself represents the instant-by-instant nature of the experience

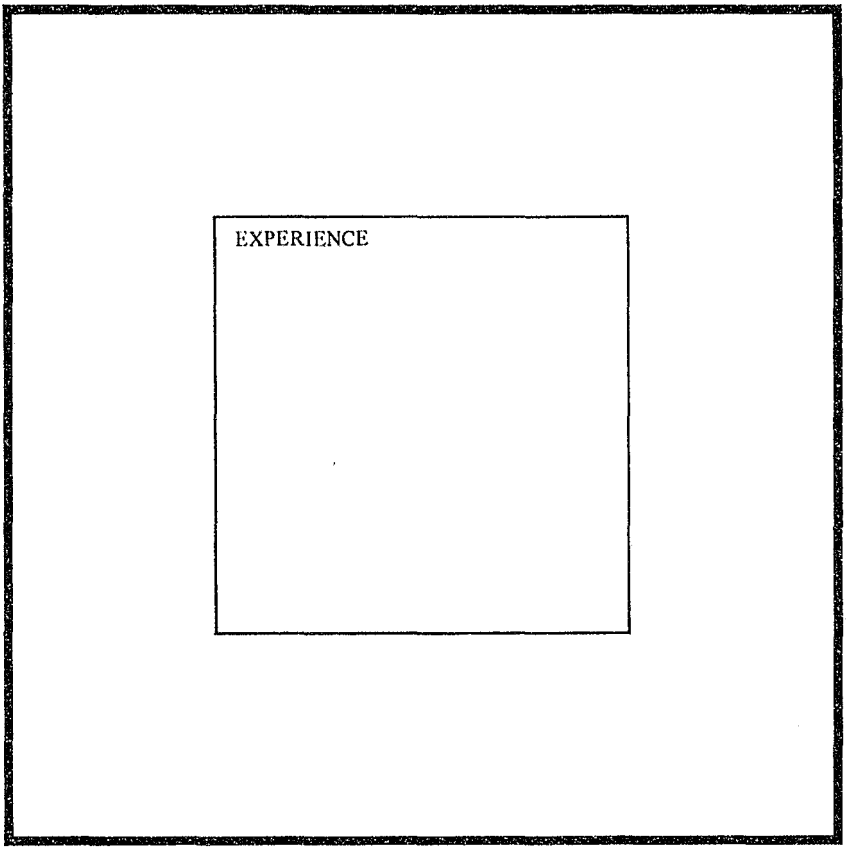

Fig. 1.

of life – not the process, or the accumulation of these instances. The square stands for *now,* and then *now,* and then *now.*

Of course, when I ask you to describe what you are experiencing right now, I have actually asked you to do the impossible. By the time you apprehend your experience – that is to say, when you stop to see or note what it is that you are experiencing, you are no longer denoting what you are experiencing *now.* You are, in fact, denoting what you experienced a moment ago. Actually, it is more elusive than that, because experience itself has no quality of persistence. In other words, what you experienced a moment ago is now gone *as experience.* What remains of what you experienced a moment ago is not experience but a *record* of what you did experience in *that* moment (commonly called memory). In other words, when you stop to formulate what it is you are experiencing so that

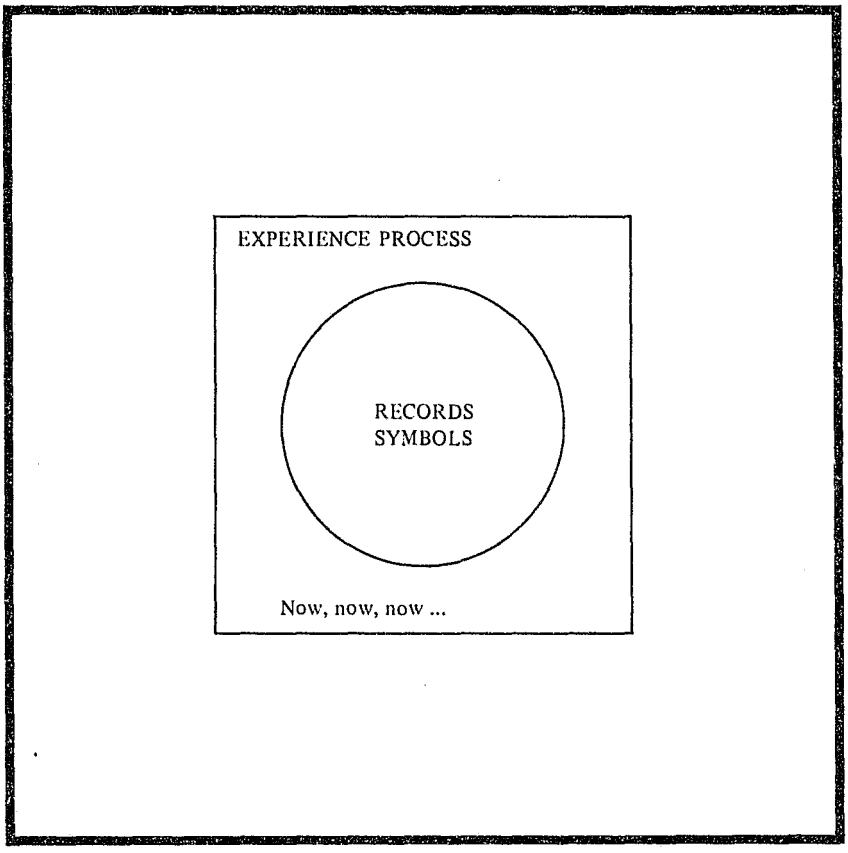

Fig. 2.

you can note it and think about it or realize it or describe it, it is not only not *now*, it is not even experience. It is, in fact, merely a record of what you experienced – a record consisting of a collection of symbols which you use to represent what you experienced. So the best you can hope to do when I ask you to describe or take note of what you are experiencing right *now* is to describe or take note of the symbols of what you experienced a moment ago. These records or symbols of experience are represented in figure 2 as a circle.

To review: The square represents the instant-by-instant process of living. It is for the most part unformulated until it is formulated as symbol in a manner dictated by our concepts and then retained as concepts. the square represents experience or process. The circle represents symbols and concepts. The function of the concepts (the circle) is to organize experience or process (the square). In

other words, the function of concepts is the organization of experience into meaningful patterns, then groups of patterns and the relationships of groups of patterns.

For example, if you were to see a ghost walking in front of you, you probably would not say, 'Terrific, my first ghost'. More likely, you would say, 'I must have eaten something strange for dinner', or 'Perhaps I have been hypnotized'. In other words, your mind's concepts will organize the raw experience – that is to say, formulate it (represent or symbolize it) so that it is consistent with your concepts. If it were not for this organizing ability, you would grope around your own room to discover the way out. As a matter of fact, without this organizing ability even the experience and the resultant idea that there was an *outside* of the room would occur only by accidently falling through the doorway each time you are in a room.

So in the circle we have the organizing principles of experience or the organizing principles of process or the organizing principles of what we generally call life. Conversationally, we use the word explaining rather than organizing, so conversationally, organizing principles become explanatory principles. Unfortunately, most of us make no distinction for ourselves between moment-by-moment experiencing and the concepts which are records and organizations of those experiences.

Our language even uses the same symbol (the word experience) for these entirely different phenomena. We say, 'I am *experiencing* talking to you' and 'I *remember the experience* of having talked to you'. What I really remember is the symbols and concept I used to record the experience of talking to you, and I use the same word for both of these.

What ordinarily happens is our concepts begin to determine what we experience. These concept-determined experiences (mechanicalized experiences) then reinforce the concepts from which they arose, which reinforced concepts further determine experience, and so on. In this conceptualized or mechanicalized condition of living, one is at best successful and at worst a failure or pathological.

As far as I can tell, when we said something was 'wrong' with people, what we have often attempted to do in our society was to get them to give up 'bad' concepts or take on 'good' concepts. In modern therapies, we now attempt to break the hold of concepts on experience so that people can be more directly aware of their experience and experience more directly.

I am suggesting a third possibility, beyond experience or process and beyond symbol or concept. The third possiblity is represented in figure 3 by the space in which the square and circle are drawn on the page. In other words, it is the page itself. This *space* of the diagram represents what I call a generating principle – that which gives rise to experience, as distinguished from experience/process, or the organization/explanation of experience. It is the *source* or creation or generation of experience or process or, if you will, life. Rather than

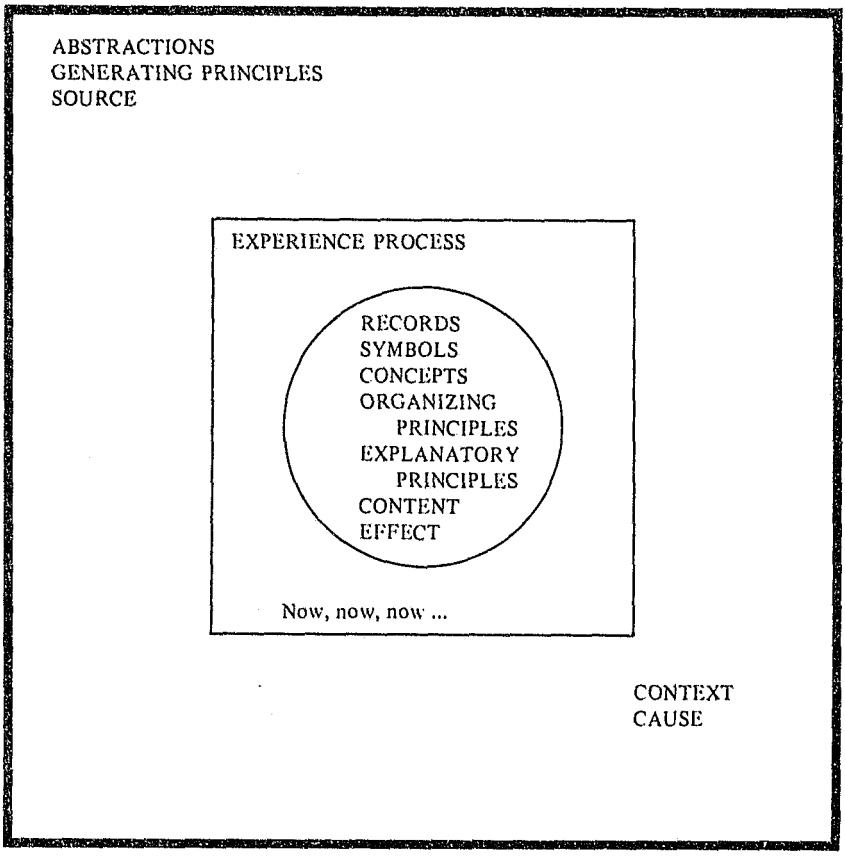

Fig. 3.

organizing or explaining, it generates or creates. And rather than being conceptual and symbolic, it is abstract.

In Zen, they say that those who know don't tell. What they may mean is that self as self (represented by the space of the diagram) generates experience, sources life. It does not explain it or 'organize' it. In Zen, they also say that those who tell don't know. What they mean is that self as symbol or thing (represented by the circle in the diagram) can explain it but cannot source or generate it. We all know people who can explain and rationalize their entire lives and everyone else's, for that matter, who do not generate real satisfaction, fulfillment or aliveness in life. At best they present a good facade.

Traditionally, the world is usually divided into two groups: people who experiential or intuitive or feeling or emotional or non-rational and the other

camp, people who are intellectual, verbal, conceptual and rational. I am suggesting a third possibility which requires a new paradigm of understanding and a logic, philosophy, language and syntax which are appropriate to it. To point in the direction of what I mean here, I use the analogy of relativity and quantum mechanics, which required physics to generate a new paradigm not understandable in the old classical paradigm, but which is a state change or, as I prefer to call it, a transformation. Relativity and quantum mechanics also require a new logic, philosophy, language and syntax of the *physicist*, which in the old logic, philosophy, language and syntax sound paradoxical and irrational – but once apprehended are seen to be fully logical, rational and consistent and even *allow* the old logic, philosophy, language and syntax – perhaps even illuminate it. This is not anti-intellectual or irrational or even non-rational. It is a kind of supra-rationality, a context *in* context.

The difficulty I have with the prevailing scientific epistemology is that it tends to move backwards – from *content* to context (from the circle to the square) which in my view forces us to locate the source of experience in the result of experience.

I suggest there is another way and that is, to come from the source of experience – which has a logic all in its own – *to* experience – which too has a logic – and move on to the symbolic record of experience – which also has a logic, or order all its own.

What we ordinarily call logic is actually a specialized logic which is consistent with a symbolized and conceptualized sense-perceived reality. It is the logic of content, object or thing – a logic of reality of parts. There is another, separate and distinct logic which is consistent with a process (experiential-here-and-now) based reality. It could be said that this logic is consistent with a sense-perceived reality which has not been symbolized and conceptualized. Actually, the reality with which this logic is consistent includes – in addition to sense perception – such items as body sensation, emotion, feeling, attitude, state of mind, movement, motion, kinesthetic, thought itself, imagination, and memory. An example of this is the logic of art, dance and music which, by the way, often appears illogical and irrational when seen from the logic of the symbolized and conceptualized sense-perceived reality. (It is a fundamental malady in our culture that as we become more enculturated we become more likely to try to make sense out of our experience-process with a logic of symbols and concepts.)

While the first of these two logics does not include the second, the second includes the first. That is, the second one is the context for the first one.

There is a third logic which is distinct and separate from the first and/or second of these two logics. It is even further removed from what we ordinarily call logic, and, as a matter of fact, it seems completely paradoxical, non-sensical and strange when viewed from the perspective or ordinary logics. It is a logic

which is consistent with a source-of-form rather than form – source-of-time rather than time – source-of-position rather than position-based reality. It is the logic of context and creation – a logic of a reality of wholes. It is a logic of universals, of ultimate contexts, which allows for process, change, experience, and particular sets of contents.

This logic system of self as self is not 'sensible'. It seems paradoxical, because it must speak a language based on a logic of the senses, in which the subject of the verb must be different from the object of the verb. Self as self does not 'make sense'.

Self as self is represented in figure 3 as the space or content of the diagram. The experience of self by self is represented by the square in the diagram. Self represented as symbol, or self experienced as an object or thing, is represented by the circle in the diagram. Self as self does not explain behavior, it generates it. Self as concept does not generate life – it only explains it. Generating principles generate and explaining principles explain.

This brings us to the final notion I want to present in this essay – the notion of responsibility. In ordinary discourse, I find the idea of responsibility almost totally buried under concepts of fault, guilt, shame, burden, and blame, so that a discussion of responsibility almost invariably elicits a defensive response, as if to say, 'it wasn't *my* fault', or a brave, 'I did it'.

And yet, the experience of responsibility for one's own experience *is* the awareness that I am the source of my experience. It is absolutely inseparable from the experience of satisfaction. Satisfaction is the natural concomitant of the experience of self as generating principle or abstraction or source or cause. Only if *I* love you do *I* love you, and if I am not responsible for (the source of) loving you – then 'obviously', *I* am not loving you. I might *have* love for you or *do* love for you but I *am* not loving you. Having or doing love can be gratifying, need-fulfilling, and cannot be satisfying, whole or complete.

Similarly, if *I* am not responsible for (the source of, the cause of) my experience of the predicaments in my life, then *I* can only resist, fix, change, give into, win out over, or dominate. Paradoxically, the experience of helplessness or dominance results from the attempt to locate responsibility outside of self and sets up a closed system out of which it is sometimes very difficult to extricate a valid experience of self; since the self which might otherwise be responsible has been excluded in the attempt to protect it from guilt, shame, blame, burden and fault.

I am sometimes asked whether I 'really' mean that people are wholly responsible for their experience of life, as if I wished to blame people in poor circumstances. For example, I am asked whether accident victims are 'responsible' for having accidents. I hope it has become clear in the context I have developed above that such questions might involve an oversimplification.

Responsibility, in my view, is simply the awareness that my universe of

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experience is my own including the experiences of those events in my life I call accidents.

Responsibility begins with the willingness to acknowledge that my self is the source of my experience of my circumstances. And yet, on occasion, some people think that I think accidents do not happen – or would not happen, if I were 'really' responsible. I am sure you will understand my occasional dismay when I am asked questions of this sort. On reflection, I usually recall that such questions derive from a well-intentioned (though perhaps limited) view of human dignity, an intention with which I can align myself, since my own intention is precisely to show that the experience of responsibility is *en*abling, not *dis*abling.

I have no interest in the justification of circumstances or producing guilt in others by assigning obligation. I am interested in providing an opportunity for people to experience mastery in the matter of their own lives and the experience of satisfaction, fulfillment, and aliveness. These are a function of the self as context rather than thing, the self as space rather than location or position, the self as cause rather than self at effect.

I am not saying that you or anyone else is responsible. True responsibility cannot be assigned from outside the self by someone else or as a conclusion or belief derived from a system of concepts. I do not say that you or anyone is responsible. I do say – with me, you have the space to experience yourself as responsible – as cause in the matter of your own life. I will interact with you from my experience that you are responsible – that you are cause in your own life and you can count on me for respect and support as I am clear that I am fully responsible for my experience of you, that is to say, from my experience of the way you are.

Ultimately, one experiences oneself as the space in which one is and others are. I call this the transformation of experience. At the level of source – or context – or abstraction – I am you. That is beyond responsibility.

In sum, I affirm that human experience is usually though not necessarily ensnared in a trap of its own devising, born of a wish to survive and remain innocent. And ironically, our stubborn wish to survive prompts us to rely on concepts of life built with records of past survivals, thus reducing self to victim, or at best to survivor or dominator, on which spectrum, every position is one of effect.

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EST IN PRISON—GENERAL OVERVIEW

(By Earl Babbie, Ph. D.)

Editors Note: This article presents an initial examination of the use of the Erhard Seminars Training (est) in the prison system. The research for this article involved interviews with inmates and staff at Lompoc Federal Penitentiary and San Quentin, plus participation in the first day of the est Standard Training at Leavenworth.

The report should be seen as exploratory, providing a general overview on the introduction of est training in prisons, and as a first stage in the design and execution of more rigorous evaluations.

The Erhard Seminars Training was created by Werner Erhard in 1971. Erhard states the purpose of the training as follows: "to transform your ability to experience living so that situations you have been trying to change, or have been putting up with, clear up just in the process of life itself."

The training is usually conducted during two consecutive weekends, taking approximately 60 hours altogether. About 250 trainees participate in each training, led by one of the nine est trainers.

There are three key elements in the training. First, for a part of the time, the trainer presents data, ideas, and points of view for the trainees to look at.

Second, in a series of "processes," trainees sit with their eyes closed while the trainer asks questions or gives instructions: e.g., "Recall a time you were happy." "Locate a point in your left knee and notice what sensations you are experiencing there."

The third element—called "sharing"—is an opportunity (not required) for trainees to share with the group any of the things they have experienced during the training or any realizations they have had about themselves.

Currently costing three hundred dollars, the training has been unquestionably popular. Since 32 people participated in the first training in October, 1971, another 100,000 have taken it during the program's first five years—despite the fact that est has never engaged in advertising.

Virtually all of the participants decide to enroll through word-of-mouth referrals. Research on graduates, moreover, suggests that the great majority feel they have benefitted from it. (Babbie and Stone, 1976)

HISTORY OF THE PRISON TRAININGS

Thomas Keohane, Jr., currently the associate warden (programs) at Leavenworth, is probably the one person most responsible for the introduction of est into the prison system.

Keohane recalls that when he was associate warden at Lompoc Federal Correctional Institution, Gene Stevens, mayor of Lompoc, took the est training and recommended that the prison staff look into it. "At that time," Keohane recalls, "We had a lot of everything. We had 16 self-improvement groups. The institution was very active in a variety of programs." Keohane and then Warden Frank Kenton decided to explore the possibility of adding est to the list.

The first est training in prison was conducted at Lompoc in July, 1974, with 54 inmates and four staff members graduating. Keohane indicated that he had been accustomed to getting good feedback from the various programs offered to inmates, but between the two weekends of the est training "this one seemed to be getting a little different feedback, a little higher caliber, and a more intense commentary about the effect it was having.

"After they completed their second weekend," Keohane continued, "the staff that took it started talking about it. And they were talking very favorably about it."

Prison staff began noticing that even the more radical inmates who took the training spoke highly of it. More importantly, perhaps, inmates who had records of problems in prison began "getting along."

As a result, Lompoc officials scheduled another training—conducted during February, 1975, from which a total of 60 inmates and staff members graduated. The results of the second training were substantially the same as the first.

Keohane himself took the training in San Francisco. Interviewed a year later, he summed up his view of the training this way: "It really handles self-contentment, I think, and satisfaction and self-fulfillment. It makes you a more effective person."

DIRECTS PROGRAMS AT LEAVENWORTH

Keohane has subsequently become the associate warden for programs at Leavenworth and in October, 1976, an est training was conducted for inmates and staff there. A dozen staff members and 140 inmates began the training on October 13th, with a total of 121 staff and inmates graduating on October 21st.

George Jackson, Chief Deputy Director of the Department of Corrections, State of California, met Werner Erhard and discussed est. That initial meeting eventually led to a training at San Quentin on June 8–9, 15–16, from which 59 staff members and inmates graduated.

In preparation for this report, I interviewed nine inmates who had taken the training at either Lompoc or San Quentin, eight staff members who had taken the training, and a number of inmates and staff who had not.

The nine inmate-graduates varied from being quietly enthusiastic to being ecstatic about the value they had gotten from the est training. The most common result they reported involved a simple joy with living.

They said they were more enthusiastic about life, more open in their relationships with others, and more self-confident. The nongraduates I interviewed said essentially the same thing about those inmates they knew who had taken the training.

Many of the inmates spoke in dramatic terms about their experience of the final night of the training. "That last day, something snapped within me. It was like a big cloud or something that's been weighing me down—it just lifted." Another said "That last night when I got it * * * I never felt physically, spiritually, or mentally that way before."

In part, their enthusiasm with living represented a higher self-esteem. Many spoke of coming to accept themseves as human beings for the first time.

A prisoner who stencils and sells San Quentin T-shirts spoke of changing his attitude about his work: "I didn't give any sense of value to my work. I didn't thing my work was worth anything. That's nonsense. I do damn good work, and I know it's good work. I'm going to charge for it, and I'm not going to bicker about the price."

Several inmates spoke of the effect that understanding and accepting themselves had on their relations with others. One inmate, serving a sentence of life without possibility of parole, summed up the matter, saying "Once you understand yourself and learn to love yourself, then you've got room for everybody else."

In large part, the inmate-graduates' comments dealt with their views of prison and their feelings about being in prison themselves.

RESPONSIBILITY FOR BEING IN PRISON

Many of those I interviewed stressed their realization, during the training, that they had been personally responsible for putting themselves in prison. This replaced their earlier views that someone else had been responsible or that they had been the innocent victims of circumstances. This realization was not reported with regret or remorse but more as a simple discovery of the way things were.

One inmate who had been in and out of prison several times reported changing his view of why he was in prison. "I ain't got no kicks coming. I was a chump before. Every time I come to the penitentiary, I come for something different, but you set yourself up."

While each of the inmate-graduates interviewed felt personally responsible for being in prison, none seemed to express guilt, shame, or remorse. Rather, they seemed to have made a matter-of-fact discovery about the way things are. Each had "done something you get put in prison for."

The realization that they were responsible for putting themselves in prison was frequently accompanied in the interviews by comments about "accepting" the fact of being in prison. "It makes it easier to accept being here. Because you are here. And the est training * * * allows you to accept what is.

"One of the things that causes a lot of the troubles in prison and causes people to get into prison in the first place is because they haven't accepted what it is.

"Some people don't do this. They say, 'I'm not the kind of person who belongs in here. I'm just not that person.' They go through their whole time saying, 'I'm not that person.' Now if somebody comes along and treats them like they are an inmate, they get uptight because they don't feel like they are an inmate, and they have troubles."

Asked if that meant he no longer desired to get out, the inmate was quick to correct that impression.

"Oh no! Oh no! Never happen! It means that you stop feeling bad about being in here, and you accomplish what you want to accomplish while you're in here. In other words, your mind and feelings aren't tied up in 'Gee it's terrible to be in this place.'"

Most of the inmate-graduates interviewed echoed this view. One said "I love San Quentin. I don't hate San Quentin, because I love myself. I'm happy right here. I'm not planning on staying here, but I'm happy while I'm here."

RELATIONSHIPS IN PRISON

Most of the inmates interviewed reported changes in their relationships with others. Some spoke of getting along better with fellow inmates—reporting more open and honest interactions with fewer conflicts.

One inmate spoke of walking around, or away from, confrontations. Some spoke of having very different relationships with prison officials. Several said they now regarded the corrections officers and other staff as merely being people with a job to do.

One described an unsuccessful attempt to establish a new educational program at Lompoc. He felt that prior to the training he would have retreated into animosity toward the officials; now he is looking at new ways of proposing the program, answering the pevious objections.

Several of the staff members I interviewed confirmed the general improvement in social relationships among the *est* graduates. Many gave specific examples of inmates who had been in constant conflict with other inmates and with staff prior to the training and who subsequently had totally changed.

Keohane summed it up by saying "It just seems fewer of them get in trouble after they've gone through the training, even if they've been troublesome since the time they got here. They become more responsible."

In nearly all of the interviews, the inmates mentioned the desire to share the experience of the training with others. The married inmates wanted their wives to take the training. One had written to *est*, requesting a scholarship for his wife. Another was making arrangements for his ex-wife to take the training. Most mentioned the desire to have friends—both those in prison and those on the street—take the training.

EST AS A CONTEXT

Interestingly, everyone interviewed saw the *est* training as a supplement to other prison programs rather than as a substitute. Most described the impact of taking the training on other things they were doing while in prison. Many spoke of participating in educational programs; others were involved in community programs—working with juveniles, for example.

One inmate summed up his view by saying "A person should have some religion, they should have some education, and they should have some *est*."

Ted Long, the *est* trainer who has conducted most of the prison trainings, agreed that *est* should not be seen as a substitute for other programs.

"Those other programs can be valuable. Where the *est* experience comes in is in terms of putting them in a context that reveals how valuable they can be," he emphasized.

"The training deals with the context in which people hold and look at and interact with the things around them in a way that produces actual value, not apparent value or conceptual value.

"The *est* context reveals the value of other programs so it's not a question of *est* versus those things. It's a question of us pointing out to people that those programs can be more than a way of manipulating the system. The training enables a person to get into a program—to get whatever value he can out of that program, not try to trick it or outsmart it."

Long saw the immediate impact of the training in terms of institutional life, giving inmates a context within which to hold their experience of prison. In the long run, he felt the training would provide ex-convicts with a context within which to hold the experience of life on the street.

Another way in which the *est* training differs from other prison programs is its one-time nature. The "context" Long described is created as a lasting quality of one's experience in the basic two-weekend training. While *est* offers graduate seminars for those who want to participate in them, the 60 hour training is regarded as complete in itself.

Interestingly, many of the nongraduates I interviewed assumed that *est* would require continuing ongoing training to reinforce its effect—like some of the self-

help programs they were familiar with. The inmate and staff graduates tended to disagree, however. As Keohane described it: "It's not really a program. This is an experience that only takes place on a couple of weekends, and you don't need to keep going back."

FUTURE OF EST IN PRISONS

The four *est* trainings conducted so far in prisons have been donated by *est* without charge. In addition to deferring the normal tuition revenues, the organization has provided the costs of supplies, salaries, and travel.

Don Cox, the president of *est*, indicated that while est may continue to donate some prison trainings, it is not in a position to do so on an unlimited basis. In addition to the prison trainings, *est* has donated trainings to disadvantagetd communities and groups, to school classes, and others.

Within the three prisons, there was a consensus among those interviewed—graduates and nongraduates alike—in favor of more trainings.

Among the prison staff members, there was a special concern that future trainings be accompanied by rigorous evaluation research efforts. The psychologists and phychiatrists interviewed felt this was essential, and they are unwilling to pass final judgment on the effectiveness of the *est* training until they can observe the inmate-graduates over a longer period of time.

Asked if they would support a continuation of trainings in the interim, they all said they would. A careful evaluation of a Lompoc training is in process.

The inmates were more unqualified in their support for future trainings. Some had personally written to *est* requesting more trainings, as well as graduate seminar programs.

It is clear from this exploratory study that *est* has a great deal to offer the prison system. The extent of that contribution and how that contribution can best be made available on a wider scale awaits further research and study.

Getting "it" in prison

by Neal Rogin

The space you create for est is what makes it possible for programs like the Lompoc Training to happen.

This account is just one illustration of the kind of contribution you are allowing est to make and, for me, captures the essence of the est experience.

Please accept this special printing as an expression of my appreciation for what you contribute.

Love
Werner

The Federal Correctional Institution at Lompoc, California looks exactly like what it is — a prison. The huge grey concrete structure stands like a square mountain in the middle of the flat and windy lowlands north of Santa Barbara. Just outside the 12-foot, double barbed wire topped electric fences which surround the building looms a 200-foot tower which guards the main entrance.

I drove up to the loud speaker at the base of the tower.
Click. "May I help you?"
"My name is Neal Rogin, and I am here for the est training."
A pause.
Click. "Do you have any alcoholic beverages, narcotics or firearms in your possession?"
"No, I do not."
"Very well. Park your car and proceed to the main gate."

I was soon standing in front of a heavy glass door. The electronic lock clanked open with the sound of a rifle bolt. I walked in and was greeted by Burt Kerish, Clinical Psychologist at Lompoc for the past fifteen years.

"Is this the first time you've been to a prison?" he asked as we walked across the yard and up the steps to the main building. I told him that when I was fourteen years old, I went along with my Pony League baseball team on a tour of the Cook County Jail in Chicago.

We were allowed through some more heavily guarded doors and into the main corridor of the prison. "This is a Federal Prison," Burt continued, "men are put here for things like bank robbery, murder, kidnapping, unlawful flight to avoid prosecution. . ."

Small groups of inmates were leaning against the white tile walls, sizing me up, looking me over, checking me out, nudging each other as we walked past. My camera bag, briefcase and groovy Indian bracelet felt very conspicuous.

Burt was one of four members of the prison staff who, along with 54 inmates, participated in the first Lompoc training which Werner conducted in July of last year. "Most of the inmates who took that first training have been released, and I don't mean to say it was because of the training," he told me, "I don't really know. Some of them got out because their sentences were up; others were able to tell the parole board clearly that they were ready to be responsible."

"I've been around this place for a long time," he continued, "and I was frankly skeptical that an outside group would be able to have any real effect on the inmates. I was amazed at the trainer's ability to call these people on their acts so accurately, and to do it in a way that allowed the guys to cop to it, rather than dramatize it, which is what they usually do."

We arrived at the training area and went in. It was a brightly lit and carpeted multi-purpose room that could just as well have been in a student union as a prison. The trainees were seated in colored plastic chairs, most of them wearing some variation of the prison uniform of khaki shirts and pants, green t-shirts and blue jackets. I was surprised to see several women among the trainees.

"They're part of the prison staff and their wives," whispered Training Supervisor Joe Roza as I sat down at the back table. Joe's responsibility as Training Supervisor is to see to it that the physical space of the training is totally secure, so that the trainer is able to devote his full attention to the people in the training and to deliver the material. Not only big physically, Joe is also big in intention. It was clear that the room was well set up. Trainer Ted Long had the maximum opportunity in which to deliver the training and didn't have to have his attention on anything other than being with the trainees. Which he was doing brilliantly.

"I know that the agreement around here is that you have to be tough and resistant, and bitch about how bad things are, and I want you to get that that doesn't work. It doesn't work to wave the traffic on the freeway in the direction opposite to the way it is going. The traffic on the freeway doesn't give a damn about you. And I don't mean you have to give in to the system. I mean to be responsible for it the way it is. You set it up this way. Now dig it."

A hand went up.

"Ron," said Ted.
"This dude that guards my unit hassles me all the time, man, and it's a drag. Last week I started growing a beard, you know, and he stops me in the hall and says, 'Hey boy, you need a shave.'"
"And what did you tell him?" asked Ted.
"I told him to shove it, man," Ron said with a triumphant smile.
"Good, did it work?"
"It sure felt good."
"I know, Ron, but did it work?"
"Well, no."

"See, the way you set it up," Ted continued, "is that you are the prisoner and he's the guard. That's the way it is. And no amount of resisting it will change that. Now you have a choice. You can keep resisting, or you can choose it. You can bitch about it, or you can take responsibility for it. If you come from the notion that you caused it, that the rules around here are your rules, you can run it instead of having it run you."

"But that dude is wrong," protested Ron.

"So what," said Ted, "I mean really, so what? The trouble is, you are more interested in being right about how bad a guy he is than you are in making your life in here really work. And the only one you are cheating, the only one you are putting things over on, is yourself."

"You could have said," Ted continued, "'Gee, thank you very much for reminding me. I was actually thinking about that very thing. You know it really slipped my mind, and I appreciate your pointing it out to me. You are really a very considerate person.' And that doesn't mean be a bootlicker."

"It means taking responsibility for the way things are. You created him out here, Ron, and the only way to make your life work is to support the things you already created. Don't take my word for it. See for yourself if supporting people works better than making them wrong."

Because of the time schedule at the prison, the training is conducted in three weekends instead of the usual two. It begins at 9:00 AM; the first

break is taken at about 1:00 PM; the dinner break is from 4:00 to 6:00 PM, and the training ends each evening at 9:30 PM. So it isn't exactly what you'd call grueling. And it isn't easy. What comes up for the trainees to experience is often more than uncomfortable.

Take the case of Bobby. Bobby was in Lompoc for homicide. Throughout the training he wore very dark glasses and sat in the back row. The only time he took them off was when Ted confronted him in the Danger Process, and even then he did everything to avoid looking at anyone. "The Danger Process was really a high point in this training," Ted later told me. "It was the time when they got in touch with their tough guy acts and became a group."

It was after the Danger Process that things really began to come up for Bobby. Sometime during the afternoon of the third Saturday, I looked up and saw an empty chair in the back row. Turning toward the door, I saw Bobby moving unsteadily towards it. Joe walked over to him. They stood there for a long time. A very long time. I wondered what was going on. Joe later explained, "What Bobby was looking at, what had come up for him was whatever it was that made him kill people. He said he couldn't stand being in the room any more and that he not only wanted to get out of the training, he wanted to get out of the prison. He was literally ready to go over the wall, rather than experience what was coming up."

"I didn't press him on it. That doesn't work. I just gave him the space to look, and to communicate. He knew that this was his number, and he was able to see that he was standing at a crossroad. I pointed out to him that he was totally free to leave the training without being hassled. . . that it was perfectly OK with Ted for him to be there or not be there. . . and that this was an opportunity for him to do something he never did before. . . to move through the barrier he was up against and to be done with it. After four hours, he chose to stay."

After the dinner break, Ron, who was in the front row, stood up to share. "I was coming back from my unit after dinner, and the dude I told you about started hassling me again. He said, 'Hey, boy, where's your pass?'"

"And what did you say," asked Ted.

"Well," answered Ron, "I started to say something smart, and I stopped myself. Instead I said, 'Why thank you sir, that's very nice of you to be concerned about me and my friends here. Would you mind escorting us safely back to the est training?' He didn't know what to do. I got to tell you, man, it worked!" and he slapped Ted's hand.

Later on that day when everybody "got it," Ron *really* got it. He burst out laughing, and laughed on and off for the rest of the day. After the training, Ron was able to contain himself long enough to apologize to Ted for being a distraction. "I couldn't help myself. It's the first time I've laughed since I been in this joint!"

Being in prison doesn't seem to be such a terrible punishment for people after they have taken responsibility for their lives, and may be the key to making prisons work. As Ted pointed out in the training, "If you guys find out that you dig it here, they might have to close this place."

I talked to Tim, one of the six graduates who were assisting with the microphones and handling the logistics for the training. Five of the six, including Tim, took the first Lompoc training and are inmates themselves. Tim looks like a typical, college football halfback. He's bright, cheerful, alive. I asked him what he was in jail for. "Robbing banks," he said as if it were parking tickets, "I knocked over six before they caught up with me."

"What did you get out of the training?" I asked, swallowing my surprise. He leaned over and whispered so no one else could hear, "I'm having a ball in prison."

On Sunday morning, I had the privilege of doing the Personality Profile demonstration. The trainees thought I was some kind of wizard, until later that night when they did it themselves. I have been to many graduations in est, and this one had to be one of the most inspiring experiences I have ever had. At about 6:30 PM the trainees were joined by more than 50 graduates from the Santa Maria and Lompoc area, who were specially cleared by the prison authorities to be there when no other visitors are allowed.

After Ted talked about where it all began, he closed the training by sharing his experience of his relationship with Werner and reading from Werner's Aphorism Book: "If God told you exactly what it is you were supposed to do, you would be happy doing it no matter what it was. What you're doing is what God wants you to do. Be happy."

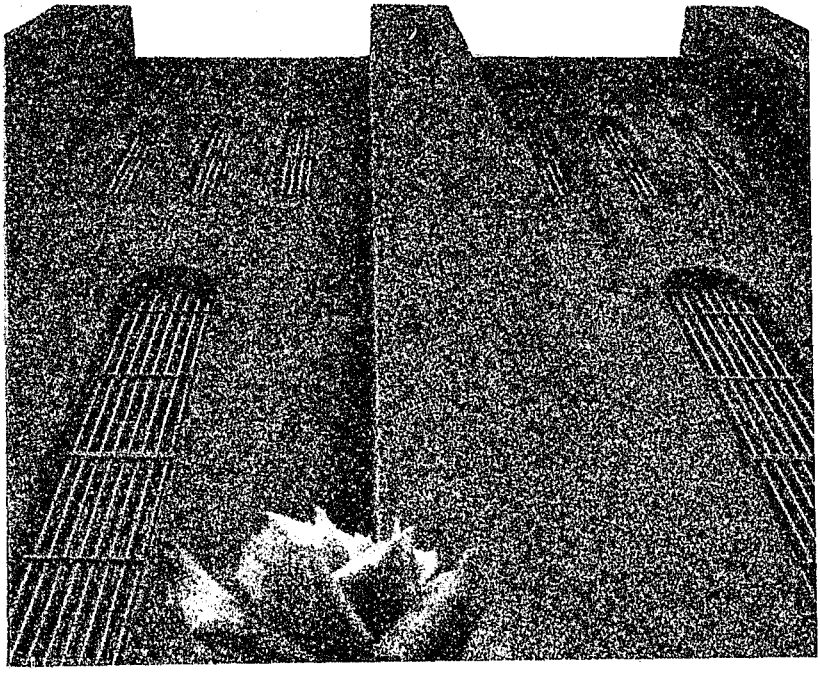
After all the trainees had become graduates, people refused to go away; the feeling of love and communication in the room was so intense that I have rarely experienced anything like it. The graduates walked around getting to know one another, laughing, sharing, swapping stories, hugging. All differences disappeared. There was no outside or inside. . . no prisoners or visitors. . . there was just the commonly shared experience of knowing who's responsible for it all.

I overheard one new graduate say, "I am now the guru of my whole unit. I got sixty guys following me around asking me questions about the way things is. They say to me, 'Hey, September, say it again what you said before,' and I say it again, and they say 'Yeah, right on!'"

We were about to leave when Bobby came over to Ted and stood there, without his glasses for the first time. He moved close to Ted, took his hand, muttered and stammered something under his breath and hurried shyly away. "What did he say?" I asked. Without taking his eyes off Bobby as the inmate walked away, Ted said, "He told me he loved me."

About the author:
Neal Rogin grew up in Chicago, where he worked as a copywriter and television producer for several large advertising agencies. He came to the Bay Area on a freelance writing assignment in 1970 and has been here ever since. Neal took the training three years ago, and in September of last year, joined est as a staff writer.

"Nothin' This Good Ever Happened to Me Before!"



As we approached, the prison loomed larger and more formidable. The thought of going in and never getting out flashed hard across my mind.

The training recently conducted at San Quentin State Prison was clearly a direct result of the graduates' love, support, and participation and of the San Quentin trainees' willingness to confront their own lives.

I assisted at the training and would like to share my experience of it with you.

Gary Clarke – est Staff

The Prison

San Quentin, across the Golden Gate Bridge and 10 minutes north, looks like an old high-walled fortress standing sentry on a strategically located knoll overlooking San Francisco Bay. Miles beyond, clear and sharp, is the city, its close-knit network of buildings rising cleanly into San Francisco's unique skyline, the familiar Bay Bridge stretching to Oakland, and sailboats, hundreds of them, dotting the large expanse of water between there and San Quentin Prison.

It was my first visit and I was nervous, apprehensive. As we approached the gate, I suddenly had to go to the bathroom.

This was to be the first *est* training in San Quentin, and was conducted as part of *est*'s public service activities. It had come about through the support of government officials in Sacramento, members of the California Department of Corrections and administrators of the Federal Prison at Lompoc where two *est* trainings have been successfully conducted. Now it was happening at San Quentin, one of the highest security prisons in California, and I was to be a part of it. Mixed emotions? Absolutely!

The prison was truly fortress-like, with its faded yellow walls curving and disappearing around the tip of the knoll. A lighthouse-type guard tower beyond the second gate guarded the main entrance into the yards. As we approached, the prison loomed larger and more formidable. The thought of going in and never getting out flashed hard across my mind.

We were machine-scanned for anything metal (even cigarette package foil is detected), cleared and let "inside."

Bleak, sparse walls and grounds. Buildings rising behind buildings rising behind bungalows. The main wall, for as far as we could see, had large coils of barbed wire attached to its top. Above that—a catwalk and manned guard tower. We passed some cons*. Closed, yet curious, wondering.

*"Cons" is the accepted term used by inmates and guards when referring to prisoners.

The Room

Definitely a challenge. The prison was built in 1852 and this could very well have been the first building or at least the second. A large hangar-type structure with a forty foot ceiling. Heavy crank-open windows on each of the side walls. On the front wall, a large stage, curtained-front and open sides. On the back wall, the scullery: a long, low, fenced-in area where dishes are washed, facilitating the kitchen in the adjoining building. It reminded me of a dog-run. Perched on top of that was a small, make-shift projection booth. The room was half-filled with a hundred or more long, heavy lunch tables with attached benches, enough to seat 600 to 800 convicts with plenty of room left over. Fastened to the ceiling, directly overhead, was another catwalk and guard station.

We partitioned off a section of the room with folding screens, laid carpet and set up chairs, tables and the platform. When we were finished the area was ready for the next day and looked pretty damn good. As one graduate said later at graduation:

"It looks like a little island of consciousness."

We left feeling pretty satisfied with what we'd accomplished.

The Training
Tuesday • Day 1

We arrived at 7:00 AM and met in the prison coffee shop (bacon and eggs: 90¢) across the street from the main entrance. There were eight of us. Ted Long was going to do the training with Stewart Esposito assisting him by conducting some of the processes. Joe Roza was the Training Supervisor and David Norris, *est* staff member, was liaison between *est* and the San Quentin Administration.

The scheduled start time was 8:30 AM. By the time we signed in, were searched, had the backs of our hands stamped with "black-lite" sensitive ink and finished some last minute room setup, it was 9:00 AM before we were even able to open the doors.

The trainees,black,white,Chicano, Indian, Oriental, were let into the room where they gave their names and numbers to three members of the Special Security Force (or "Goon Squad", as they liked to be called) who carefully recorded it all. The cons seemed almost nonchalant as they picked up their nametags and gave the room the once-over. I found it amazing the way they could take it all in and still appear detached. Some seemed excited but most just sauntered by as if to let me know that they were going to do it their way. So, of course, it was I who had the first confront of the training.

Burt* (30, in for life) took a chair from the logistics table at the back of the room.

Gary: "Where'd you get that chair?"
Burt: "Back there."
Gary: "What's it for?"
Burt: "To sit on."
Gary: "Are there any chairs up front?"
Burt: "I want this one."
Gary: "Okay, what I'd like you to do is put that chair back and sit in one of the chairs already set up."
Burt: "Yeah. Well, I want *this* chair."

Burt started to walk off with it and I moved in front of him. He wasn't pleased.

Gary: "I know you want that chair, Burt, and what I'd like you to do is put it back and take one that's already set up."

Burt's ears were beginning to smoke.

Burt: "I want *this* chair, *Gary*, and . . ."

Joe Roza—huge, imposing Joe Roza—walked up.

Joe: "What's the problem?"
Gary: "I . . . ah . . ." (I'm always glib in a crisis.)
Burt: "I want *this* chair and this *gentleman* says put it back and sit . . ."
Joe: "Take it."
Burt: "Huh?"
Gary: "Huh?"
Joe: "Take it."

Burt took it and sat in it. Joe reminded me that the ground rules hadn't been read yet and agreements hadn't been established. In retrospect that was very clear. But standing there, thinking Burt was going to tie my nose in a knot, it wasn't so clear.

Their job complete, the "Goon Squad" left the room, closed the heavy steel door and locked us in. It was the only way out and my thoughts raced to stories I'd heard about riots that had taken place in that very room and of the "Hostage Policy" that states if you're taken hostage, the prison makes no deals for your release. High up on the walls were forks, dinner forks, dozens of them, deeply imbedded in the acoustic tiles, remnants of skilled target practice.

It was 9:15 AM. Everyone was seated and the training began.

*All trainees' names have been disguised.

"I'd like to find out why I keep puttin' myself back in here!"

Stewart read the ground rules for 30 minutes to the usual amount of resistance. Some items Stewart didn't dwell on, "Rides and Places to Stay," for example, went very quickly.

Ted took the platform and hostility showed up in a hurry as his role as trainer was tested with every question. Personalities and positions manifested early-on as various trainees stood and challenged Ted with their anger, skepticism, indifference, wisecracks and more.

Eight San Quentin staff members participated in the training. Two psychiatrists, three counselors, a psychologist, a teacher and a student intern. Donna (28, family counselor) was the only woman in the training.

About noon, Burt, my friend with the chair, insisted on talking without raising his hand and was adamant about it. Ted reminded him of the agreements and that one of them was raising your hand if you wanted to talk. Burt wouldn't do that so Ted invited him to either keep the agreements or leave the training. He seemed a bit surprised at the simplicity of the choice, thought a moment and left. At this point the trainees began to get that it made no difference to Ted if they took the training or not. (I was told later that about here some of the cons realized that this wasn't their usual, run-of-the-mill, "do-gooder" program.) The questions began to take on a little more "meat" as the personalities continued to emerge:

Lazrus (31, tall and well muscled. Almost always wore sunglasses. 10 years):

"Seems like what you want us to do is lay down and let 'em keep knockin' our heads."

Warren (38, average build. Broken out of many prisons, taken hostages. Life—no parole):

"I'd like to find out why I keep puttin' myself back in here."

B.J. (25, 5' 10", muscular. Always wore sunglasses. Life):

"I only came to this thing to see what you had to say."

Chuy (25, 5' 9" and wiry. Still limping from bullet wounds in his legs. Life):

'If your life's so good, how come you got gray hair?"

Cletus (40, small and wiry. Feisty, like a bantam rooster. 15 years):

"Don't keep tellin' me what to do!"

Leon (33, tall, wiry, muscular. Always wore sunglasses. Life):

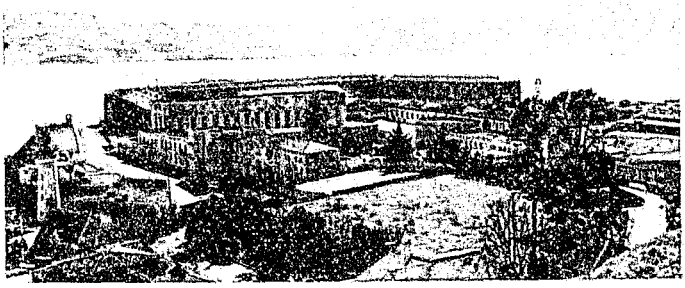
"This sounds like more of that COP-ology* shit!"

Other factors contributed to the space of the training. Three times a day, after each prison "feeding," the scullery dishwashers were manned and operated. Large tarpaulins covered the area and, while no one could see in, the rattle and clatter of pots and pans came through loud and clear. Periodically, the near-deafening "whoosh" of high-pressure steam hoses (used to scour the harder-to-clean kettles) would intrude into the room through the windows behind Ted. Outside the windows on the opposite wall was the recreation yard, loudly occupied most of the day. And then the "Goon Squad" would come in three times a day to take a body count, regardless of where Ted was in the training.

For the rest of the day, the training was a roller-coaster, hitting both extremes often. And Ted kept putting it out there. Relentlessly. Pressing. Constantly pressing. Jumping off the stage into the midst of the hostility for a nose-to-nose confront with Lazrus, or Crown, or B. J., or Freddie—anyone—and totally willing to have whatever might happen, happen.

The day ended and we'd all moved through a lot. Trainer, trainees and logistics team. For sure I had. I was uncomfortable, drained, afraid and diligently looking for a reason, any reason not to come back. Who the hell needed it? The noise was intolerable. I was sure the cons didn't want it! And I was just as sure that no one cared if they "got it" even if they *did* want it. So what's it all for?! Just then I peeked up out of my mind and saw Gil (47, life) going over some of the "wake-up" process instructions with Stewart. Chuy and Beto (35, life) walked by, deeply involved in a discussion about "it being the way it is." Then I remembered Werner dropping in earlier that evening and talking to the trainees and being absolutely willing to have that training be any way it was. Ah,

*COP-ology is the term cons use when they think the prison planners are trying to teach them something that the cops want to use to make them behave.



LIFE Photo

San Quentin State Prison as seen from a nearby hill

**Ted allowed *no* guards in the room.
None on the catwalk and none listening in.**

what the hell! The last thing I needed in my life was another incompletion. I was coming back. And it was funny. As soon as I got I was coming back, I was excited again.

Wednesday • Day 2

We had to wait to get into the prison and the training didn't start until 8:45 AM, fifteen minutes late. Stewart opened by inviting the trainees to share about their homework processes. Hands shot up all over the place:

"I woke up at 5:30 and my body woke up, too."

"I woke up at 6:00 and I programmed myself not to get tired 'till midnite."

"I set my alarm for 6:00 and I woke up at 5:00. What happened?"

"You woke up at 5:00, sucker, that's what happened."

They were all having fun with it. All except B.J. He had his hand up for a while then put it down. A moment later Stewart called on him.

Stewart: "B.J., did you have a question?"

No answer.

Stewart: "B.J. You had your hand up. Did you have a question?"

B.J. just sat. Openly defiant.

Stewart (Moving down into the aisle): "I asked if you had a question."

B.J.: "Never mind."

Stewart: "Did you have a question?"

B.J.: "Forget it."

Stewart: "The agreement is to stand up when you talk. Stand up."

B.J. looked around at his friends, his expression seeming to say, "Can you believe this guy?" B.J. stood.

B.J.: "I said forget it."

Stewart: "The question was, did you have a question?"

B.J.: "I forgot."

Stewart: "*Did* you have a question?"

B.J. shot another incredulous look at his friends. There was a hint of threat in his response.

B.J.: "I changed my mind, man, so just leave it be."

Stewart: "Did you have a question?"

B.J. can't believe it.

B.J.: "Yeah! I had a question! I told . . ."

Stewart: "Good. Thank you."

B.J. sat down, still not believing it.

Stewart: "What's the upset?"

B.J. (Surprised. Thought it was over.): "What?"

Stewart: "What are you pissed off about?"

B.J.: "Oh, *man*! I told you . . ."

Stewart: "Stand up."

B.J. looked hard at Stewart then slowly, deliberately, got to his feet.

B.J.: "All right, man! Enough of this chicken-shit game. Why don't you just go on with the training?"

Stewart: "This is the training, B.J. What are you pissed off about?"

B.J.: "If I was pissed off, you'd be the first one to know it."

B.J. sat down.

Stewart: "Stand up."

B.J. (Sitting): "Back off, man! You're liable to get hurt!"

Stewart: "Stand up or get your ass out of the training!"

B.J. was beginning to fume. He stood.

B.J.: "Look! I don't . . ."

Stewart: "The question was, what are you pissed off about?"

B.J.: "I ain't pissed! So fuck off!"

Stewart: "You're full of shit, B.J. *And* you're a fuckin' liar!"

B.J.: "I'd like to have you say that to me outside, jack!"

They were standing almost nose-to-nose.

Stewart: "Exactly! You're standing there, ready to rip my head off and telling me you're not pissed off. You can't tell the truth so that makes you a liar! You're a liar, B.J.! Get it!"

B.J.: "Look, mother-fucker! Get off my case! Get back up on that stage and do your mother-fuckin' training!"

Stewart: "We're doing the training, B.J. Your training. This is the part where B.J. gets he's a liar and full of shit!"

B.J.: "I ain't tellin' you . . ."

Stewart: "Are you pissed off?"

B.J.: "Bet your ass I'm pissed off!"

Stewart: "And are you pissed off because I didn't call on you when you had your hand up?"

B.J.: "Yeah, I'm pissed off 'cause you didn't call on me when . . ."

Stewart: "*That's* the truth! Congratulations, B.J. Thank you."

B.J. sat down. The room lightened up. And on it went.

The Guards

There are two types of guards at Quentin. One mans the guard towers and entrances, carefully checking who comes and goes. The other is referred to as Special Security or "Goon Squad." This group wears khaki jump-suits and paratrooper boots and is trained to deal with any insurgence or rioting. Should any occur, the "guards" are to stay out of it and call the "Goon Squad" immediately. The "Goon Squad" keeps the peace and the cons know they'll do anything that's necessary to keep it.

Ted allowed *no* guards in the room. None on the catwalk and none listening in. It was further agreed that when it came time for the mandatory body count the guards would allow Ted (or Stewart) enough time to prepare the room. That arrangement worked perfectly.

The verbal jousting for the rest of the second day was loud, barbed and varied. Lazrus' fury had subsided for the most part, but B.J. was still going strong. Orin (25, 10 years) had uncovered some childhood fear. Carver (42, life) questioned the value of telling someone the truth if it hurt them. Girard (30, 10 years) shared how mad he was at Ted and watched his anger disappear in the communication.

During another set-to with Lazrus, Ted pressed him to get that "owning things the way they are is having your life work." In the midst of the exchange, Jarvis (36, 6' 3", cool, out in 28 days) raised his hand. Ted called on him.

Jarvis: "Say, Ted. D'you mind if I say somethin' to my brother, there?"

Ted said okay and Jarvis put it in the language of the yard.

Jarvis: "What the man is tellin' you is that you don't need to get your head knocked doin' what you're gonna end up doin' anyway. See, I got no hassle with the Goons, know what I mean? I mean I know if they want me to move down the way a piece, sooner or later, one way or the other, they gonna have me down the way a piece. Now I can either move down there on my own or end up down there with a lump up-side my head. So when I spot the Goons movin' in, I ask how *far* down the way they want me to move, and man, that's where I move. See? I win. The Goons know there ain't no fun roustin' me. So they go lookin' for one of *you* assholes to beat on."

Lazrus got it. Others did too. And the training went on.

The Danger Process put cracks in a lot of acts. Even the tough ones with all the layers. And seeping out through the cracks, a drop at a time, were sadness, fear, grief, and more of the stuff they'd suppressed for who knows how long. It was a life and death struggle for some. B.J. with his "tough guy" number; Car-

"What the man is tellin' you is that you don't need to get your head knocked doin' what you're gonna end up doin' anyway!"

ver still battling with his religious convictions; Mandrake (25, life) afraid *not* to stand at attention; Bear (40, life) the permanent hardness on his face beginning to melt; and on and on and on till the day ended.

When the "Goons" opened the door to take the cons back to their cell blocks, it was clear to me that things were different. The cons were all, to varying degrees, taking a look at their lives from a new point of view. Some of what they saw they liked, a lot they didn't. We'd started with 94 trainees; there were now 71 and I had no idea if *any* were going to show up on the following Tuesday. Well, we'd know in six days.

Tuesday • Day 3

The day was bright, clear and already warm. Ted was high as a kite as we discussed the coming day over breakfast. In fact, we were all rarin' to go. We even had two extra logistics people, Lloyd Fickett and David Fisher, who were going to handle microphones (we hadn't had mikes the first two days).

Once again we weren't admitted until after 8:00 AM and the training began at 8:45. Fifteen minutes late. The cons looked to be in good shape. Stewart commented to me how much their faces had "opened up" and it was validated in their sharing:

Peter (28, life): "I like me a little better."
Lenny (25, 6 years): "Now I know what my wife meant when she said marriage was a heavy commitment."
Dean (31, life): "I remembered my dreams. I never did that before."
Jackson (28, 10 years): "I was upset with what you said about my mama dyin', so I asked myself how come. Then I seen they was only words. And I don't need to get upset over words. 'Specially your words. *Your* words is *your* problem."
Wesley (24, 3 years): "My life's better. It's just like the one I had yesterday but today it's better. And it's better 'cause that's the way I want it."

In a discussion about fear and the Danger Process, B.J. told Ted that he hadn't been afraid. Ted said fine and asked B.J. to take another look. B.J. wouldn't look, Ted pressed him and the discussion turned immediately into a heated confrontation. The more Ted pressed, the more resistant B.J. became. The more resistant he became the more he refused to stand or use the mike when he talked. The situation went immediately to the basic, fundamental agreements of the training which B.J. refused to keep. Again Ted made the choice a simple one:

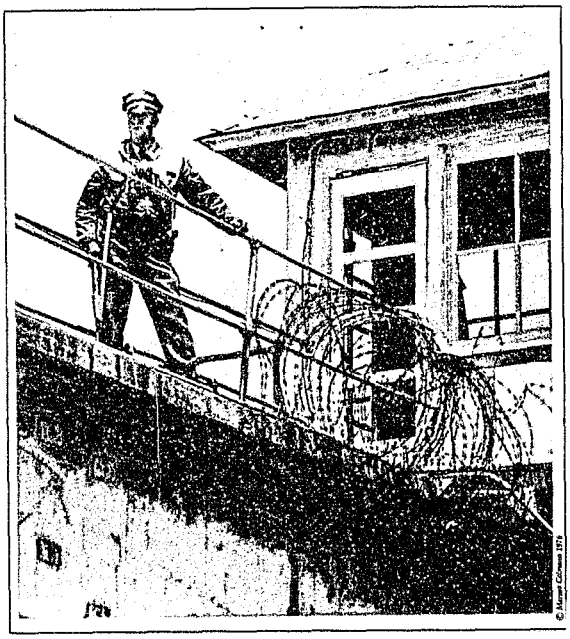
> "Either keep the agreements or get the fuck out!"

It looked like a hard, hard moment for B.J. He was furious. He had no one's agreement and it was clear to me that no one in that room cared if he stayed *or* left. Someone said:

> "Do somethin', man. I wanna get on with this thing."

B.J. had himself in a box and it was difficult for him to keep it all together. He shot a scathing look at Ted, another to the room and walked out. The sharing continued:

Girard: "Y'know? It doesn't matter *what* I believe. It's always gonna be just the way it is."
Leon: "I ain't sayin' I go along with what



"Y'know? It doesn't matter what I believe. it's always gonna be just the way it is."

© Marvin Collazo 1973

you say but there might be somethin' to it."

Warren: "It wasn't all that bad when I found out I was an asshole."

Thirty minutes later Joe Roza walked in the room. B.J. was with him. (I found out later Joe had spent that time confronting B.J. on his agreements.)

Ted: "Joe! I don't want him in here if he's not perfectly clear on the agreements and willing to keep them!"

B.J. sat down. A moment later he raised his hand.

B.J.: "I got mad 'cause I thought you were layin' somethin' on me. I thought you were tellin' me that I was scared *then*, right when you were talkin' to me. An' I wasn't. I was mad. I see now you were askin' was I *ever* scared. The answer to that is yes. Just now, comin' back in here, I was a little bit scared. So if it's okay with you I'd like to stay around."

Ted: "I'm glad you're here, B.J."

B.J. (to the room): "An' if any of you guys object to that, I'll see you outside. Know what I mean?"

The cons started letting go of more and more of their stuff. The hostility that *was* still there was now aimed at "getting down to it." Even the kitchen and the steam hose noise, filtering into the room louder than ever, began having its own place in the training. It was all moving ahead and the cons were actively sharing themselves and digging it. For them, even Donna, the one woman in the training, was not the novelty she had been for the first two days.

Ted did another process where the trainees walked around the room "being" with one another, possibly the first time most of them had ever done anything like that. For sure they hadn't tried it in the yard.

Mandrake: "I don't think that'd be a smart move, Ted."

Ted: "What's that?"

Mandrake: "Walkin' up to some brother in the yard and sayin', 'Scuse me, bro. I just thought I'd come over here and BE with ya. Y'know, so I can move through my barriers.' I say that to some brother in the yard, he's gonna move through my teeth with a two-by-four."

The general consensus was that they wouldn't try that in the yard for a while. Their enthusiasm grew as others shared about the process.

Dean: "I kept judgin' everybody. I don't know if I can give that up."

Wesley: "I only liked them if they were clean, or smiled a certain way."

Gil: "I started out being self-righteous. Then I got what I didn't like was tattoos or people who had 'em. Now they're okay. Funny, huh?"

Carver: "I kept seein' me in everyone."

William: "Goin' 'round lookin' at everyone I seen how I never been with anyone. Man! You know how many years I fucked away?"

Lazrus: "I seen I got somethin' goin' on with the fellas. Ladies is all right. But I got to prove somethin' with the fellas."

The discussion about "reality" took us well into the evening. I mentioned before that the day had been warm. It was. Then it got hot. From noon to 5:30 the temperature in the room was a constant 92° and we felt it. Usually that condition, under those circumstances, would promote tension and flaring tempers. But it didn't. A few shirts came off. Some shoes. That's all. It was just another part of it.

They seemed to put *everything* into "building their centers." I mean, they really got into it.

Crown: "I built something I always wanted. A conference room. You know, where I could make problems and solve them. I didn't feel like a loser."

Lamont: "I never had any rapport with my mom. We talked on my phone and I got a better understanding of her."

Leon: "I fucked up. I built this great place, just the way I wanted. Put all my good stuff in it. It was *fine*, y'know? Then I forget the goddam windows."

Ted: "Tonight, when you're in bed, go back into your center and put them in."

Leon: "Yeah? Can I do that?"

Ted: "Sure."

Leon: "All *right*."

Leon was pleased.

Chuy: "I don't usually share, but I built my center really high. I put in all the things you said. Then I got through and I was sitting there, looking down on the people. I didn't have nothing to do so I gave myself a fix."

10:30 PM. Things were moving along beautifully and the training was working. It was in the middle of a process—with daisies. Then an interesting thing happened.

Stewart had the trainees right in the middle of climbing their daisies when David Norris informed him that it was time for the count and the "Goon Squad" was waiting outside. The cons muttered their objections to the interruption.

Stewart: "It's okay. Hold it right where you are, keep your eyes closed and stay in the process. We'll go on after they take the count. Don't worry about it.

"My life's better. It's just like the one I had yesterday but today it's better. And it's better 'cause that's the way I want it."

They won't know what you're doing anyway."

They seemed to like that idea. The "Goons" were let in and this was the picture: Sixty-one trainees, most of them "hardened" criminals, standing in the middle of that huge room, eyes closed, grinning broadly (some even giggling), holding various daisy-climbing positions, while three unsuspecting members of the "Goon Squad" walked among them and counted. Leroy, eyes closed and "basking in the sun," called from across the room:

"Don't forget me. I'm up here on my leaf."

It was definitely the fastest count the "Goon Squad" ever took.

Wednesday • Day 4

I was sitting with Ted while the trainees were coming into the room. Cletus stopped by the table.

Cletus: "'Mornin', Ted. Got a minute?"
Ted: "Sure, Cletus. What is it?"
Cletus: "Gotta tell you what happened this mornin'."
Ted: "Okay."
Cletus: "Remember me talkin' about them guards that was always hasslin' me in my shop?"
Ted: "Yes."
Cletus: "Well, I did what you said and it worked."
Ted: "What worked?"
Cletus: "Well, they came in to check things out, like they always do, an' that always used to piss me off. So I got to thinkin' 'bout what you said, 'bout diggin' things the way they are. So I says, 'Mornin', boys. How 'ya doin'? How 'bout a cuppa coffee? Just made it fresh.' Well, that put 'em in shock right there. They were seein' the new Cletus and didn't know if they should shit or go blind. One said somethin' 'bout bein' late for somewhere, the other one said, 'Oh, yeah. That's right.' an' they split. But they was different splittin' than they was comin' in, know what I mean? I mean I know the next time they come in, we gonna rap together over coffee."

8:30 AM. The training started on time.

The space of the training was safe and the cons were beginning to know it. And that's how they shared themselves.

Leroy: "I been goin' around not likin' 'Q'. Know what? 'Q' don't give a shit if I like it or not!"
Lazrus: "I always thought it was healthy to worry. Like worryin' might keep you out the way of a bullet. I don't need to worry. I just need to keep out the way."
Willfam: "I spent a lot of time wanting what I didn't have and not likin' what I *did* have. That's stupid! If I'd start likin' what I got I'd be in great shape."

I saw B.J. actually laugh at *himself* when Ted pointed out his perpetual preoccupation with sex.

All the usual stuff was there. Pain, confusion (Carver left), resistance, upset, unconsciousness, etc. And they stayed with it. Somebody would nod off a bit, wake up and be right back in it.

The room, or more accurately the space and the people, was transforming right there in front of me. There was a moment when I felt very special just to be there and be part of it.

7:30 PM. Twenty graduates, twelve men and eight women, arrived to assist at graduation and direct the trainees in their Personality Profiles. As they walked in and took their seats in the back of the room, the ladies in the group were openly and thoroughly appreciated.

The graduates, in for the last few hours of the training, were moved by the sharing and swept up in the fun of it. They, and the cons, were clearly anxious to get to the Personality Profile.

There was a powerfully moving moment when Ted shared an excerpt from Werner's Aphorism Book:

"I know that you know I love you,
What I want you to know
Is that I know you love me."

At that moment all that existed in that room was an exchange of love between us. And everyone knew it. Some of the trainees were embarrassed, even blushing, when they realized what was going on.

As the trainees completed their Personality Profiles, they moved out of the training area, received copies of the Aphorism Book and *The Graduate Review*, and were invited to join the "old" graduates for coffee.

Turner was sitting on the stage, smiling to himself, his legs dangling off the apron. I walked up to him.

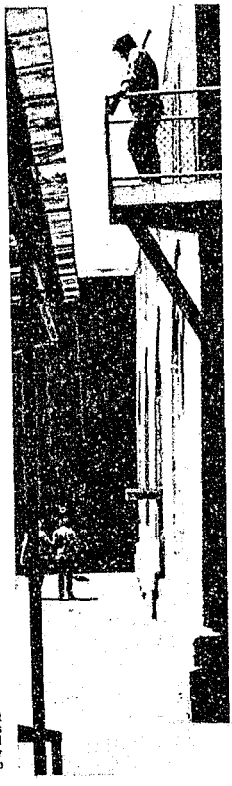
Gary: "How did you do?"

He looked up, grinning.

Turner: "Hundred percent."

We talked and he shared some more.

Turner: "I know now what Ted meant about some people not lettin' themselves cry. It's all stuck right here (he indicated his throat). I guess I'm not quite ready yet. Nothin' this good ever happened to me before."



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est trainers Ted Long and Stewart Esposito in their San Quentin T-shirts, produced in a prison shop by one of the graduates of the training.

"I came in here to 'get' Ted. When I seen I couldn't do that I just kicked back and got the training instead."

Warren was talking to Charlene Afremow, one of *est's* trainer candidates, and said:

> "Whenever I was in prison it was always a trap, so I'd escape. Except when I was out, that was a trap, too, so I'd do something to get thrown back in prison. I never knew 'till now it was *me* makin' it that way."

Chuy asked Lloyd:

> "If I put 250 people together for a training, how much is my commission?"

Beto asked Bob Curtis, an *est* staff member, how he could get *est* into Mexico.

Lazrus told Nancy Foushée, also on staff:

> "I came in here to 'get' Ted. When I seen I couldn't do that I just kicked back and got the training instead."

I turned around and saw Warren hugging Ted. He no sooner moved away than Bear stepped up for his hug. Bear! —who (I was positive) hadn't smiled for 15 years, was hugging Ted! A lot of guys hugged Ted. Some didn't. B.J. didn't. Said he wasn't quite there yet. But he did shake hands a lot.

We started breaking the training room down and some of the cons pitched in. The "Goon Squad" arrived, called for the first of three groups to be taken back to its block and directed them to gather just outside the door where our truck was parked. They seemed somewhat bewildered by the space in the room. The talking, joking and laughing were still going on and the cons were hanging back for as long as they could. The "Goon Squad," watching it all, seemed moved by the interchange and, as if wanting to contribute, allowed the cons that extra bit of time. The good feeling in the room was definitely contagious.

One particular incident pinpointed, for me, where the trainees were. We were all loading the truck and exchanging good-natured jibes with the "new" graduates. I was behind Linda Esposito, Stewart's wife, who was carrying some screens. A dozen or more cons were standing around as she waited to unload her armful. She kidded them:

> "Look at that. A bunch of big, strong men just standing there while this poor, frail lady has to struggle with this awful, heavy load."

One con laughed and shot back:

> "That's the way it is, baby."

The group laughed and another con said:

> "Yeah. How come you set it up like that?"

I noticed that the *est* training had come to San Quentin.

[Paper Presented at University of Georgia Symposium on Group Procedures, 1974]

TRANSACTIONAL ANALYSIS AND ASKLEPIEION: A PROMISING ALTERNATIVE IN CORRECTIONS

(By Ted Harrison, M.S., Director, Asklepieion North Oxford, Wis.)

It has generally been accepted that successful treatment in a correctional setting is a myth and that public offenders get better in spite of prison. Historically, most therapeutic programs in penitentiaries self-destruct. It takes from eighteen to twenty-four months for this self-destructive life cycle to be completed, and even the most successful programs decay and wither away. The best programs generally have the most success with the first generation of clients.

An example of how a traditional therapeutic program in a correctional setting works follows: Consider the situation of treating a Frenchman in a once or twice a week treatment group where you are trying to cure the Frenchman of being French. He speaks only French and you speak only English. He spends from two to four hours a week with you in your office and the rest of the week lives in the French countryside. This operation would be no different from the traditional therapeutic intervention in the correctional setting.

Before continuing, I will describe a classical correctional setting. This is from the perspective of the major "game" played by people involved in the setting. This major "game" played by offenders is called "cops and robbers." There are three prerequisites needed for a traditional penitentiary: (1) a secure external boundary, (2) cops, (3) robbers (see Figure 1).

FIGURE 1

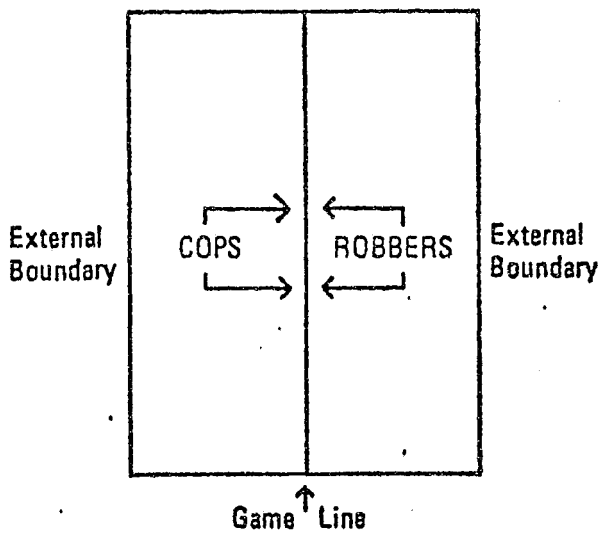

Diagram of Traditional Penitentiary

The major games in the correctional setting are played within the external boundary. This boundary in the traditional sense is the prison wall. Inside the wall, there are basically two groups of people. On one side stand all the cops and on the other side stand all the robbers. There is a very definite social line between the two groups. The major games are played across this line. Also, there are some games played across the external boundary lines, but these games will not be discussed here.

One reason traditional programs have failed in the correctional setting is that each program has tried to fit within the above described frame of reference. Since the game of "cops and robbers" is set up to maintain the two roles, it is little wonder that penitentiaries create more robbers skilled at playing the game.

A successful program, such as the Asklepieion Therapeutic Community, does not fit into classical penitentiary culture but into an environment which is like a third culture open to everyone (see Figure 2). This third culture is simply a place where people can come from the penitentiary environment and stop playing the very destructive game of "cops and robbers."

FIGURE 2

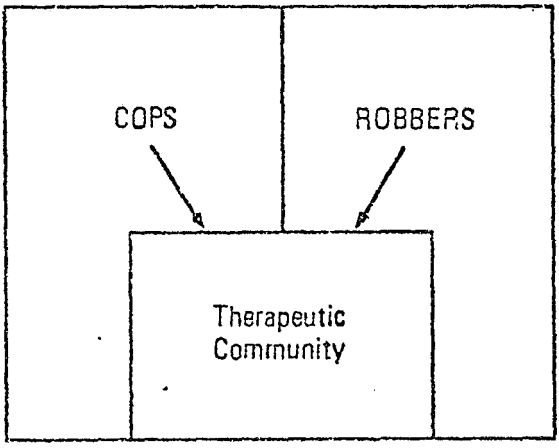

Diagram of the Third Culture in a Penitentiary

Prior to discussing the Asklepieion Therapeutic Community, I will briefly review some of the characteristics of the offenders found in the penitentiary setting. The frame of reference on which these observations are based is that of an all male, maximum security institution. This institution was designed to handle men who have consistently demonstrated that they are a behavioral problem. These people play "cops and robbers" harder than the average "cops and robbers" player and therefore represent an extreme in behavior patterns.

The first charateristic is taken from the transactional analysis (T.A.) literature. Eric Berne, originator of the theory of transactional analysis, places life styles into the three general categories of "loser," "at-leaster" and "winner." Although this is not unique to offenders, the life histories of this population tend to be primarily of the loser and the at-leaster. The loser is one who consistently behaves in such a way as to defeat himself. The general outcome of the loser is tissue damage, to himself and/or to others. The at-leaster never loses big and never wins big. In the penitentiary, his general motto would be something like this: "At least I didn't get a life sentence; at least I didn't kill somebody; at least I only got two years." The last category, the winner, is rare in penitentiaries.

Affiliation with a negative deviate subculture is another characteristic of offenders. This affiliation with a second negative culture is very important as a learning environment in which one learns how to be a better convict. This is related to an additional characteristic among offenders, namely adherence to the so-called "inmate code." This code encourages and rewards the offender to maintain distance and to fake all rehabilitative efforts under the threat of being ostracized as a "rat" or "snitch." This code is much the same as the old time "code of the West" which can be seen on the television late movies.

The fourth and most important characteristic and focus of destructive behavior is the position of "making fools of" people. This crucial feature is also the one most destructive to rehabilitation programs. Offenders spend a great deal of energy "making fools of" themselves or someone else, any program, or anythi at all. As previously stated, this "making fools of" quality is central and affects all other characteristics which I have and will describe.

The next two features are very closely tied into the "making fools of" phenomenon. Most offenders tend to have a belief that no matter what happens, or how many times it happens, they will always be given "one more chance." Another

common characteristic is the fact that most offenders received inconsistent information when they were growing up. In other words, what was right with mom and dad one day would be wrong the next day. There is little consistent information regarding cause and effect, especially regarding behavior.

Much has been written about the absence of adequate positive male role models. This lack of identification for men appears to be the lack of a positive role-model father or good father substitute during the time of puberty. The absence of "reality testing" is the eighth characteristic in offenders. This is exhibited in what appears to be a lack of thinking or problem-solving behaviors. It is quite common for offenders to react to problems rather than to solve problems.

Characteristics nine and ten in T.A. terms are having a particular destructive script and an imbalance of ego states. These concepts come out of transactional analysis. A script is a preconscience life plan (life drama or life plot) which is based on early childhood decisions. These early decisions are an attempt at making sense out of what is going on in the world. Ego states (parent, adult, child) are a basic concept in transactional analysis. Briefly, the total personality is made up of several separate and distinct ways of relating to our environment and the people in it.

The final characteristic exhibited by offenders is the limitation of time orientation—to past, present, or future. Real time consists of reviewing and recalling the experiences of the past in the present while relating to possible outcomes and consequences in the future. Any one or two of these time orientations are insufficient for being autonomous and being responsible in today's world.

The above mentioned characteristics have been observed by myself and my colleagues over a period of time. Although the correctional literature is quite extensive, little has been written about the "making fools of" phenomenon and some of the other characteristics mentioned. The next few years should produce a wealth of needed information regarding the successful treatment of public offenders.

Now I would like to describe the therapeutic community which is internationally known under the name of Asklepieion. This program was mounded by Martin G. Groder, M.D., in the United States Penitentiary in Marion, Illinois, and has limited offshoots elsewhere. The newest complete program is in the very early stages of development at the Federal Correctional Institution in Oxford, Wisconsin.

Of significant importance with the Asklepieion program is the creation of the third culture. In working with offenders, the third culture avoids the negative effects of the inmate code and "making fools of" phenomenon. This program is at all times voluntary, which is very important, because no man can be sentenced to get better. For a man to change his life style, he must want to make the decision to do so. Asklepieion is a therapeutic environment in a penitentiary system within a penitentiary. The doors are open to anyone who wishes to do something different with his life, i.e., stop playing "cops and robbers."

The residents of the Marion and the Oxford programs represent a cross section of inmates involved in those particular programs. The program at Marion, including both residents and nonresidents, involves approximately 10 percent of the population at any one time. The program at Oxford presently involves approximately 40 percent of the population.

In addition to the institution rules, the "house" rules within the program are "no violence, no threats of violence, and no chemicals." These rules are quite clear and simple. A man may be removed from the program for violation of any of these rules, or he may leave at any time of his own accord. Furthermore, he may be reinstated in the program and "start over" when he is ready. Although the residents of each program are housed in two separate housing units, they all eat, work, and take recreation within the general population.

As a therapeutic community, Asklepieion is a place where people can come, experience themselves and others, and make some decisions about their lives. Then each man can get his real needs met without losing. In addition to this therapeutic environment. Asklepieion is also a training institute. Selected inmates may do more than straighten out their own lives. If a man is interested he may choose to go into training and become a counselor or lay therapist in other therapeutic programs. Consequently, a very important part of the program is the training of lay therapists. Here a man may learn transactional analysis and may become an efficient and competent therapist. This not only provides an offender with a very useful vocational skill but also provides the program with potent and positive role models. Several inmate therapists have gone so far as

to be recognized by the International Transactional Analysis Association as advanced members. Specifically, three are currently clinical members and one is currently a teaching member in ITAA. Three of these members are still doing time. There is an equal number of inmates who, at this time, are candidates for advanced membership.

The final portion of this paper will be devoted to describing how the program works and the therapeutic methods used within the program. First, I will describe how a man becomes involved in the therapeutic environment; then a discussion of the various program methods will follow.

As mentioned previously, the program is and always has been voluntary. A man may become interested in the program as a result of contact with the program staff members or with other members of the inmate population. The interested potential members are referred to an orientation group. These orientation groups are run by and consist solely of inmates who are already involved in the program. During the orientation "rap groups," a new man will receive information about the program and how it works, how the program may or may not benefit him, and some basic information about transactional analysis. The orientation period is officially referred to as the "non-resident" program. Toward the end of a non-resident period, approximately thirty days, a man will be exposed to confrontation groups. By the end of this period, each man should have enough information to make an intelligent decision as to whether or not he wishes to join the therapeutic community. If he still desires to be a member of the program and we find no reason (involvement in any illegal behavior in the institution) to reject him as a member, he will be moved into the housing unit designated as the therapeutic community.

Once a man moves into the housing unit, he is considered a resident member of the program. Again, as I mentioned before, a man may decide to move out any time he wishes, or he may be removed from the resident program and required to start over as a non-resident for violation of any of the house rules. Later on, if he decides and is interested in being a para-professional, he may go into training. This requires that he become more involved in the unit and participate in the training part of the program. The training portion of the program is over and above the treatment program.

Finally, I will discuss the various program methods. For this I will present a sequence of behavioral areas in which there is generally a need for change. Then I will mention the methods we use in the program to produce change. The six behavioral areas in which there is a strong need for change are as follows: (1) social control; (2) psychopathology; (3) awareness; (4) thinking; (5) human concern; (6) the free community and contact women. Generally speaking, Asklepieion is a transactional analysis therapeutic community. A basic concept in T.A. is that the therapist has a clinical and moral obligation to do whatever is necessary to get his patient better, in a crisp, efficient, and ethical manner. What this means is that in Asklepieion we use any method that works, and use it all within the framework of transactional analysis.

The first behavior area in which there is a strong need for change is social control. By this I mean that a man is in control of his behavior and that he is not involved (nor will be become involved) in any of the illegal behaviors in the penitentiary. It is not necessary that a man know why he behaves the way he does or how he feels about it. It is only necessary that he control his behavior. A primary concept in the therapeutic community is that everyone is responsible for his behavior and the consequences of that behavior, both the foreseen and the unforeseen.

The primary method used to confront people about their behavior is called the "Game." The "Game" is a concept borrowed from Synanon. The "Game" is not only used to confront negative behavior but is also a major tool for maintaining what was referred to earlier as the third culture. The "Game" is also used for confronting phony images and is a positive tool for working on the negative prison environment with its expectations of negative behavior.

By psychopathology, I am referring to the self-destructive behaviors, the unresolved remnants of childhood, as well as distorted perceptions of the present and destructive expectancies of the future. Although the "Game" is a method of confronting psychopathology, the most common method used in Asklepieion is the transactional analysis treatment group. These treatment groups are run by program clinical staff, visiting transactional analysis consultants, and advanced inmate lay therapists. These groups may be scheduled at regular periods within

the week or may be scheduled around certain points experienced by various community members. Occasional marathons are used as part of the treatment program.

The third behavioral area is awareness. Offenders are generally unaware of what they are doing, as well as unaware of the consequences of their behavior. To resolve problems in this area, in addition to the methods previously described, we use sensitivity, Gestalt, and psychodrama methods, which are very much "here and now" oriented.

Most offenders have "don't think" messages, and this is evidenced by a lack of reality-testing and problem-solving behaviors. In addition to the above methods, we use a particular kind of group called a concept game. A concept game is much like an organized college bull session which encourages a man to think and observe and quite literally is an exercise in abstract thinking. In addition to these particular kinds of groups, we provide a variety of classroom courses. One particular course which is required of all residents is a basic course in transactional analysis. We encourage the men to become involved in the institution education program as well as teach our own courses. These include anatomy, physiology, psychiatry, psychotherapy, psychology, and growth and development. The last group of courses are designed primarily for those who are involved in the lay counselor training program. The final step which we use is to encourage those men who are considered advanced students to begin teaching specific portions of courses to some of the newer students. This is not only an exercise in the thinking processes; it is also a very effective method in teaching responsibility to and for others.

Human concern is the next behavioral area. For this, the "Game" is most important in getting people to realize that they are responsible, not only for themselves but also to their brothers. We use the Asklepieion Training Institute and special workshops in transactional analysis to encourage concern and responsibility for civilian strangers. Teaching and experiencing clinical responsibility for each other and for people other than offenders is oftentimes not only a new experience but a very important experience for those in training.

The final behavioral area, the free community and women, is related to the area of human concern. The methods used to resolve conflicts in these areas are generally the training institutes and special T.A. workshops, which are put on for civilians (men and women who are either students or professionals in the field of education or corrections). The fact that a portion of the people in these special training workshops are women is very important, since most of the men have never been involved in a positive relationship with a female.

In conclusion, this paper has been devoted to discussing some general observations about the correctional settings (a penitentiary) and some observations about offenders. I have also discussed how a particular therapeutic program can function in this setting and achieve its goals—that is, the correction of the offender. The program discussed here has been primarily that of the Asklepieion Therapeutic Community, located at the U.S. Penitentiary in Marion, Illinois. For a description of the newest program in the Bureau of Prisons, refer to Attachment 1. This is section 1 of the Master Plan for the Transactional Analysis Unit at the Federal Correctional Institution in Oxford, Wisconsin. As stated earlier, this program is in the very early stages of development and will be in operation sometime within the next month.

ATTACHMENT 1—FEDERAL CORRECTIONAL INSTITUTION: OXFORD, WIS.

Transactional Analysis Unit—Master Plan

SECTION 1—INTRODUCTION: THE INSTITUTION AND ITS SETTING

A. Location

The Federal Correctional Institution at Oxford is located in rural central Wisconsin, approximately 60 miles north of the state's capitol, Madison. The surrounding communities are small and without industry and lend themselves to serving the farming needs of this rural area. There are several satellite communities within reasonable driving distance to the institution. Westfield is eight miles to the east, Adams-Friendship is thirteen miles to the northwest. Oxford

is twelve miles to the south, and Portage is thirty miles south of the institution. The facility itself is located on 640 acres of land at the corner of county roads "E" and "G" in Adams County, Wisconsin.

B. Physical characteristics of the institution

The facility at Oxford was built by the state of Wisconsin for the purpose of treating youthful offenders age 16 to 21 years. Completed in 1972, it was never opened and was acquired by the Federal Bureau of Prisons through a lease purchase agreement in 1973. There are 62 acres within the double fenced compound. In addition to a central complex, there are nine living units, each with a maximum of 56 inmates. Four of the units are designated for close custody, and five of the units are designated for medium and minimum custody.

Since very little security has been designed into the housing units, the double fence perimeter meets the primary needs of containment and control. The perimeter consists of two fences, a ten foot inner and a fourteen foot outer fence, surrounding the total institution. Ground security wire has been placed in the 24 foot space between the two fences. For additional detection of escape attempts, an infrared scanning system has been installed around the perimeter. With the exception of the Sally Port tower located at the rear of the institution, the six observations towers will be unmanned. Armed vehicular patrols will be utilized outside of the double fence perimeter. The internal security will be the responsibility of every member of the staff. The design of the central complex makes that area more difficult to supervise; therefore, the physical separation of the housing units offer the primary means of control inside the fence. In summary, the internal and the perimeter security features of the institution characterize Oxford as a medium security facility.

C. General population characteristics

Beginning December 15, 1973, the institution will begin to accept regular commitments from the courts. The target population which has been established consists of males, 21 to 28 years of age, serving sentences of 5 or more years, having no serious physical or psychiatric problems, and whose release destination is in the north central region of the United States.

When full staffing is complete, the inmate population will be approximately 450; however, with the present staff complement, the maximum population will be approximately 200. Initially, this population will be housed in the four buildings provided for close supervision.

Once admitted to the institution A & O Unit, the inmates will be closely screened into one of three categories of the "Quay Adult Offender Typology." Inmates in each category will be housed with the appropriate functional unit staff and housing facilities. In addition to the above mentioned selection procedures, a separate set of criteria will be developed to select inmates for the Transactional Analysis Unit. Each of the four unit teams will have the responsibility and the authority to direct and design a specific program to meet competently the treatment needs of the inmates assigned to that unit and to manage efficiently the programs in this institution.

In summary, the population designated for Oxford will be assigned to one of the four functional units, based upon rigorous diagnostic screening procedures. Each functional unit will maintain its identity wth respect to both treatment approach and homogeneity of population, with the exception of the T.A. Unit and Therapeutic Community, which will contain heterogeneous populations.

D. Organizational structure

Administratively, the structure of the institution management consists of a warden with two associates. One associate is designated as Associate Warden for Operation (AWO) and the other as Associate Warden for Programs (AWP). The operations division consists of Food Service, Medical Service, Business Office, Personnel Office, Mechanical Service, Safety Office, and Correctional Service. Responsibile to the Associate Warden for Programs are the Case Management Service, Mental Health Programs, Religious Services, Industries, Education Department, and the four functional unit managers.

1. *Staffing Patterns.*—The initial staff complement of FCI, Oxford, will consist of 150 approved positions for a tentative population of 200 inmates (1/1.32 ratio). Of these positions, 70 are to be filled by experienced Bureau of Prison employees transferring to Oxford from other bureau institutions. The remaining 80 posi-

tions will be filled by employees new to the Bureau of Prisons. The staff complement will be increased effective July 1, 1974, to 225 positions, and the inmate population will increase to 450 (1/1.76 ratio).

2. *Functional Unit Staffing.*—The basis of Oxford's inmate management concept is the functional unit. There will be four functional units, each consisting of two separate buildings. One building area provides a relaxed cottage type atmosphere. This physical structure denotes the minimum-medium security housing. The other building area provides housing for those who are considered to require closer custody and supervision. The Transactional Analysis Unit will be housed in two of the minimum-medium security buildings. The remaining three functional units will be housed in one close custody building and one minimum security building.

The four unit managers will be responsible to the Associate Warden for Programs. Initially, each unit manager will have a case worker, a correctional counselor, and five correctional officers responsible to him. The correctional officers will serve on rotating shifts. Even though each correctional officer will rotate to other posts, when the shift rotation requires that he be in a functional unit he will return to the one unit specifically designated for him. Therefore, each officer will be identified with one of the four functional units. When a full staff complement is reached, each unit manager will supervise two housing units. At that time unit staff will be extended to include two case workers, four correctional counselors, ten unit officers, and one clerk transcriber. In conjunction with the unit managers' formal staff expansion, a staff phychologist and an education advisor will serve each unit on a consultant basis.

E. Statement of mission

The mission of FCI, Oxford, is to contain and control while providing correction and care for young adults and adults serving long terms for conviction of federal crimes and to accomplish these objectives in an atmosphere which fosters the maintenance of human dignity, minimizes the corrosive condition of confinement, and maximizes the opportunities of each individual to achieve his full potentials: that is, to correct offenders by providing constructive growth opportunities which lead to crime-free lifestyle upon release.

F. Preliminary description of transactional analysis unit and therapeutic community

1. *Housing.*—The T.A. Unit will be housed in Columbia and Dane cottages. Each cottage unit can accomodate 56 inmates thus totaling a maximum population size of 112 for the Functional Unit, which will include a T.A. Unit and a Therapeutic Community. Each cottage, a complete separate building, contains four wings, two containing twelve rooms and two containing eighteen rooms. One day room and one latrine area are provided for each half of the cottage. There is also an office and bathroom for the correctional officer, combination office, small-group meeting room for unit management, and a clothing issue room. Each man has a key to his own individual room, which is eight feet by ten feet with an outside window permitting each man to control the ventilation in his room. Each room has a three-channel rado with a speaker mounted in the wall. Basic room equipment will include a bed, innerspring mattress, chair, desk, bulletin board, reading light, locker, and clothing rack.

2. *Selection Criteria.*—Initially, three inmates from other therapeutic communities will be transferred to this unit in order to begin the development of a core culture for therapeutic reasons. These men will be selected by the unit manager and transferred to Oxford upon approval by the transfer committee. Initially, the T.A. Unit will be voluntary and open to all. Any man wishing to participate may do so from the A & O Unit or any of the other units in this institution.

After a period of participation on an "out-patient" status, he may be accepted into the therapeutic community as a full-time resident. Eventually, inmates will need to be assigned to the T.A. program. This will be done randomly. It is furthermore anticipated that a portion of the program participants will be drug offenders.

3. *Style and Concept for Housing.*—The T.A. functional unit has two primary directions. The first is a T.A. unit, managed by using T.A. and emphasis on social control and problem solving. The second part of the program is a therapeutic community which will be designed for clinical goals. The therapeutic community is

a formal, self-governed therapeutic and total learning environment. The basic concept of this unit is to provide a 24-hour, 7-day a week setting where men who are committed to change their anti-social behavior and to help each other can come and develop a positive and constructive lifestyle. This is modeled after the Asklepieion therapeutic community at the United States Penitentiary in Marion using transactional analysis, a system of psychotherapy, devised by Dr. Eric Berne, and the Synanon-Phoenix House self-help concepts. The clinical program will be monitored quarterly by on-site consultations from Martin G. Groder, M.D.

4. *Criteria for Dropping Residents.*—Since a man may become a participant in the therapeutic community by volunteering, he may also leave voluntarily. It would be possible for a man to return to his previously designated unit after he has completed his major treatment contracts. Violation of cardinal rules, such as violence, threats of violence, or use of chemicals, will result in a man's being dropped from the program.

5. *Unit Mission.*—The mission of the T.A. unit is to provide a therapeutic environment which will allow a man to examine his life situation and make the necessary decisions about his life situation which will bring about a maximum change in his lifestyle and behavior patterns. This will be accomplished through a structure and yet highly flexible program using transactional analysis as a primary therapeutic tool. In addition to the T.A. unit, a therapeutic community is offered as an added program. Other institutional services will be coordinated and programmed for those individuals with specific needs. More simply, the mission is to correct offenders, by providing constructive growth opportunities which lead to a crime-free lifestyle upon release. An additional goal of this unit is to develop new and innovative concepts and methods for treating and working with character disorders. A training program will be established to train future correctional workers (staff and inmate counselors) to use those techniques elsewhere.

FT. GRANT PROJECT PILOT STUDY: FINAL REPORT

(By Dr. Darold L. Shutt)

ABSTRACT

Does rehabilitation work in a penal setting? This was the question addressed in a Pilot Study conducted in October, 1977 at the Ft. Grant Training Center, a minimum security prison near Safford, Arizona.

Since 1974 a joint rehabilitation project sponsored by the Department of Corrections and the Vocational Rehabilitation Services Bureau of the Department of Economic Security has been under way. The Institute for Human Development of Northern Arizona University has furnished the vocational and psychological evaluation staff under contract with VR.

Although the samples drawn from the two types of residents at Ft. Grant, those who requested VR services and those who did not, were not significantly different upon admission, they had a most significant difference one year after parole.

Those who participated in the Vocational Rehabilitation Services program had a 15-percent higher employment rate than did those parolees who had not chosen to receive VR services. In addition, 10 percent more of the non-VR clients were returned to prison during their first year on parole, 30 percent compared to 20 percent. The implications for Legislators, Bureau Chiefs and Department Directors of such results are both financially and socially rewarding.

The pilot study, conducted with small samples, was designed to determine the feasibility of a more comprehensive research project expanding the demographic factors and utilizing a large sample. Implications for further research follow the conclusion that the VR presence at Ft. Grant has a direct positive impact upon the residents who choose to participate in the rehabilitation program.

PARTICIPANTS

The investigator wishes to acknowledge with sincere appreciation the contributions made by the following: Dr. James Parks, Director IHD; Mr. Robert Koster, Counselor VRS Ft. Grant Training Center; Mr. Clifford Anderson, Superintendent Ft. Grant Training Center; Mr. Tom Tyrell, Chief Vocational Rehabilitation Services Bureau; Mr. Richard Trump, Program Manager VRS; Dr. Jud Finley, Psychologist Services Coordinator VRS; Mr. John Moran, Director,

Department of Corrections; Mr. Walter Putnam, EDP System Analyst; Ms. Maxine Jones, Records Management Supervisor DOC; Mr. Robert Lanter, Statistical Clerk II DOC; Mr. Irv Briggs, Research and Statistical Analyst I, DOC. Special thanks are extended to Kathy Jensen, VRS Data Analyst and Mrs. Kay Averkamp, Computer Programmer.

PURPOSE

A need to conduct an impact evaluation study of the success of the Vocational Rehabilitation Services project at Ft. Grant has been recognized for several years. A comprehensive study has not been undertaken, primarily because of anticipated excessive costs. The decision was made in July 1977 to conduct a pilot study at minimum cost to determine the feasibility of implementing a comprehensive study when funds became available.

GOALS

The measurement of the impact of VR services requires (1) the documentation of the extent to which the program has or has not achieved its stated goal; (2) to attribute any effects or changes that are discovered to the program or to other factors; (3) to delineate the conditions under which the program is most efficient, (i.e., those that yield maximum benefits and minimum costs); and (4) to delineate, if possible, any unanticipated consequences or side effects of the implementation of the program.

More realistic and limited goals were designed for the pilot study:

Goal 1: To research the demographic characteristics and vocational outcomes of selected VRS Ft. Grant rehabilitation clients as compared with a control group of similar subjects

Goal 2: To attribute any effects or changes that are discovered to the program or to other factors

BACKGROUND

In 1973 the Vocational Rehabilitation Services Bureau of the Department of Economic Security of the State of Arizona began furnishing limited services to selected residents of the Department of Corrections Ft. Grant Training facility, a minimum security prison.

In 1974 the Institute for Human Development of the Northern Arizona University became one of the service providers for the project. The Institute was contracted to provide on-site vocational and psychological evaluations and related services. The Institute staff at Ft. Grant presently consists of a Clinical psychologist; Psychological Associate; Vocational Evaluator; Assistant Vocational Evaluator; 2 Technical Assistants and 1 Secretary. The staff, in cooperation with VR and DOC personnel, have served 250 residents annually for the past three years.

Although many studies of the effectiveness of rehabilitation services in penal settings have produced negative or less than satisfactory conclusions, the program at Ft Grant includes a number of unique features which may enhance the rehabilitation goals. Participation by residents is optional. Only volunteers may be accepted as VR clients. No recruiting or implied additional benefits for participation are presented to incoming residents. Yet approximately 50% of the residents apply for acceptance into the program. A second feature is the presence of the highly qualified staff the University of Vocational Rehabilitation Bureau has assigned to the project. The third, and possibly most critical element in the program, is the wide range of services made available to participants. The VR counselor provides counseling at all decision points and coordinates the training program. In addition, a group of services, not VR sponsored, are available to all residents at Ft. Grant. Finally, the entire range of Vocational Rehabilitation services which are available to clients outside the prison may be potentially utilized in the program. Cooperation among DOC, VRS and IHD personnel is outstanding.

The diversity of the program sets it apart from the traditional "learn-a-trade" activities that have existed in prisons for years, which have been evaluated and reported negatively in the correctional literature.

PILOT STUDY RESEARCH MODEL

Goal 1: To research the demographic characteristics and vocational outcomes of selected VRS Ft. Grant clients when compared with a control group of similar subjects.

Hypothesis: There is no significant difference, on selected variables, between the group means of randomly stratified samples of subjects who did not apply for VR services and a sample of similar subjects who received VR services at the Ft. Grant Training Center.

Design: Pre-test-Post-test comparisons of the success rates; job stability and recidivism among the residents at Ft. Grant who participated in the program and those who did not apply for the services.

Method: Sample Selection: The subject pool from which the study samples were to be drawn was obtained from data available in the offender Based State Correctional Information System (OBSCIS). The pool included all persons assigned to the Ft. Grant Training Center betwen 1973 and 1976, who had been released on parole for one calendar year prior to June 30, 1977. The subjects were divided into two groups, those who were accepted for VR services and those who did not apply.

Twenty subjects were selected for each of the two sample groups, utilizing a table of random numbers. The experimental group was designated as those who participated in the VR program, while the control group included those who did not apply.

Criteria: 1. Number and percent in each sample who obtained and retained employment for 1 year following release on parole.

2. Number and percent in each sample who were returned to prison within the 1 year period.

Data Collection: The computer data banks and files of the Department of Corrections Central Data Processing Unit were made available. Missing data and follow-up procedures were developed and implemented by the DOC EDP Systems Analyst and the DOC Records Management Supervisor. Also, the files of the VR Counseling Office at Ft. Grant were made available as a second primary source of data.

Sixty-six demographic factors were identified in the DOC Adult Coding Manual for investigation of the selected criteria. Five of these were chosen for analysis during the pilot study: Ethnic Background; Type of Offense; Occupational Level at Admission; Family Members in Prison; Disciplinary Actions during Confinement.

Statistical Procedures: The Department of Public Safety computer was employed for data analysis. A highly qualified computer programmer applied the Statistical Package for the Social Sciences (SPSS) developed by the Pansophic Systems Inc., to obtain the data analysis. The 10% level of confidence defines significance. Results are presented in the tables which follow.

TABLE 1.—SAMPLE DEMOGRAPHICS

	Experimental group			Control group		
	Mean	Median	Range	Mean	Median	Range
Age	25.55	22.5	19–42	27.33	25.0	19–41
IQ	107.9	107.0	90–120	102.0	103.5	72–12
Education	7.94	8.7	6.8–10.4	8.34	7.9	4.8–12.4

The two examples are sufficiently matched demographically on the factors of age, intellectual functioning level and education. At the 10% confidence level they are not significantly different.

TABLE 2.—ETHNIC BACKGROUND

	Experimental group (N=20)		Control group (N=20)	
	Number	Percent	Number	Percent
Caucasian	8	40	12	60
Mexican American	8	40	3	15
Black	2	10	5	25
American Indian	2	10	0	0

Note: No effort was made to control for ethnic background, one of the factors to be investigated for goal 2. The experimental group has significantly greater numbers of Mexican Americans and Indians, and the control group has more Caucasians and blacks. It might be held that the control group might be more employable ethnically than the experimental.

TABLE 3.—TYPE OF OFFENSES

NCIC and offense	Experimental Group [1] (number)	Control group [1] (number)
0900 Homicide	1	1
1000 Kidnaping	0	1
1100 Sex assault	0	1
1200 Robbery	3	5
1300 Assault	2	3
2200 Burglary	9	2
2300 Larceny	2	1
2400 Stolen vehicle	0	1
2600 Fraud	0	1
2800 Stolen property	0	1
3500 Drugs	2	2
5200 Weapons	1	1

[1] Total number equals 20.

A highly significant difference between the two groups appeared in the numbers in each which participated in Burglaries. 45% of the Experimental Group had offenses in this category while only 10% of the Control Group had such offenses. As a group those in the non-VR client category had 12 different kinds of offenses while the VR clients had only 7.

TABLE 4.—OCCUPATIONAL LEVEL (AT ADMISSION)

Occupational level	Experimental group (number)	Control group (number)
Unskilled	7	4
Semiskilled	6	6
Skilled	1	2
Service workers	4	2
Sales	0	1
Clerical	0	3
Managerial	1	0
Unknown	1	2

Analysis of Table 3 shows the Experimental Group is weighted in the Unskilled and Service Workers categories, while the Control Group has significantly fewer Unskilled and more Clerical. Again, the Control Group might be expected to be more employable.

TABLE 5.—DISCIPLINARY REPORTS

Type	Experimental group (number)	Control group (number)
Minor	13	12
Major	9	10
Assaults	1	2
Drugs	1	0

There is no significant difference between the two groups either in the number or type of Disciplinary Actions taken during confinement.

The factor Family Members in Prison did not lend itself to analysis since the Offender Based State Correctional Information System (OBSCIS) did not contain the necessary data.

TABLE 6.—PSYCHOLOGICAL DISORDERS

Diagnosis	Experimental group (number)	Control group (number)
Psychosis	2	1
Neurosis	6	8
Personality disorder	6	5
Psychophysiologic disorder	1	1
Transient Situational disorder	2	1
No psychological disorder	3	4

Note: Based upon scores obtained from administration of the Minnesota multiphasic personality inventory, the psychological disorders being experienced by the members of the 2 groups are not significantly different. No analysis of the degree of severity of the disorders was possible within the limits of the study.

TABLE 7.—CURRENT STATUS

Status	Experimental group		Control group	
	Number	Percent	Number	Percent
In prison	4	20	6	30
Employed	12	60	9	45
Unemployed	4	20	5	25

These figures show that the Control Group had a 10% higher rate of recidivism, a 5% higher unemployment rate and a 15% lower employment rate than did the VR client group, the Experimental Group. A "t" test of the difference of the sample means was significant at the .01 level.

To investigate the effectiveness of the recommendations made to the VR Counselor by the Institute for Human Development evaluation staff, the following table, TABLE 8 compares programs of the 12 clients employed with the 8 who are in prison or unemployed.

TABLE 8.—PROGRAM COMPARISONS OF EXPERIMENTAL[1] GROUP

Recommendations followed	Employed (N=12)		Unemployed (N=8)	
	Number	Percent	Number	Percent
Training	11	92	8	100
Therapy	8	67	4	50
Partial	5	42	4	50
Total	7	58	4	50

[1] Experimental but not control group.

The only significant difference in the programs of the two groups was the extent to which the counselor followed the therapy recommendations of the IHD staff. Only half of the unemployed members of the Experimental Group had therapy while two-thirds of those employed members received therapy.

TABLE 9.—PEARSON CORRELATION COEFFICIENTS—GROUP COMPARISONS ON FIVE VARIABLES

	Ethnic	NCICI	Prison	Employed	Dispnum
Ethnic:					
Experimental group		0.0522	[1] 0.4795	0.0754	−0.2383
Control group		[2] (.3088)	[2] (.3143)	(−.2294)	(−.1180)
NCICI:					
Experimental group	0.0522		.0435	.0388	−.0799
Control group	(.3088)		(−.0481)	(.0278)	(−.1214)
Prison:					
Experimental group	[1] −.4795	.0435		[3] −.6814	[2] −.3959
Control group	[2] (.3143)	(−.0481)		(−.1612)	(−.0829)
Employed:					
Experimental group	.0754	.0388	[3] −.6814		.2485
Control group	(−.2294)	(.0278)	(−.1612)		[1] (.5145)
Dispnum:					
Experimental group	−.2383	−.0799	[2] −.3059	.2485	
Control group	(−.1180)	(−.1214)	(−.0829)	[1] (.5145)	

[1] Denotes significance at the 0.01 level.
[2] Denotes significance at the 0.1 level.
[3] Denotes significance at the 0.001 level.

Analysis of TABLE 9—In the Experimental Group: 1. There is a *negative* relationship between Ethnicity and Recidivism, a desirable relationship.

2. There is a negative relationship between Recidivism and Disciplinary Actions, a desirable relationship.

3. There is a negative relationship between Recidivism and Employment, a desirable relationship.

In the Control Group: 1. There is a *positive* relationship between Ethnicity and Recidivism, an undesirable relationship.

2. There is a *positive* relationship between Employment and Disciplinary Actions.

3. There is a positive relationship between Ethnicity and type of Offense (NCICI).

SUMMARY

The random samples drawn from the pool of subjects, VR clients and those who did not apply for VR services, were found to be not significantly different with regard to intelligence, age or level of education. There was no significant differences in the number or types of disciplinary actions nor the psychological disorders diagnosed. There was a significant different in the type of offenses committed by the Experimental Group. They had a much higher percentage of burglaries. The ethnic factors seemed to favor the Control Group with regard to employability and the occupational level upon admission of the Control Group was higher than that of the Experimental, VR client, Group.

A significant difference was found at the 1 percent level of confidence in favor of the Experimental Group in both employment for 1 year following parole and recidivism during that period.

The hypothesis that, "*** no significant difference between sample means of those residents of Ft. Grant who received VR services and those who did not choose such services," is rejected. The probability that this rejection of the hypothesis is in error is less than 1 in 100.

CONCLUSIONS

1. Although several factors logically favored the Control Group with regard to employability following parole, the Experimental Group did significantly better in employment.

2. Several studies (Dale, 1976; Glaser, 1964; McCollum, 1977) reported high correlation between unemployment and recidivism. This study supports that assumption.

3. Vocational Rehabilitation Bureau services are directly and positively affecting employability and reducing recidivism of resident at the Ft. Grant Training Center.

4. Replication and expansion of the pilot study is justified.

5. Implications for additional research related to the Ft. Grant Center might include:

a. Investigate the underlying factors responsible for the positive and negative relationships found among Ethnicity, Recidivism, Employment, Disciplinary Actions and Offenses.

b. Determine the effect of therapy upon success following release. In particular, the contribution of the Therapeutic Community Program at Ft. Grant should be evaluated. The extent to which the typical VR client tends to accept Therapeutic Community participation may well be studied in depth.

c. Development of a "Base Expectancy Table" to predict the probable success of a parolee should be possible by identifying homogenous clusters of parolees through multivariate discriminate analysis.

d. Investigate the effect of prison staff attitudes toward rehabilitation upon prisoner acceptance and participation.

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