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SEX LIFE IN PRISON

Benjamin Karpman

In the present study, the author takes up a particular segment of prison life, pointing out the many invidious and iniquitous situations that exist in prison with reference to sex life. The understanding is arrived at, not from a superficial observation of the sex life of criminals, but from deeper, psychopathologic investigations into the problem. In sequence, he takes up the early and timid reactions of prisoners to sex privation, the manner in which these practices are gradually increased in quantity and changed in quality, the inevitable intrusion of perversions into the sex life of the prisoner, and the life of the prisoner. Especially important is the observation that the effects in the disturbed sex life of prisoners do not cease with liberation, but continue their effects when the prisoner returns to civil life. At this point, the author submits that there must be a radical change in our treatment of criminals, not only with reference to sex life, but with reference to other aspects of prison life, of which the sex life is only one aspect.—EDITOR.

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Attitudes Toward Sex Life of Prisoners

Whatever motive or motives society might have had originally in using imprisonment as a means of handling the criminal, they all have seemingly failed of their purpose and promise. The man who coined the terms "reformatory" and "penitentiary" as applying to jails and prisons must have possessed a grim sense of humor; it is doubtful whether at any time in the history of mankind the welfare of the offender was truly a part of the purpose of the imprisonment. Reformatories, in point of fact, do not reform, for nothing in them is conducive to reformation; they are excellent schools of crime, and the majority of inmates leave them as confirmed criminals rather than reformed men. With bitter wit, the inmates often speak of them as "deformatories." And penitentiaries are the very last places and confinement, the very least opportunity for one to become penitent and remorseful. The bitterness and hatred engendered by a vicious environment all work against the development of such reactions.

It would be a mistake to speak of sex life in prison as something apart from the rest of prison life. The physical, moral, social, psychic and sex aspects are all intertwined, mutually and

reciprocally affecting each other.¹ They are all part and parcel of a vicious system that brings about as a result, if it did not have it for its original purpose, the brutalizing and degradation of the human being called criminal, and only tends to stabilize the reaction. But it is in sex life, more, perhaps than in any other aspect of the life of the prisoner, that one sees reflected as in a crystal the grossness and viciousness of the whole situation.

The medical profession, by the very nature of its situation, has always been in the vanguard of human progress. The welfare of the patient as a particular individual has always been emphasized as against the more remote social aspects and implications. Experiment is viewed as superior to precedent; old methods are readily abandoned, to give way to newer methods. It is therefore a matter of great wonderment, and disappointment as well, that with so many physicians on the staff of prisons, even quite aside from the problems of crime that now and then come to the physician's attention through his private practice, medicine has thus far contributed so little of positive value toward a more scientific and more humane understanding of crime. Though he deals daily with metabolism disturbances among prisoners, the physician fails to see it in terms of its being but secondary to the devitalized and devitaminized food that is being served in prison. Though he sees sexual irregularities fairly flaunted in his face daily, he does nothing about their amelioration and universally assumes a puritanical attitude, condemning the prisoner, which is as reasonable as to condemn a patient with a malignancy because of ill smelling putrifying tissue. In common with laymen, discussion of homosexuality by physicians is pervaded with a feeling of revulsion; homosexuality is spoken of as debauchery and evil, homosexuals as dregs, and nothing better is offered for its solution than forcible repression and punishment. On the other hand, we should not criticize the prison physician too severely. He, after all, plays but a minor role in the prison administration in which his position is of secondary, even negative, importance. With the medical load heavy, the time and opportunities limited, he becomes perforce a dispenser of pills, and rarely has the opportunity, nor under the circumstances of lack of cooperation on the part of the administration, the inclination to study the situation with care and attention. Nevertheless, even in the face of

¹ For a detailed discussion and interpretation of these aspects, see the author's "The Individual Criminal", the Nervous and Mental Disease Monograph, Series #59, New York and Washington, 1935.

such limitations, many physicians both inside and outside of prison are developing a truly professional attitude toward the problem of criminality. A broader and more tolerant understanding of the situation by the medical profession is being now expressed, the more enlightened view being to regard criminality as a disease, mainly psychic, in nature, that as such it is curable, and that its solution and cure will never be possible without a definitive cooperation of the medical profession. The purpose of this contribution, however, is less a description of the sexual problem as it is found in prison—some work on this has already been done^{2,3} as an intimate discussion of the unhealthy, even vicious emotional states found as concomitants and consequences of the sexual situation in prison, with the hope that this may lead to a more concerted move on the part of the medical profession to remedy the situation.

Early Reactions to Sex Privation in Prison

That the sexual activities of an individual do not cease with his imprisonment is easily understood when it is realized that the sexual urge is too elemental and instinctive to be completely controlled by confinement. Naturally, and quite from the beginning, efforts are being made, especially by the more normally sexually constituted prisoner, to maintain his heterosexuality. Visits of female members of the family, even with a screen intervention, often ease the tension a good deal, albeit it makes the situation at times more provocative. If such visits are not arranged, the prisoner will attempt to establish a correspondence with some woman outside whose name he chanced to learn from a mate or from a paper. Lacking this, he may make a pathetic attempt to write letters to an imaginary female and himself answer himself for her, using different stationery for himself and for her. In many instances, persistent and often desperate attempts are made by prisoners to secure a heterosexual outlet, and great ingenuity is displayed at times in effecting it, the methods running anywhere from bribing the guards to contacting through the darker causeways some female outside, especially if a woman's prison is under the same roof, or nearby. But such successes are rather exceptional and the large number of prisoners have to reconcile themselves to a life of heterosexual privation. Here it is not amiss to mention the terrific display of jealousy shown by some of the prisoners who are either married or have left "sweethearts" on the outside.

² Fishman, Joseph F. *Sex in Prison*, National Library Press, 1934.

³ Op. Cit. 1. Chapter "Preliminary to the Psychotherapy of Criminals.

One observes here with pain and anguish individuals who are virtually consumed by jealousy which affects the man's sleep, appetite, and whole being, furious accusations of the children being "some one else's" children. All this adds another emotional burden to a life already heavily laden.

Here one asks a question, "Isn't there such a thing as self-control?" Generally speaking, self-control or repression is not an easy matter even at best, as the widespread of nervous breakdowns having an obvious or veiled sexual causation clearly indicates; but it is still possible in some cases when one is free since there are so many other personal, social and cultural outlets open to the individual into which to direct his energies, that is, to sublimate. In such cases the individual draws upon inner resources, often essentially neurotic in character, with which to effect such sublimation which, though at best rarely complete and satisfactory, is still without any obvious untoward effects on the personality. But such sublimation becomes practically impossible in prison where all avenues of personal expression are completely shut off from the individual. With the repression forced from above, it becomes an external proscription which in the nature of things is much resented and fought against. Hate against and defiance of authorities are mild terms with which to express the emotional attitude of the prisoners toward this prohibition, and the adoption of abnormal forms of expression is often as much out of necessity as it is out of defiance.

No doubt some attempt at self-control is made by some prisoners, especially by those who have a short sentence to serve, and probably in the early period of imprisonment even among those who have a long sentence to serve, the tension is relieved through nocturnal emission. But it is hardly correct to speak of this involuntary enforced physical abstinence, so far removed from satisfaction, as sublimation. It is not only inferior to it, but has as well a deteriorating effect on the personality; at any rate, if the individual has a fairly long sentence to serve, the self-control, such as it is, soon breaks and he is then confronted with a choice of some abnormal sexual practice, more especially of masturbation or homosexuality in many of its forms. This is because sublimation and repression being altogether impossible in prison, the tension created by continuous privation increasingly tends to seek and find some form of motor release, and if normal outlets are not provided, abnormal practices naturally take their place. Abnormal sexual practices, therefore, are, to speak conservatively, very common in

prisons and though there are no statistical statements available, and in the nature of things these probably cannot be made available, anyone who has studied prisoners at all, has no difficulty in convincing himself that these practices are not only common but universal.

Abnormal Sexual Practices in Prison

Much of the external physical environment in prison favors the development of sexual abnormalities. Cells are often overcrowded, three and more may be in one cell, and wardens do not bother themselves with the problem of providing the prisoner with suitable cellmates. As often as not, a young delinquent may be put in the same cell with a much older offender and it is not long before the former has to give in, or else, not infrequently, risk his life. The situation is even more difficult and trying when prisoners are put to sleep in dormitories instead of cells. Beds are put very close and the sight and smell of naked bodies, the parading and exposure which is unavoidable, charges the atmosphere with excessive stimulation. Aside from all this, time plays heavily on the prisoner. Even if he is fully occupied with work during the day—and many prisons fall short of such provision—he is still left with a great deal of time to himself. In the conversations exchanged, the favorite topics, because practically the only topics left, are crime and sex, sex and crime. When alone, there is readier phantasy indulgence, compensating for unpleasant reality, and this not only provides the matrix for masturbation and homosexual indulgence, but equally incapacitates the individual for life on the outside when he is discharged.

Masturbation as a sexual outlet derives its value not from the physical process, which in itself is insignificant, but from the accompanying phantasies which give the process a normal or abnormal character. As such, therefore, it is not always abnormal. In one form or another it may be said to be indulged in quite commonly by normal people but is given up on reaching adolescence. Indulgence in masturbation even later in life as a temporary expedient may have but little ill effect on a normal individual, since such individual always has before him the hope of early contact with a female. If the practice is indulged in as a temporary substitute because the normal outlet is presently not available (the mate may be away, sick, etc.), the accompanying phantasies will picturize a normal relationship. Such masturbation, because of its purely substitutational facultative character, is not abnormal. In prisons, however, such indul-

gence carries but little hope of early contact with the opposite sex and the accompanying picturization, therefore, can not be maintained long. Worst of all, the practice, because of readier access, is liable to be excessive and get out from the individual's control. The reason for such excessiveness lies in this, that at best the practice provides only an approximation of the desired goal, and therefore must leave the individual sexually unsatisfied, thus providing a reason for further indulgence in the hope of reaching the goal. It thus happens that instead of controlling the indulgence, the individual becomes a victim of it and other prisoners are able to spot such a "chronic masturbator," by what they regard as definite symptoms, the appearance and acuteness of which varies in the main with the frequency of the practice. In the opinion of many prisoners the practice leaves its tell-tale marks in a worn and pallid look, a glassy countenance and a fixed stare when not engaged, the mouth open, white or yellow waxen complexion, seclusiveness and cowardice; loss of energy, physical as well as mental, with a sort of compensatory and almost abnormal increase in appetite; easy irritability and flightiness, frequent spells of deep depression; even convulsive seizures. Many of the so-called prison psychoses, acute as well as chronic, often have for their immediate etiology, sex privation, and one is frequently impressed with the remarkable rapidity with which these symptoms disappear on the approach of the expiration of the sentence. It is also suggestive that in this artificially produced and abnormally maintained psychosis, the symptoms are more acute than those observed in civilian life. In the latter, temporary masturbation produces at most a train of transient symptoms such as fatiguability, insomnia, hypersensitiveness, etc., sometimes termed One-Day-Neurasthenia (Ferenczi), while in the obligatory type of masturbation though it too may be followed by a like and even more grave neurasthenic syndrome, there is a compensatory neurotic satisfaction derived from indulgence in long established wishfulfilling phantasies whose development is certainly more natural than those artificially cultivated in prison.

Paraphiliac (Perverse) Trends and Behavior

Thus in prison, as the hope of gaining access to a person of the opposite sex recedes farther and farther, the transition from this type to the more abnormal expressions takes place sooner or later, but so insidiously as to be hardly observed. The individual may find it difficult to phantasy an accustomed scene, and to reinforce himself, he may use a photograph or a picture of

a woman cut out from a magazine and masturbate with the aid of such stimulus. This, of course, allies it closely to fetishism. And when he manages to secure a piece of female apparel, using the same for masturbation purposes, what is it but fetishism, artificially fostered because of privation of normal sexual outlets? Or he may improvise a female dress, perhaps even a Hawaiian or South Sea Island dress, and hula-hula dance himself into a frenzy which is finally relieved by masturbation. And what is this but transvestism, another paraphilia?

Thus, as the accompanying phantasies gradually develop an abnormal character picturizing paraphiliac situations, the masturbatory practice assumes a definitely pathological aspect. Now, in daily life we meet with neurotics with whom masturbation is compulsory, who prefer masturbation to heterosexual activity, even when and if the latter is available. What an individually developed neurosis may bring about in civil life through subtle interplay of early family influences, the prison environment brings about by constantly forcing regression to lower levels of sexual adaptation; that is to say, masturbation eventually changes its originally facultative character to the compulsory obligatory form.

There are, to be sure, a number of individuals who will resort to and limit themselves to masturbation. But in a large number of cases, whether the individual has started with masturbation or not, homosexuality is often resorted to, and openly or secretly, is indulged quite freely. One here must bear in mind that there is an intimate relationship between masturbation and homosexuality. Behind the obligatory type of masturbation is the indulgence in paraphiliac phantasies, back of which is unconscious homosexuality; while all paraphilias center around homosexuality, of which they are only lateral derivatives, and are universally bound up with compulsive masturbation.

The ease with which one succumbs to the practice varies greatly, some going through an acute emotional conflict before they finally yield to the pressure, some being never able to succumb to it and developing neurotic or psychotic reactions, often in the nature of a panic with a strong paranoid tinge; or this may persist in the form of an acute or chronic prison psychosis. There seems to be no doubt, too, that much of the prison rioting may be traceable to this. Many, however, experience no great difficulty in overcoming the barrier, the homosexuality playing upon the original bisexual constitution. Furthermore, a number of overt and confirmed homosexuals find their way to pris-

ons and this cannot but help to make easier the breaking of the barriers. It must be remembered that in the absence of the balancing influence of the female, the homosexual, especially the feminine homosexual, presents to the prisoner the nearest approach to femininity. There is a considerable group of prisoners, who for all their superficial psychopathies, are basically neurotic with unconscious homosexuality entering as a large component. This is easily awakened and brought to the surface under the pressure of heterosexual privation and the tension it engenders.

Thus it happens that if these masturbation and homosexual practices continue for any length of time, they "grow" or get so fixed in the individual that even on discharge from confinement he often finds himself unable to return to normal sex activities. One knows of young boys, of whose heterosexuality there was no previous doubt, who after a confinement of several years, have become confirmed homosexuals, taking on feminine characteristics on discharge and becoming homosexual prostitutes with consequent demoralization of younger elements whom they initiate into homosexual activities.

In such a restricted environment, which only tends to accentuate the worst of the egoistic and psychopathic traits, a paranoid atmosphere charged with so much irritability and tension, with so many sharp wits acutely bent to secure physical release of the sexual tension, the relationship established between prisoners is often a highly complicated one. Deep jealousies, bitter rivalries, enmities of all sorts based all too often on a sexual situation are prominent, with frequent threats of murder and even occasionally an actual murder of the subject or the rival as the case may be.

As far as we know the only step taken by prison authorities to control sex is violent suppression. Prisoners are being punished in all sorts of ways for any evidence of sexual misbehavior, but that this does not seem to have the intended effect is evident from the fact that sexual practices today persist in prison as they ever have before. It seems that the very suppression engenders hatred and defiance which still further stabilize the reaction.

One may well question whether the prevalence of sexual abnormalities in prison is increasing or decreasing. This cannot be answered directly since the general opinion is that it is quite universal and further increase is impossible, while at the same time there is no reason to believe that it is in any way decreas-

ing, since the same conditions operate now as have operated before.

The Late Effects of Sex Privation in Prison

From what has already been stated, the situation is fraught with many dangers, both for the individual as well as the community. The dangers it carries for the individual are most obvious while he is still in prison, though they are fully present when he is outside; the effect on the community becomes evident when the man is discharged and let loose. While in prison, the effect on the individual is essentially that of a disintegration of personality. It could hardly be otherwise; for the forced redirection of a normal sexual impulse into aberrant channels disturbs and unstabilizes the entire personality. It is out of this that the effect on the community arises. Any individual who has served any sort of sentence and has yielded to the pressure of abnormal sexual practices, can be considered on his discharge from prison as abnormal, even if superficially he does not show any obvious evidence of abnormality. If he was married, he cannot now be the good husband that he was before. If, previous to confinement, he was single and heterosexual, the experiences in prison incapacitate him for normal sexual adjustment. He is more likely to remain single with no urge or capacity for marriage and with a greater possibility for leading a bisexual, rather than only a heterosexual life. As for the younger offender, while it is true that the majority of adolescents, by the time they come to the reformatory or prison, have already had some sexual experiences, venereal diseases included, they nevertheless are still in the formative period of their life, easily influenced and easily impressionable. The disintegration of personality therefore is greater in the cases of young boys whose sexuality is not yet stabilized and who, with or without significant previous sexual experiences, are led into temptation by older prisoners; by bribing and cajoling the novitiates are soon forced to yield to homosexual advances. These practices begun early, have a decidedly harmful effect on the young boy when he is discharged, even though the period may have been a brief one. While, therefore, sexual practices in prison do not seem to represent a direct threat to the community at large, they are a danger to the individual in question and, on discharge, to the community as well.

As for the effect of abnormal sex life in prison on increasing sex crimes on the outside, it is in the main indirect and rather minimal. To think otherwise, it would be necessary to prove that those who are guilty of so-called sex crimes have, previous

to their arrest for sex crime, been confined in prison for one reason or another, have learned abnormal sexual practices in prison, and as a result have later committed sex crimes. This, so far as we know, has never been shown to be the case, although, as stated, there may be a remote and indirect relationship. In another sense, however, the relationship is quite definite. This refers to the already described indulgence, when released, in abnormal practices established while in confinement. Such indulgence requires seeking of mates and prey, which are naturally recruited from the younger and unsophisticated members of the community. Too, the individual who while in prison has been led by force or bribery into homosexual prostitution, is also likely to continue as a homosexual prostitute when on the outside. There is thus brought into consideration another problem of homosexual prostitution and criminality, a problem all its own, which need not, however, concern us here at present.

Treatment

Another question that presents itself is: can an individual be rid or cured of these aberrations once they have been acquired in prison, that is to say, if authorities cannot control it, are there other means by which the problem can be reached, through psychiatric treatment, for instance? But a short generation ago, the answer would have been negative. No means were then known to medical science that could effect the cure of the disease, for it is a disease; nor was the public ready to accept such means even if it were available. The two World Wars however, along with other radical changes, brought about a larger and more sympathetic understanding of the problem, more frankness in its discussion, and definitely the hope of amelioration and curability. Generally, the treatment of sexual abnormalities acquired in prison is essentially the same as the treatment of sexual anomalies and deviations observed in daily life among individuals who have never been in prison. And these can be cured. Every psychiatrist of experience and competence has in his records cases of homosexuality that have been cured, and cases of paedophilia (sexual attraction toward children), exhibitionism and peeping, transvestitism (cross-dressing or male and female impersonation), etc. that have definitely yielded to treatment.

However, in treating cases of sexual aberration as developed in prison, the psychiatrist really deals only with the late results of a vicious environment. After all, sex life in prison, extremely moribund as it may be, is but a part, and a very integral part at

that, of the extreme pathology that is presented by prison life as a whole. To a large extent, the fundamental control will have to come from the medical profession and the social authorities, from a change in their whole attitude toward imprisonment. As previously stated, violent suppression cannot control the sex practices. The only way that such control could be accomplished would evidently be by providing prisoners with the more normal sexual outlets than they have been accustomed to, but it is doubtful whether the present prison system will allow that. It is not conceivable that the prison authorities would let a prisoner's wife visit the prisoner and spend an intimate hour with him. Even such an enlightened prison warden as Thomas Mott Osborne, who dared as much as any warden ever has, did not go beyond allowing the prisoners' people, wives or sweethearts, to see them, presumably because while more than this may have a beneficial effect in some cases, it would be distinctly irritating in other cases, and but further increase the already heightened tension.

In any event, could the prison authorities go beyond that, could they condone "immorality"? The idea appears less reprehensible when we recall that every army of soldiers is followed by its army of prostitutes and the generals know how efficient an army would be otherwise. If the purpose of imprisonment is to redeem the individual, so that on release he will be a better citizen, why not treat him at least as the generals treat the soldiers? This idea, however, carries some dangerous implications. If sexual liberties were allowed in order to prevent habituation of abnormal sexual trends, why indeed not give more personal liberty to the prisoner in order to prevent social and individual disintegration of personality? And if you do this all along the line, why not go to the logical limit and abolish prisons altogether and devise some other means of treating offenders? Recent advances in the scientific study of criminals have brought to light the rather startling discovery that fundamentally criminals are psychically sick people, no more responsible for their behavior than another individual is responsible for having neuralgia or dyspepsia. It is difficult to understand by what strange logic men have arrived at the conclusion that before a man can be improved he must first be humiliated and brutalized. The more progressive elements of the community realize now the utter futility of attempting to control human behavior by punishments which only engender further hate and further misbehavior, and are advancing the idea that prisons be abolished, and the criminals be treated by psychotherapeutic means. Treated as a human being, the criminal will respond as such.

When prisons are abolished and hospitals take their place; when the warden, the jailer, and the guard are replaced by the doctor and the nurse, abnormal sex practices in prison will disappear as the devil withdraws in the light of day.

It was more than mere warm humanity, but sound psychological observation that prompted Oscar Wilde to speak thus,—

“The vilest deeds like prison weeds bloom well in prison air,
It is only what is good in man that wastes and withers there . . .
“And they scourge the weak, and flog the fool, and gibe the old and gray,
And some grow mad, and all grow bad, and none a word may say . . .
“The fetid breath of living Death chokes up each grated screen,
And all but Lust is turned to dust in Humanity’s machine . . .
“And by all forgot, we rot and rot, with soul and body marred.”

Conventional Law, Penology, and Criminality and other social encroachments have so far failed to solve the problem of crime. It is essentially a task for the more enlightened elements of medicine, psychiatry and the dynamically oriented elements of the other professions interested in social problems.

Criminality is a Disease and Criminals can be Cured.—