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INTRODUCING THE OFFENDER TO INSTITUTIONAL ROUTINE

James L. McCartney¹

Elmira Reformatory, now under the superintendency of Dr. Frank L. Christian, is the oldest Reformatory in this country. Male offenders between the ages of 16 and 25 are cared for; and during the past year the average population has been about 1,500 inmates.

A commission was appointed in July, 1930, to study the correctional system of New York State, and it was concluded that our prisons should be treatment centers, since 92 per cent of all prisoners return to society within a comparatively short time after their incarceration—in fact, the average stay in the Elmira Reformatory is but 16 months.

One of the further recommendations of the commission was the establishment of clinics in connection with the various institutions; and, accordingly, three are now functioning in New York State—one in Sing Sing, one in Attica, and the third at the Elmira Reformatory.

The object of these clinics is to give a thorough psychiatric examination and classification so that a proper administrative placement and psychiatric prognosis of the prisoners can be made. This classification, therefore, is of value only to the extent that it may be used for the proper assignment and training of the prisoner while incarcerated, and to assist in intelligent parole. In order to accomplish this end, we have carried over to the prison the methods of diagnosis used in modern hospitals and mental clinics, together with the adaptation of the system of testing intelligence, educational achievement and industrial fitness as used by progressive industries in selecting their workers. To this is added a case study of previous life and environment of the type which welfare agencies have found effective in their efforts to assist their clients. Realizing that it is necessary to complete this understanding examination of the individual prisoner as early as possible after commitment, so that he may be introduced to institutional routine without delay, we have worked out a definite receiving routine at the Elmira Reformatory.

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Most of the disciplinary problems in the past have resulted from the haphazard dumping of prisoners into a common population without regard to their individual adaptability. This may be realized when it is remembered that between 100 and 150 new men are admitted to the Reformatory each month, with a total average population, as previously stated, standing at about fifteen hundred. Until a receiving building can be built, the old hospital is being used for this purpose and can accommodate a month's admissions.

The building is a four-story structure. On the first floor are the offices of the Clinic Staff and examining rooms and a small auditorium. A tier of cells accommodates the men on their first night after admission, and until they can be given a preliminary physical examination to detect any contagious disease. At the first inspection every man is vaccinated and a throat culture for diphtheria is done. Blood is also taken for the Wassermann test. The Director of the Clinic then explains the routine of the Receiving Building to these new men. This building is run on the dormitory plan, and this is especially desirable, as the men may be given more detailed scrutiny than when locked in cells; and also since men are naturally gregarious they are more apt to portray their real selves when in social groups. There are three dormitories, each having the capacity of 50 single spring beds, and furnished with necessary chairs and tables. A radio loud-speaker is to be installed in each dormitory, under the control of a master set in one of the offices, and to which a microphone will be attached. This system, besides furnishing entertainment from the air, may be used to issue orders to each dormitory from the downstairs offices.

The first day on admission, a social history is taken on each case, including addresses of parents, relatives, schools and employers who have known the prisoner, and history questionnaires are sent to each immediately. The men are then asked to fill out an Emotional Test Blank, consisting of about two hundred questions.

The inmates are placed in the First Dormitory for the first ten days, during which time all preliminary examinations are completed. On Monday morning, all men admitted during the previous week are given a detailed physical examination, done by a staff of physicians; the ophthalmologist, Dr. Case, checks the eyes, ears and throat; the neuropsychiatrist, Dr. Breguet, com-

pletes the neurological; the physician, Dr. Day, completes the general physical; and the dentist, Dr. Mitchell, charts the teeth. At this time a urine analysis is done. That afternoon the men are given an Army Group test, for intelligence rating.

Tuesday morning the Superintendent, Dr. Christian, interviews each new man, and that afternoon the Psychiatrists start their interviews.

Wednesday morning the Assistant Superintendent, Mr. Smith, interviews each man, and during the afternoon the Chaplains start their interviews.

Thursday morning the men are interviewed by the Director of the School of Letters, Mr. Brown, and that afternoon the men are given a Stanford Educational Achievement test to determine proper class placement.

Saturday morning the Director of the Trade School, Mr. Clark, begins his interviews, and the following week each man is given various trade tests to determine the proper work placement. At present we are working on the standardization of such tests. Every examination is explained to each man in order to get his full cooperation.

Besides these various tests, while confined to the Receiving Building, the inmate is given daily drills in squad work and the school of the soldier so that he will be prepared to take his place in the military training routine of the Reformatory population; daily lectures acquaint him with the rules, routine and officers of the institution and incidentally give him some insight into the requirements of society and how he may earn his way back into the world. He is thoroughly instructed in the rules and regulations of the Reformatory, so that he will clearly understand what is expected of him and so be able to prevent himself from losing time as a result of conflict with the institutional authorities. His meals, recreation, etc., during this first month confine him to the inmates of this one building and its own yard, thus preventing the usual initiation under the more sophisticated inmates of the institution. During these first thirty days, the man's time is fully occupied by the schedule set for him.

At the end of the first ten days, the man is shifted to the Second Dormitory for the second ten days, and the Third Dormitory for the last ten days. Each dormitory is under the supervision of one guard, assisted by two monitors who are selected inmates. These monitors, before the assignment to this duty, are given a course of

six lectures on the routine, and then chosen by competitive examination. The monitors hold the rank and wear the uniform of lieutenants in the military organization.

When the prisoner is admitted to the Receiving Building he is given a printed chart which outlines the routine for the first ten days and gives his appointments for the various examinations. At the end of his first ten days he is given another chart which covers the second ten days, and at the end of this period he is given a final chart which covers the last ten days. If the inmate is illiterate, which is the case in about 10 percent of our commitments, then the chart is read to the inmate, and special consideration is given to these individuals, that they may understand all the rules, and especially is this the case when dealing with the defective individual.

During the thirty days residence in the Receiving Building a daily chart is kept on each man, similar to a temperature and pulse chart on a patient in a general hospital. This chart is on graph paper made up of ten lines to each section and with a section for each of the thirty days. The man is marked according to his improvement as to appearance, conduct, attitude and cooperation. At the end of the month, this graphic picture of the man's progress is evident, as improvement shows a steady rise in the curve, while indifference or lack of response shows a straight line or downward curve.

During the last ten days each man comes before a Board consisting of the Assistant Superintendent, the Record Officer (Major Suffern), the Disciplinarian (Major Wolfe), the School Director, the Vocational Director, the Chaplains (Protestant, Rev. Chapman; Catholic, Father Lane; and Jewish, Rabbi Silverman), the Physician, the Assistant Psychiatrist, the Psychologists (Dr. Papurt and Mr. Hamlin), the Chief Guard (Major Hanlon) in charge of the Segregation Block or Training Class; the Officer in charge of the Receiving Building (Captain Dunn), and the Director of the Clinic. Whenever possible, the Deputy Commissioner of Correction (Dr. Branham), and the Superintendent of the Reformatory attend the Board meeting which meets every Friday and which has been able to classify between twenty and twenty-five men each week.

The full record of the prisoner is placed before the Board for consideration by the reading by each member of his own report on the inmate. After which, the prisoner appears in person and is interviewed. The inmate is given an opportunity to discuss his case and ask any questions he desires. The full consideration of each inmate takes from fifteen to twenty minutes. After this interview, the Board

then formulates its recommendations in regard to him, and as to his psychiatric and administrative classification. At the conclusion of each Board meeting these report forms are assembled and duplicate copies of each are placed in our files, after the detailed statistics are tabulated for analytical study. A copy goes to the office of the Commissioner of Correction and a copy to the Parole Board in Albany.

Following his classification the prisoner is placed in the general population of the Reformatory, in his school and work assignments, or continued in segregation in the Training Class. This Training Class, or Psychopathic Clinic, is a block of fifty cells, set apart, and in which the unstable inmate is kept out of the population until he has received sufficient training to fit him for a more social existence. If the inmate cannot be fitted into the population, he is transferred, directly after classification, to the Institution for Defective Male Delinquents, one of the Hospitals for the State's Criminal Insane, or to one of the more permanent, maximum security prisons. A small ward is maintained in the new Reformatory Hospital where psychotic inmates may be placed for observation and psychiatric treatment, either until they recover or can be transferred to a mental hospital. Of course, where physical defects are found, these are corrected whenever possible.

The examination of one thousand admissions to the Reformatory during the past year has shown that the intellectual level of these men is about the same as for the population as a whole. It is clearly evident that the so-called criminal class has been done a great injustice in the past by saying that it is mentally defective. We have found that 79.4 per cent of the first admissions during the past fiscal year were of average or above average intelligence as compared to the population outside; and at least 3.7 per cent were of superior intelligence. Unfortunately, in spite of this situation, far the majority of these men had not completed grade school, and only 16.2 per cent had graduated from the eighth grade, making the intellectual education of the inmates of great necessity.

This routine study of these inmates has further brought out the fact that their performance ability is consistently low, and this has impressed us with the value of performance or mechanical tests. Most prisons are attempting vocational training in a very haphazard manner, and are not only wasting time, but, undoubtedly, sowing seeds for future delinquency by trying to teach an individual, who is already more or less conflicted over his experience with the law,

some trade above his level of mechanical ability. Our study has further brought out the fact that only one-quarter of the young men were sincerely interested in following the trades, while about half the inmates had no ambition, and these facts must necessarily be taken into consideration.

The physical examination of every inmate, without delay, has shown its great importance in considering the classification of the inmates, as our examinations have brought out the finding that about a quarter of the inmates were retarded in their physical development, and at least 20 per cent showed some pathology at the time of their birth, with about half of these likely sustaining some head injury. There was also much opportunity in their latter life for definite injury to the brain, either through trauma or by inflammation, and thus a possible encephalitis, which, of course, cannot be lost sight of when interpreting the individual's reaction to the institution. Signs of post encephalitis are found in 2.4 per cent of admissions. Our findings further brought out that only about half of the inmates might be considered in good health on admission, and that many of these defects are correctable, such as poor eyesight and defective teeth. At least 20 per cent were suffering from venereal infection at the time of their admission and, consequently, would remain, unless treated, a menace to other inmates, and to the community as a whole when they were paroled.

A subject which also needs consideration is the introduction of the prisoner to institutional routine is a healthy outlook on sex hygiene and emotional hygiene. Much of the sexual abnormalities that are frequent in prison can be prevented; but it is an ever present problem, for 35.6 per cent of our inmates were not interested in a normal adjustment to society and were definitely introverted, 38 per cent were primarily interested in a vagabond existence, three-quarters had indulged in promiscuous sex relations before confinement in the Reformatory, and almost half of the men had been intemperate in their drinking habits. We have, therefore, placed special stress on psychotherapy in an attempt during this initiation to give the inmates some insight into his emotional problems and by so doing preventing the very trying discipline cases that would otherwise arise.

Finally, our examinations have clearly brought out that 50.7 per cent of the men, if given proper treatment and training, could be fitted back into society, and would not likely give us any trouble from an administrative standpoint during their incarceration; but

32.8 per cent were mentally or emotionally abnormal, and should be more or less segregated, as no form of treatments would alter their careers, and they will need to be kept under observation.

This plan of procedure in attempting to introduce the prisoner to his period of incarceration, undoubtedly leads to a more logical handling of each case and does away with the very regrettable system of fairly handling the individual, undoubtedly will redound to the credit of society and greatly eliminate the emotional disturbances that frequently arise when a man is deprived of his liberty; and, further, eliminates most of the disciplinary problems that are so frequently found behind prison walls; because it studies the prisoner as a total personality; his heredity, social, educational and vocational background; his physical handicaps; his intellectual and mechanical ability; and his emotional stability. This study is completed before the prisoner is allowed contact with more sophisticated inmates, and so prevents him from being biased. The conclusions reached from this study allow the institutional authorities to clearly understand each man, and to place him in his proper school class and work assignment, and so eliminate the emotional conflict that would otherwise arise, as well as give the prisoner some real incentive for accomplishment. The detailed instruction in the rules and routine of the institution has its obvious value. The opportunity for psychotherapy, or the segregation and transfer of misfits of course eliminates most of the trouble makers. This system definitely attempts to reform the individual who, the courts have justly or unjustly decided, needs to be reformed; and who, by being committed, must necessarily remain a more or less definite period in order to appease the requirements of society. In the words of the prisoner himself, it's an attempt to "give him a break."