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CLASSIFICATION OF OFFENDERS AS AN AID TO EFFICIENT MANAGEMENT AND EFFECTIVE TREATMENT

MARGUERITE Q. WARREN*

Recent years have brought an increased impetus to thinking about classification systems and typologies of criminals and delinquents. Among the several forces contributing to this development, two stand out. One force has come from developing research programs. As in other fields, scientific progress in the field of corrections depends on reducing the infinite variety of problems through conceptualization.

Research efforts attacking the problems of the field systematically have required some sort of theoretical framework, either a framework which focuses on the etiology of criminal and delinquent behavior, or at least a framework which charts in an organized fashion signs, symptoms, or dynamics of patterns covering the universe of offenders.

The second impetus to offender categorization has come with the switch from custody emphasis to treatment emphasis in handling offenders and with the disappointments regarding the total effectiveness of some attempted treatment programs. Like the humanitarian reform movement itself, trade training, increased facilities for socially acceptable outlets of aggression, and individual and group counseling have each been thought of as the answer to the crime problem. While movements in behalf of these causes have undoubtedly made important contributions to the field of corrections, they have tended to be viewed as cure-alls, and it is a matter of record that we do not cure all delinquents and criminals.

RATIONALE FOR CLASSIFICATION

One of the few facts agreed upon in the field of corrections is that offenders are not all alike. That is, they differ from each other not only in the form of their offense, but also in the reasons for and the meaning of their crime. Some individuals violate the law because the peer group, upon which they depend for approval, prescribes criminal behavior as the price of acceptance, or because the values, which they have internalized, are those of a deviant subculture. Other individuals break laws because of insufficient socialization, which leaves them at the mercy of all but the most protected environments. Still others delinquently act out internal conflicts, identity struggles, or family crises. This list is of course illustrative, not exhaustive.

Much of the literature in this field is still written as if all offenders are alike. Many causal theories purporting to explain delinquency have described only one segment of the total offender population and have concluded, for example, that delinquency is a peer group phenomenon. Differential association theories, social disorganization theories, role theories, and psychogenic theories all appear to have a certain amount of validity when applied to some segment of the offender population, but none of these theories alone is sufficiently complex to account for the total observable range of causal factors.

Program prescriptions as well have tended to be made in an across-the-board fashion, with increased staff-offender ratios, improved job opportunities, or insight therapy recommended for all. Although

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1 The terms "classification system," "typology," and "taxonomy" have been used somewhat interchangeably in this paper, even though a case may be made for differentiating among the terms for some technical purposes.
some action programs have been aimed at specific segments of the heterogeneous offender population (for example, psychiatric treatment for the emotionally disturbed delinquent), few programs indeed have based their goals for intervention and their treatment and management prescriptions on a specified rationale for handling differentially the varieties of offender problems which appear in a correctional setting.

A comment should perhaps be made with regard to an extreme opposite position taken by some treatment-oriented people who have emphasized the great differences between offenders and have resisted any schematization on the basis of loss of meaningful information about individuals. Although this position guards against the mistake of administering the same kind of treatment to all offenders, it requires an infinite variety of treatments to fit the uniqueness of each case. This position almost precludes conceptualizing the delinquency problem, developing intervention theories and practices, and instigating research investigations. As such, the position must be rejected.

Theoreticians, practitioners and researchers increasingly seek some classification system, some meaningful grouping of offenders into categories, which offers (1) a step in the direction of explanatory theory with the resulting aid to prediction which follows from understanding, (2) implications for efficient management and effective treatment decisions, and (3) greater precision for maximally effective research.

**Typologies of Criminals and Delinquents**

Systems of offender classification might be grouped in several ways. One such grouping, based on the nature of the underlying dimensions crucial to the classification system, follows.

1. Prior probability approaches represented by the Borstal studies, the California Youth Authority, the Department of Corrections Base Expectancy studies, the Glueck prediction tables, and the configuration analysis procedures represented by Glaser.

2. Reference group typologies represented by Schrag and Sykes and the social class typologies represented by W. Miller.

3. Behavior classifications (covering a wide range of specificity from offense types to conformity-nonconformity dichotomies) represented by Roebuck, McCord, McCord and Zola, Ohlin, and Reckless.


5. Social perception and interaction classifications.


tions of Gough and Peterson, Hunt and Hardt, Sarbin, Peterson, Quay and Cameron, Gibbons, Studt, MacGregor, Sullivan, Grant and Grant, Warren, and Russon.

Several of the investigators listed under social perception and interaction classification systems might equally well be grouped together on the assumption that their typologies all represent developments in ego psychology, with important underlying concepts identified as stage of ego integration, level of psychosocial development, level of interpersonal maturity, complexity of perceptual differentiation, level of cognitive complexity, etc. Such investigators as Hunt, MacGregor, Makkay, Sarbin, and Warren are currently working on typologies of offenders, utilizing primarily ego psychology concepts.

In addition to the five groupings, some investigators, using a more eclectic approach by including measures of several of the above areas of dimensions, have produced empirical-statistical typologies. Among these investigators are Hurwitz, Jesness, and Palmer. In a recent paper, the Gluecks make a case for this approach and appear to be proceeding to develop a typology in this eclectic manner.

Each of the above classification systems is not equally relevant for all purposes. Some systems concern themselves solely with etiology; others solely with treatment. Some consider precipitating factors, others maintenance factors. Some focus on social organization, some on family organization, some on intrapsychic organization. Some are specific to offender population; others have many domains of applicability. Some are empirical-statistical; some are empirical-observational; some are theoretical models. Some systems represent continua or hierarchies; some are developmental. Some have many more direct treatment implications than do others; some are more fruitful than others in producing research hypotheses.

Clearly, the last word on typologies has not been written yet. Sociologists continue to accuse psychological typologists of taking insufficient cognizance of environmental factors; psychologists continue to accuse sociological typologists of having insufficient regard for intra-psycho factors. Nevertheless, it is now possible to find investigators who are attempting to theoretically link the sociological, psychological, and situational variables which are all relevant to a completely satisfactory taxonomy.

Cloward and Ohlin, in their book Delinquency and Opportunity: A Theory of Delinquent Gangs, note that, when identifying the cause of failure in the legitimate system, some individuals blame the social order and others blame themselves. Cloward & Ohlin suggest that this differential perception largely determines what the individual does about his failure. These authors note that, when identifying the cause of failure in the social system, some individuals blame the legitimate system, some individuals blame themselves. Cloward and Ohlin therefore indicate the need to "...identify the types of personality that characteristically attribute causality (for failure) to themselves or to the world without."

In a recent article, Cohen notes that anomic theory must establish a more complete and successful union with role theory and theory of the self. He suggests that anomic theory is concerned with...
only one structural source of deviance and that other deviant behavior is directly expressive of roles. In seeking a general theory of deviance, he asks:

Is it possible to make any general statements about the kinds of deviance that may be attributed to anomie and the kinds that may be attributed to role validation through behavior culturally significant of membership in the role? Or may two instances of any sort of deviant behavior, identical in their manifest or 'phenotypic' content, differ in their sources or 'genotypic' structure?

In a recent paper, Warren has attempted to identify within the delinquent population those subgroups for which sociological factors (social disorganization, differential association, inadequate access to the legitimate opportunity structure, etc.) appear to have the greatest causal significance, those subgroups for which psychological factors (internal conflict, identity struggles, inadequate socialization, etc.) appear to have the greatest relevance, and those subgroups for which situational factors (acute family crisis, etc.) appear most important in leading to the delinquent act.

As in all science, criminological investigators approached the problem by first looking for the simplest explanation of events. However, as our knowledge has grown, it has become necessary to look at the subject matter in an increasingly complex fashion in order to handle the data that has accumulated.

It is a well accepted principle in psychology that a single behavioral event may stem from a number of different causes or motives, and that any single cause or motive may lead to any one of several different behaviors. That is, the delinquent act as a behavioral event may occur because of a strong youth's agitation of a weak youth, because of an adolescent's need to conform to a peer group's prescription for acceptance, because of the anxiety and despair which a family member feels in a family crisis, because of a youth's need for a car to transport his girl friend to the dance, etc. The behavioral event—a car theft, for example—might have risen from any of the listed causes or still others. With regard to the second part of the psychological principle—that is, that any single causal factor may result in different kinds of behavior—it is possible for one to know much about the causal factors in a particular delinquency and still be unable to ascertain with certainty why the individual committed an act which led to his appearance in the delinquent system rather than committing an act which, for example, led to his appearance in a mental hygiene clinic. There are at least two reasons for belaboring this fairly obvious point. First, there are still those who persist in discussing the cause for delinquency or who persist in seeking a cause which will explain "most" of delinquency. Secondly, when the focus is on the management and treatment of offenders, distinguishing among the varieties of causal factors becomes crucial to the establishment of differential goals and methods for transforming offenders into non-offenders.

A classification system for offenders need not serve all purposes in order to be adequate for some purposes. However, certain factors are important in all taxonomies. In addition to the usual criteria expected of a good typology, such as complete coverage of the relevant population, clear-cut, non-overlapping categories, internally meaningful and consistent categories, and parsimoniousness, it is especially important to any classification system used for scientific purposes that the types be sufficiently well defined so that the abstractions can be used with high reliability by trained raters. Beyond these general requirements, it is possible for certain purposes to use a classification system which, for example, has no etiological referents, one which has no implications for treatment, or one which is specific to an institutional setting.

Classification systems which are useful solely for management purposes are distinguishable from those which are more relevant for establishing treatment goals. For purposes of this paper, the term "management" means efficient and effective control over the behavior of the offender so that further law violations are not committed during the period of agency responsibility for the offender. In contrast with "management," the term "treatment" refers to attempts to change the individual offender or the relevant aspects of his environment so that long-term non-violation behavior is assured beyond the period of direct agency responsibility for the offender.

**Classification for Management Purposes**

Efficient and effective management in an institutional setting involves protecting those who are
weak from those who are strong, those with relatively nondelinquent attitudes from those with strong delinquent orientations, those who are easily agitable from those who agitate, and those who are non-homosexuals from those who are homosexuals. Since a correctional agency has a mandate to protect the community from offenders, inmates with high escape potential must be identified and placed in maximum security facilities. All of these discriminations imply the need for a classification of offenders on a variety of dimensions. Other areas of management decision which require some classification of inmates in an institutional setting include: open versus closed institutions, single versus dormitory rooms, amount and kinds of punishment, job assignment, time in the institution, use of tranquilizers, custody security level.

In a field setting, management primarily involves control of offenders to prevent further law violations in a way that protects both society and the offender at a "reasonable" price. This means, for example, assigning to high surveillance conditions only those who require constant external controls to prevent crime, and assigning to low surveillance conditions individuals who represent low threat in this regard. It also involves decisions regarding extent of the parolee's freedom to determine his own living arrangements, his job, and his obligations.

All of these management decisions require an implicit or explicit classification system. The difficulty, of course, with an implicit grouping is that there is no way of checking the accuracy or the value of the system; there is no built in self-correcting process. Currently, in the reception and diagnostic centers of many correctional programs, decisions are made with regard to "rehabilitating" a particular offender, using the variety of conditions and programs available to the correctional system. Recommendations for decisions are typically made by intake workers using a subjective weighting of numerous opinions, impressions, and perhaps a few educational and aptitude measures. The basis of the intake worker's judgements may be clear or unclear in his own mind. In either case they are likely based on uncorrected personal biases, since he rarely finds out whether or not his recommendations were, in fact, carried out and, if carried out, whether or not they led to a "rehabilitated" offender. Even if feedback to the intake worker were complete with regard to the effectiveness of his recommendations, as long as the basis for judgements remained implicit and intuitive, the correctional system would benefit only when experienced intake workers were on the job. It is only when recommendations are made on explicit dimensions and expectations that the system has the benefit of checking out expected relationships and passing along relevant information to new and inexperienced workers.

The prior probability approaches, supra at 240-41 are examples of classification systems useful for management purposes. Decisions regarding whether a particular offender is to be handled in the community or in an institutional setting can most rationally be made by considering, among other things, the offender's risk of parole violation. Surveillance level on parole and related aspects of caseload size may be determined in part by knowledge of probability of violation. In an interesting experiment in the California Department of Corrections, parees who represented low risk of parole failure (as predicted by Base Expectancy score) were assigned to minimum supervision caseloads (one contact with parole agent every three months). Violation rates of this experimental group were no higher during a 12-month follow-up than violation rates of a comparable control group which received regular parole supervision.

Prior probability classification systems may be used, not only as an aid to administrative decision-making, but also as a check on whether or not management decisions have the desired effect. In a study reported by Gottfredson, a correctional agency planned to release from an institution somewhat earlier than would be expected a group paroled to special reduced caseloads. The goal involved was that of decreased confinement costs for the selected group without any increase in parole violations. Two prediction classification schemes were needed to control known biases in selecting candidates for special parole programs: (1) a classification of offenders by parole violation risk group, and (2) a classification of expected prison terms under an indeterminate sentence law. Using

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46 Compared with minimal supervision, regular supervision involved one third more office contacts, twice as many field contacts, and more than twice as many collateral contacts.

these two classification systems, the study showed that: overall, men selected for the special program did not serve shorter terms; first termers selected for the special program tended to serve less time, while recidivists selected for the special program tended to serve more time; for the total selected group, no differences in parole violation were found; first termers selected tended to have markedly fewer violations during the first year on parole, while recidivists selected tended to have more such violations. Provided with these classification and accounting procedures, it was possible for the administrator to test whether or not paroling decisions had been made consistently with policy objectives.

There are a number of studies using prior probability and psychiatric-oriented classification systems which have implications for the kind of setting in which various subgroups of offenders may best be handled. The Borstal studies\(^4\) and Week's study of Highfields\(^5\) are examples of research showing a relationship between kind of inmate and kind of correctional setting. Both studies show the main advantage of open institutions over closed institutions to be for the better risk inmates. A study by Reiss\(^6\) suggests that all delinquents with relatively strong personal controls should be assigned to home and community placement; whereas, assignments to short terms in institutions or to community placement contingent on case progress should be made for delinquents with relatively weak personal controls; and assignment to closed institutions should be made for those with marked social deterioration or very immature personalities. Beck\(^7\) suggests that Socialized type delinquents should be placed in an open, relaxed, institutional atmosphere best suited to the diversion of their delinquent energy. Unsocialized Aggressive type delinquents should be placed in a controlled institutional environment, since permissiveness will only make this group more difficult to handle. Argyle,\(^8\) among his many recommendations, suggests that the Deviant Identification type delinquent should be separated from his peer group and installed in an essentially non-delinquent environment.

Several of the social perception and interaction classification systems have been used in making management recommendations or decisions. Gibbons\(^9\) bases his typologies of juvenile and adult offenders on patterns of social roles as defined by offense behavior and career, and by self concept and attitudes. Among other management recommendations, Gibbons suggests that Predatory Gang Delinquents be segregated from other boys in order to minimize victimization; that Non-Gang, Casual Delinquents be kept out of the correctional system, i.e. merely threatened and released in as much as no intervention is required in such cases; that the Automobile Thief—"Joyrider" be diverted from the "tough guy" pose in an institution by recreational and athletic programs; that Heroin Users be placed in protective environments typified by milieu-management programs such as Synanion; that Overly Aggressive Delinquents be forcibly controlled initially in a residential setting; etc.

Using Warren's Interpersonal Maturity Classification System: Juvenile,\(^10\) Jesness conducted a study\(^11\) in which inmates of a boys' training school were assigned to living units on the basis of delinquent subtype, and an attempt was made to develop and describe the management techniques most useful in dealing with each subtype. Warren and the staff of the Community Treatment Project have developed a treatment model which defines nine delinquent subtypes and prescribes both differential management and treatment techniques in the community for the various subtypes.\(^12\) The nature of controls to be used by the treatment agent, characteristics of a suitable placement, school, job, and leisure time recommendations are described.

**Classification for Treatment**

The function of treatment in a correctional program is to modify the characteristics of the offender and/or the aspects of his environment which are responsible for his involvement in deviant activities. From many treatment prescriptions, it is clear that, in addition to the long-term prevention of


\(^12\) Warren, *supra* note 36.
law violations, there is also the intent to bring about changes in the offender and in his society which will reduce his cost to society in other ways by, for example, decreasing the chances of the individual’s depending on welfare or unemployment rolls, or by increasing the individual’s responsibility as a family member and as a citizen.

One source of evidence for the importance of a classification system which differentiates among subgroups of the delinquent population is provided by treatment studies. Studies of the impact of treatment of client populations have been generally discouraging. No one has yet empirically answered Eysenck’s challenge that the proportion of mental patients improved following treatment is approximately the same as the spontaneous remission rate. Reviews of the correctional literature tell a similar story—some studies showing the treated to be considerably improved following treatment, some showing negative effects, and most showing no difference. Bailey, in a review of one hundred correctional outcome studies conducted between 1940 and 1959, noted that those studies which exhibited the most rigorous experimental designs reported either more harmful effects of treatment or no change. A fairly typical study is the one which produces contradictory evidence about improvement, with the treated subjects looking improved on some measures of change and either unimproved or in worse condition on other behavioral measures (see, for example, O’Brien).

How should these negative and inconclusive studies be viewed? One possibility is that, in our present state of knowledge, treaters simply don’t know how to bring about changes in individuals via a treatment process. However, another possible explanation is available, an explanation illustrated by the PICO I study and by the Camp Elliott study. Adams reported on a three-year follow-up of youthful offenders who had taken part in the Pilot Intensive Counseling study, a program of individual interview therapy. Subjects in the study were classified as “amenable” and “non-amenable” to treatment; both groups were then randomly assigned to treatment or nontreatment conditions. Parole performance of the four subgroups was compared on many criteria of performance. The treatment amenable group had a significantly better parole record than the nontreated amenable group. Furthermore, the treated nonamenable group had the poorest parole record of the four subgroups, poorer than either the nontreated amenable or the nontreated nonamenable.

The Camp Elliott study by Grant and Grant investigated an experimental living group program with military offenders. Among the several controlled conditions in this study were the interpersonal maturity levels of individual prisoners in the living and treatment groups and the characteristics of the supervisory team. The most important finding from this study was that the interaction between the maturity level of the subjects and the supervisor characteristics significantly affected later success rate of subjects. Not only were the treatment methods of some internally-oriented supervisory teams effective in increasing the success rates of high maturity offenders, but also, the treatment methods were markedly detrimental to the success chances of low maturity offenders. Furthermore, the externally-oriented supervisory team had the reverse effect on high and low maturity subjects. As long as the data of the Camp Elliott program was used as a study of single variables, its findings were comparable to those of many other correctional studies: that is, no demonstrable treatment (supervisory effectiveness) effect, and only a low, though significant, classification (maturity) effect.

In both the Camp Elliott and the PICO I studies, it was only when the interaction of the treatment and classification variables was considered that one found productive relationships with later success/failure rates. Thus, by lumping together all subjects, the beneficial effects of a treatment program on some subjects, together with the detrimental effects of the same treatment program on other subjects, may each mask and cancel out the other.

It is very likely that, in many treatment studies, this masking effect has occurred, either because the

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69 O’Brien, Personality Assessment as a Measure of Change Resulting from Group Psychotherapy with Male Juvenile Delinquents, California Youth Authority (1961).
data have not been viewed in sufficiently complex fashion, or because the crucial dimension, the classification of subjects in a treatment-relevant way, was missing. If one accepts the notion that offenders are different from each other in the reasons for their law violations, then it appears rather obvious that attempts to change the offender into a non-offender will vary in ways which are relevant to the cause. Ideally, the goals of the treatment will relate in some direct manner to the causes of the delinquency, and the treatment methods will relate specifically to the goals for the various offender subgroups.

Treatment decisions which must be made by a correctional organization involve in part some of the same issues involved in management decisions. For example, the correctional setting may be a treatment tool as well as a management tool. Mueller conducted a study in which “treatment” was defined as the setting in which the offender was handled. The “treatments” available were (a) release to direct parole in the community, (b) forestry camp, and (c) training school. Mueller found differential effects of these treatments over kinds of delinquents. Conforming and over-inhibited boys had higher parole success rates when assigned to non-institutional or open institutional programs. Assigning aggressive or insecure delinquents to any program did not lead to greater success. Subjects least like socialized delinquents and most like emotionally disturbed delinquents were more successful on direct parole, almost as successful in and following camp assignment, and more inclined to fail than succeed in and following a training school experience.

Another group of treatment variables which may be differentially prescribed for various subgroups of offenders relates to characteristics of the therapist. An excellent study attempting to match types of probation officers with types of youth on probation was carried out by Palmer. Ratings were made from recorded interviews with officers and probationers, and the ratings were cluster-analyzed. The analyses yielded three distinct empirical groupings of officers and eight groupings of youths. The empirical clusters of probationers were labeled: (a) Communicative-alert, (b) Passive-uncertain, (c) Verbally hostile-defensive, (d) Impulsive-anxious, (e) Dependent-anxious, (f) Independent-assertive, (g) Defiant-indifferent, (h) Wants to be helped and liked. As measured by an index of youths’ evaluation of the relationship with their officer and view of the overall effectiveness of probation, a number of interactions between officer type and probationer type were shown. For example, Relationship/Self-expression officers achieved their best results with youths who were Communicative-alert, Impulsive-anxious, or Verbally hostile-defensive. Surveillance/Self-control officers had their greatest difficulties with individuals who were Verbally hostile-defensive or Defiant-indifferent. Surveillance/Self-expressing officers seemed uniquely matched with probationers who wanted to be helped and liked.

A third group of treatment variables which may be differentially prescribed for various subgroups of offenders relates to characteristics of programs and specific therapeutic methods. Many clinical reports can be found in the literature which suggest differential programs for specified kinds of offenders. To date, few programs have offered any supportive research evidence for stated hypotheses. In the line of recommendations, Jenkins and Hewitt have suggested the following treatment program for the Unsocialized Aggressive delinquent. There should be a warm and accepting attitude on the part of the therapist. He should, in small steps, establish and effectively maintain pressure toward required behavior and against certain objectionable types of behavior. Jenkins and Hewitt believe that the methods suitable for use with the Neurotic child will make the Unsocialized Aggressive child worse; for example, the encouragement of free expression of aggression for this type of child does not help because his well of hostility is bottomless. Jenkins and Hewitt’s thinking on the treatment of the Socialized or Adaptive delinquent appears to be based on the assumption that, for this child, the delinquent behavior is a function of social status, role, peer associates, group identifications, and the attitudes and values learned through social contacts. The treatment plan, therefore, is based on the child’s fundamental socialization, capacity for loyalty, capacity to identify with a masculine, socialized adult. The methods the authors suggest are somewhat similar to those suggested by Clifford Shaw and his associates in the Area Projects in
Chicago for use with the group often known as Cultural delinquents.

In their book, Origins of Crime; McCord, McCord and Zola suggest six different treatment plans for six offense types—criminals who commit a wide range of anti-social acts, those who commit crimes against property, those who commit crimes against persons, sex criminals, drunkards, and traffic offenders. The recommended treatment for those who commit crimes against property, for example, centers on the giving of attention and recognition, and on the provision of consistent, nonpunitive discipline.

Also in the line of recommendations for treatment, Gibbons offers suggestions for differential therapeutic methods for his various subtypes defined by social role. For the juvenile subtypes, Gibbons recommends group therapy for Gang delinquents and Joyriders, intensive individual psychotherapy for Overly Aggressive delinquents, depth psychotherapy for Behavior Problem delinquents, milieu therapy for Heroin Users, group or individual client-centered counseling and family therapy for Female delinquents, and no treatment for Casual delinquents. For the adult subtypes, Gibbons recommends group therapy for Semiprofessional Property Offenders and Violent Sex Offenders, client-centered counseling for Naive Check Forgers and Nonviolent Sex Offenders, intense individual psychotherapy for "psychopathic" Assaultists, no treatment but help with community adjustment for Professional "Fringe" Violators, Embezzlers, Personal Offenders, and "One Time Losers," and, lastly, altering society so that consistent law enforcement is maintained is recommended treatment for White Collar Criminals.

In an attempt to increase the precision and effectiveness of social casework practice, Freeman, Hildebrand and Ayre, working at the Pittsburgh Family and Children's Service, have developed a typology of clients with corollary treatment techniques. While this typology is not specific to the offender population, it is an excellent example of a treatment model built from clinical experience and clinical need. The underlying dimension relating the types is a continuum of levels of emotional maturity or ego autonomy.

The authors suggest "That the treatment techniques most appropriate to the task of strengthening the coping powers of each type are prescribed by the very nature of the ego structure and the particular stage of ego development." This typology has much in common with the typologies of Hunt, MacGregor, and Warren in that they are all also based on an underlying developmental growth continuum.

MacGregor, in a research study of the families of middle class delinquent youth, has developed a typology of family patterns. Products of the study are a set of propositions by which families may be classified for treatment planning. The family diagnosis, labeled in terms of the arrest in development of the nominal patient, are:

- Type A Infantile functioning in adolescence (schizophrenia);
- Type B Childish function in adolescence or preadolescence (character disorder), the Autocrats;
- Type C Juvenile functioning in adolescence or preadolescence (childhood neurosis), the Intimidated Youth;
- Type D Preadolescence functioning in adolescence (adjustment reaction of adolescence), the Rebels.

The bases of the diagnosis involves ratings of such factors as family response to crisis, family relationship with community, family leadership and exploitation, sibling interaction, and family communicative style. The general stated therapeutic goal is to help a family allow its youth to advance beyond the developmental arrest in which all participated. The major method for achieving this goal is multiple impact therapy, i.e., two days of concurrent sessions with varying combinations of therapeutic team and family members.

The following are some treatment recommendations made for Type D: The defiant Rebel should not have his responsibilities diminished. Rebellion should not be encouraged, but respect for the Rebel's opinions and standards should be shown by the treatment team. Identification of the child with the father should be pointed out to the father, etc.

67 Freeman, Hildebrand, and Ayre, A Classification System that Prescribes Treatment, 46 Social Casework 423-29 (1965).
68 Id. at 429.
70 MacGregor, Developmental Considerations in Psychotherapy With Children and Youth (paper presented at the annual conference of the American Psychological Association, St. Louis, 1962).
71 Warren, supra note 36.
72 MacGregor, supra note 70.
and he should be encouraged to offer more open support to his wife.

Treatment recommendations for Type B include: Help the mother to turn to the father, rather than the child, for emotional release, and help the father offer the mother emotional support. Help parents get over fear of exposing themselves to competitive evaluation at home. Encourage father to trust himself to intervene more directly to influence the children. Help mother relinquish her aggressive power role and trust husband’s leadership. As a model, treatment team members should demonstrate healthy and vigorous interaction for the parents. Mother should be encouraged to develop interests other than child-rearing. Father-child interaction should be encouraged by having them, in the mother’s absence, discuss their dealings with her. Ways of decreasing parental dependence on him should be discussed directly with the child. The Autocrat should be made to see that he is being exploited as much as he is controlling others. The Autocrat should be prepared for the changing balance of forces in the family, and the parents should be prepared to meet the tests of the change which the Autocrat will present.

Based on a theory of socialization—Conceptual Systems,73 Hunt and Hardt have related developmental stage, i.e., Conceptual Level, to delinquent behavior and delinquent orientations, and have speculated about the implications of the theoretical model for differential treatment of delinquents.74 Five Conceptual Levels are defined, each level characterizing the person’s interpersonal orientation, that is, his knowledge about himself and the relation between himself and others. A major application of the Conceptual System model has occurred in the field of education.75 Diagnoses of Conceptual Level were made on students in a lower class, junior high school population, and students classified at one of three lowest levels were assigned to classrooms which were homogeneous by developmental stage. Differential management and teaching methods were reported by teachers handling the various groups. On the basis of this study, Hunt defined optimal environments for individuals at the three stages. Since research has shown that these stages bear relationships to delinquent behavior and orientation,76 Hunt and Hardt have drawn implications from the educational study for the differential treatment of delinquents.

The overall change goal in this system is movement from a lower to a higher conceptual stage. In the context of this general aim, specific suggestions are made regarding treatment methods at each level. For example, boys classified as Sub I “require activities (rather than discussions) focused on the present and organized very clearly.”77 The training agent should offer the Sub I boy “controlled experiences in which he is tangibly responsible for outcomes.” For the Stage I boy, the training agent initially should exhibit authority clearly, since persons at this stage are very dependent on normative expectations. Eventually the “agent should attempt to encourage greater self-responsibility and an appreciation of alternative solutions.” In working with Stage II boys, the training agent should help the boy discuss his behavior and consider alternative solutions to his problems. A long-term goal for this boy would be to acquire empathy by beginning to understand that some of the feelings of others are similar to his own.

The work of Warren and associates at the California Youth Authority’s Community Treatment Project is based on the theory of Levels of Interpersonal Maturity, a formulation describing a sequence of personality integrations in normal childhood development.78 In many ways similar to the Conceptual System theory, the Interpersonal Maturity Level Classification system focuses upon the ways in which the individual is able to perceive himself and the world, and understand what is happening among others as well as between himself and others. According to the theory, seven successive stages of interpersonal maturity characterize psychological development, ranging from the interpersonal reactions of a new born infant to an ideal of social maturity. Every person does not necessarily work his way through each stage, and may become fixed at any particular level. The range of maturity levels found in an offender population is from Maturity Level 2 (Integration Level 2 or I2) to Maturity Level 5 (I5). Level 5 occurs with relative frequency in an adult popula-
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1971

An elaboration of the original classification system was developed by Warren in 1961 for use in the Community Treatment Project (CTP). After assuming that a diagnosis of Maturity Level is identified a group of individuals with a common level of perceptual differentiation, it became apparent that not all of the individuals in this group responded to this perceptual level in the same way. An attempt was then made to classify types within each Maturity Level according to response set. In this manner, nine delinquent subtypes were identified, i.e., two I_2 subtypes, three I_3 subtypes and four I_4 subtypes. In the 1961 elaboration, the nine subtypes were described by means of item definitions characterizing the manner in which the members of each subgroup perceive the world, and are perceived by others. At the same time, management and treatment plans were prescribed for each subtype. These management and treatment prescriptions grew primarily from the theory, but also, to some extent, from previous work with military offenders and with prison inmates.

Based on the 1961 treatment model, the CTP began to treat serious delinquents in a community setting instead of an institutional setting. In the nine years of the Project's existence, the characteristics items for each subtype have increased and become more detailed, and the treatment strategies have become increasingly specific and realistic. Current descriptions of the nine delinquent subtypes, with predicted most effective intervention or treatment plans, combine to make up the 1966 edition of the treatment model. This model is much too lengthy and elaborate to review here. It is possible only to note the various areas covered by the intervention prescriptions. The specific goals of intervention for each subtype follow from the nature of the problem, as defined in the characteristics items. From each goal, a specific intervention method follows. The treatment plan prescribes: the characteristics of an appropriate placement, preferred family treatment, school and/or job recommendations, sources of community support, leisure time activities, recommendations regarding peer group variables, required controls, specific therapeutic methods, characteristics of an appropriate treatment agent, and support required by the treatment agent working with the subtype.

Cross-Classification of Typologies

During 1966, a conference on typologies of delinquents was sponsored by NIMH and attended by a number of the investigators whose work is reported in this paper—Hunt, Hurwitz, Jesness, MacGregor, Makkay, Reiss, Quay, and Warren. David Bordua, as well as David Twain and Seymour Rubenfeld of the NIMH staff, also participated in the conference. A cross-tabulation of the classification systems was attempted. Three or four broad bands across the classification systems were identified and tentatively agreed upon by the conference participants. A further breakdown into six cross-classification bands seems also possible.

Chart A presents a cross-classification of the typologies represented at the NIMH conference plus a tentative cross-tabulation of other classification schemes.

Within the first of these bands, to be called for purposes of this paper the Asocial type, are included Hunt's Sub I type, Hurwitz's Type II, Jesness's Immature-aggressive and Immature-passive, MacGregor's Schizophrenic youth, Makkay's Antisocial Character Disorder—Primitive (aggressive and passive-aggressive), Quay's children high on Unsocialized-psychopathic fac-

It should be noted that, of those who presented classification schemes, all but Quay referred to their system as a typology. Quay prefers to view classifications in terms of dimensions of behavior. See Quay, The Structure of Children's Behavior Disorders (1965), (colloquia at the University of Minnesota and the University of Maryland). See also, Personality Dimensions in Delinquent Males As Inferred from the Factor Analysis of Behavior Ratings, 1 J. Research in Crime and Delinquency, 33–37 (1964).

Since the cross-classification presented here is somewhat more complex than the one discussed at the NIMH conference, the responsibility for errors of placement should be viewed as entirely that of the author.

Several of the classification schemes reviewed for this paper were not included in the cross-classification because the typology did not make enough discriminations (Aichorn, Lejins) because the typology purportedly differentiated among disturbance areas within the individual rather than among individuals (Redl), or because the nature of the underlying bases of the system did not relate to those charted (Ghim, Walter Miller).
<table>
<thead>
<tr>
<th>Subtypes</th>
<th>Jesness</th>
<th>Hunt</th>
<th>Hurwitz</th>
<th>MacGregor</th>
<th>Quay</th>
<th>Retzl</th>
<th>Warren</th>
<th>APA</th>
<th>Argyle</th>
<th>Gibbons</th>
<th>Jenkins and Hewitt</th>
<th>McCord</th>
<th>Reckless</th>
<th>Schrag</th>
<th>Studt</th>
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</thead>
<tbody>
<tr>
<td>1. Asocial</td>
<td>Sub I</td>
<td>Type II</td>
<td>Schizophrenic</td>
<td>Antisocial Character Disorder-Primitive</td>
<td>Unsocialized-psychopath</td>
<td>Iα</td>
<td>Passive-aggressive personality</td>
<td>Lack of sympathy</td>
<td>Overly aggressive</td>
<td>Unsocialized aggressive</td>
<td>Asocial</td>
<td>Isolate</td>
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<tr>
<td>Aggressive</td>
<td>Immature, aggressive</td>
<td>Immature, passive</td>
<td>Antisocial Character Disorder-Organized</td>
<td>Passive-aggressive</td>
<td>Asocial, aggressive</td>
<td>Asocial, passive</td>
<td>Passive-aggressive personality</td>
<td>Inadequate superego</td>
<td>Conformist</td>
<td>/Socialized/</td>
<td>receiver</td>
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<tr>
<td>Passive</td>
<td>Immature, aggressive</td>
<td>Immature, passive</td>
<td>Antisocial Character Disorder-Organized</td>
<td>Passive-aggressive</td>
<td>Conformist, Immature</td>
<td>Conformist, Cultural</td>
<td>Inadequate superego</td>
<td>Gang offenders</td>
<td>Anti-social</td>
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<td>2. Conformist</td>
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<tr>
<td>Delinquently-oriented</td>
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<tr>
<td>3. Antisocial-manipulator</td>
<td>Manipulator</td>
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<tr>
<td>Neurotic</td>
<td>Stage II</td>
<td>Type III</td>
<td>Neurotic</td>
<td>Relatively weak ego</td>
<td>Iα</td>
<td>Neurotic</td>
<td>Sociopathic personality</td>
<td>Weak ego control</td>
<td>Joyrider</td>
<td>Neurotic Personality</td>
<td>Prosocial</td>
<td>Love-seeker</td>
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<td>Acting-out</td>
<td>Neurotic, acting-out</td>
<td>Neurotic, anxious</td>
<td>Neurotic, depressed</td>
<td>Intimidated</td>
<td>Neurotic, disturbed</td>
<td>Neurotic, anxious</td>
<td>Neurotic, anxious</td>
<td>Behavior problems</td>
<td>Neurotic withdrawn</td>
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<td>Neurotic, anxious</td>
<td>Neurotic, depressed</td>
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<td>Neurotic, disturbed</td>
<td>Neurotic, anxious</td>
<td>Neurotic, anxious</td>
<td>Behavior problems</td>
<td>Neurotic withdrawn</td>
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<tr>
<td>5. Subcultural-identifier</td>
<td>Cultural delinquent</td>
<td>Stage II</td>
<td>Type I</td>
<td>Rebel</td>
<td>Subcultural</td>
<td>Relatively integrated</td>
<td>Iα</td>
<td>Cultural identifier</td>
<td>Deviant identification</td>
<td>Gang offenders</td>
<td>Socialized</td>
<td>Anti-social</td>
<td>Learner</td>
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<tr>
<td>6. Situational</td>
<td>Stage II</td>
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<td>Types not cross-classified</td>
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</tbody>
</table>

*CHART A
CROSS-CLASSIFICATION OF OFFENDER TYPOLOGIES

**Jesness Immature, aggressive**
Immature, passive
Socialized conformist
Nondelinquently-oriented
Conformist
Aggressive
Passive

**Hunt**
Antisocial Character Disorder-Primitive
Passive-aggressive
Conformist, Immature
Conformist, Cultural

**Hurwitz**
Asocial Character Disorder-Primitive
Asocial, aggressive
Asocial, passive

**MacGregor**
Schizophrenic
Aggressive

**Quay**
Antisocial Character Disorder-Primitive
Unsocialized-psychopath

**Retzl**
Passive-aggressive
Passive-aggressive

**Warren**
Asocial, aggressive
Passive-aggressive

**APA**
Lack of sympathy
Overly aggressive

**Argyle**
Neurotic, acting-out
Passive-aggressive

**Gibbons**
Asocial, aggressive
Passive-aggressive

**Jenkins and Hewitt**
Passive-aggressive personality
Inadequate superego

**McCord**
Conformist
Gang offenders

**Reckless**
Overly aggressive

**Schrag**
Unsocialized aggressive

**Studt**
Asocial
tor, and Warren’s $I_2$ Asocial aggressives and Asocial passives. To this general classification band tentatively can be added: Argyle’s Lack of Sympathy type, Gibbon’s Overly Aggressive delinquent, Jenkins and Hewitt’s Unsocialized Aggressive delinquent, Schrag’s Antisocial type, and Studt’s Isolate. Behavioral and family history characteristics of offenders who fall in this first classification band are generally agreed upon. The offender classified in this band is described as primitive, under-inhibited, impulsive, hostile, insecure, inadequate, maladaptive, concretely negativistic, undifferentiated, demanding of immediate gratification, non-trusting, thoroughly egocentric, alienated, etc. It is generally agreed that this type of offender does not see himself as delinquent or criminal, but rather seems himself as the victim of an unreasonable, hostile and confusing world. Those typologists who have investigated etiological factors have consistently shown extreme emotional deprivation, generalized and continual parental rejection, and frequently, physical cruelty or abandonment. Most investigators who relate to the treatment question for this type recommend a setting which offers a clear and concrete structure of low pressure, warmth, and acceptance from an extremely patient parent substitute, slow and supportive direction toward conformity, and attempts to reduce the fear of abandonment and rejection via teaching rather than psychotherapy.

The second broad classification band which cuts across typologies, the Conformist type, includes Hunt’s Stage I group, Jesness’s Immature-passive and Socialized conformist, Makkay’s Antisocial Character Disorder-Organized (passive-aggressive), Quay’s children high on Inadequate-maturity factor, and Warren’s $I_2$ Immature conformists and Cultural conformists. To this classification band tentatively can be added: Argyle’s Inadequate Superego delinquent, Gibbon’s Gang offenders, McCord’s Conformists, and Studt’s Receiver. Some typologies do not differentiate between delinquent behavior which is imitated or “conformed to” from delinquent behavior which grows out of an internalized value system, thus, it is difficult to know whether Reiss’s Relatively integrated delinquent, Schrag’s Antisocial type, Jenkins and Hewitt’s Socialized delinquent, and children high on Quay’s Subcultural factor belong partially in this second classification band, or whether all delinquents classified in these ways belong in the fifth band, described below. The offender classified in this band is described as concerned with power, searching for structure, dominated by the need for social approval, conforming to external pressure, rule-oriented, unable to empathize, cognitively concrete, having low self esteem, conventional and stereotyped in understanding, oriented to short-term goals, having superficial relationships with others, and self-representing as problem-free. This Conformist group has been subdivided further by some investigators into groups consisting of those individuals whose self perceptions are delinquent and who conform primarily to a delinquent peer group and individuals whose self perception is nondelinquent and who conform to the immediate power structure, delinquent or nondelinquent. Investigators who have studied etiological factors for the Conformists have found patterns of family helplessness or indifference (rather than open rejection), inability to meet the dependency needs of the children, inconsistent structure and discipline, and absence of adequate adult models. Treatment recommendations for offenders in this classification band include use of a clear, consistent external structure in which concern for the offender can be expressed via controls of his behavior, use of group treatment to increase social perceptiveness, use of peer group as a pressure toward nondelinquency, and teaching of skills in order to help change self-definition in the direction of adequacy and independence.

A third clear-cut cross-classification band—the Antisocial-Manipulator—includes Jesness’s Manipulator, MacGregor’s Autocrat, Makkay’s Antisocial Character Disorder-O rganized (aggressive), Reiss’s Defective Superego type, and Warren’s $I_3$ Manipulator. To this classification band can tentatively be added: McCord’s Aggressive (psychopathic) type, Reckless’s Psychopath, 85 These cross-classifications have not been checked with the authors of the classification systems.

86 The definitions of subtype characteristics, the descriptions of etiological factors, the treatment recommendations—none of these for this subtype nor the following subtypes do justice to the detailed and extensive work of some investigators. The intent here is simply to indicate in very general terms examples of apparently agreed-upon and disagreed-upon descriptions and prescriptions.

87 According to Jesness, the Immature-passive group splits, with about half of the group most similar to the Asocial, passives in classification band one and the other half most similar to Immature conformists of classification band two.
Schrag's Pseudosocial type, and Studt's Manipulator. The offender classified in this band is described as not having internalized conventional norms, guilt-free, self-satisfied, power-oriented, counteractive to the authority system, nontrust-
ing, emotionally insulated, cynical, callous and extremely hostile. Those typologists who have investigated etiological factors have found distrustful and angry families in which members are involved in competitive and mutually exploitative patterns, parents who feel deprived and who expect the children to meet their dependency needs, alternating parental patterns of overindulgence and frustration of the children, and inconsistent parental patterns of affection and rejection. In general, investigators report a discouraging picture as far as the treatment of this group of off-

ders is concerned. Treatment recommendations take two distinct paths—one path being that of encouraging the Manipulator to develop his manipulative skills in a socially-acceptable direction, and the other path being that of attempting to allow the offender to work through his childhood trauma in a treatment relationship which will revive his capacity to depend on and be concerned about others. The first path makes the assumption that it is possible to have a non-
destructive, nondelinquent "psychopath," which many consider a contradiction in terms. Treatment recommendations toward the goal of socially ac-
ceptable manipulation include increasing the social perceptiveness and ability to predict via group treatment, and increasing opportunities for legitimate accomplishments via training in job, social, athletic, etc. skills. The second path clearly involves a serious and possibly very long-term individual treatment effort, and one which has no guarantees of success. The latter course is a dif-

cult one to fit into most social agency programs.

The fourth classification band—the Neurotic Offender—including Hunt's Stage II group, Hurwitz's Type III, Jesness's Neurotic (acting-out, anxious, or depressed) types, MacGregor's Inti-
mitated youth, Makkay's Neurotic, Quay's chil-
dren high on Neurotic-disturbed factor, Reiss's Relatively Weak Ego type, and Warren's I, Acting-out Neurotic and Anxious Neurotic types. To this classification band can tentatively be added: Argyle's Weak Ego-control type, Gibbon's Joy-

rider and Behavior Problem types, Jenkins and Hewitt's Over-inhibited type, McCord's Neurotic-widow, Reckless's Neurotic personality, Schrag's Prosocial type, and Studt's Love-seeker. As is indicated by the terms "intimidated," "dis-
turned," "overinhibited," "anxious," "depressed," and "withdrawn," most investigators have identi-

fied an offender type in which symptoms of malad-
justment are clearly visible. Some investigators have identified a second subgroup of neurotic offenders whose inner dynamics are quite similar to the visibly disturbed offender, but whose inner conflicts and anxieties are "acted-out" rather than appearing as neurotic symptoms. In addition to Jesness's and Warren's Acting-out Neurotic types, Gibbon's Joyrider and Studt's Love-seeker types appear to be most like the second group of Neurotic offenders. Investigators of etiological factors sug-

gest that this type of offender is often the victim of parental anxiety or neurotic conflicts between the parents, with the offense viewed as a masculine identity striving. Some investigators have found a fairly typical role-reversal phenomenon in which the child, at an early age, finds himself expected to play a mature, responsible role with a child-like parent. It has been suggested by some authors that neurotic delinquency is primarily a middle class pattern. However, figures from the Community Treatment Project show that, although middle class offenders make up a larger proportion of the Neurotic subtypes than of other subtypes, by far the largest proportion of the Neurotic sub-
groups, as well as other subgroups, is lower class. Treatment recommendations for the Neurotic offender focus on the resolution of the neurotic conflict through insight into family or individual dynamics which lead to the offense behavior. Such conflict resolution is sought through family group therapy and/or by individual or group psycho-

therapy for the offender.

The fifth classification band—the Subcultural-Identifier—including Hunt's Stage II, Hurwitz's Type I, Jesness's Cultural delinquent, MacGregor's Rebel, Makkay's Subcultural type, Quay's chil-
dren high on Subcultural factor, Reiss's Relatively
integrated delinquent, and Warren’s I₄ Cultural Identifier. To this classification band can be tenta-
vively added: Argyle’s Deviant Identification type, Gibbon’s Gang Offenders, Jenkins and Hewitt’s
Socialized type, Schrag’s Antisocial type, and Studt’s Learner. The essential characteristic of
this type of offender is that the individual, although developing “normally” in most respects,
has internalized the value system of a deviant subculture. Thus violation behavior, for example
stealing from representatives of the larger culture, becomes simply an expression of what the Subcul-
tural-Identifier considers “right.” Investigators describe this offender type as interpersonally re-
sponsive, psychosocially healthy, loyal to his own principles and his own group, adequate, proud,
suspicious of the authority system, capable of identifying himself with a mature socialized per-
son, and accessible to new experiences. As was noted in the description of the second classifica-
tion band, those investigators who focused on offender behavior and delinquent attitudes have not
distinguished between the Subcultural-Identifier and the Subcultural-Conformist. At these levels of
observation, the two groups appear similar: highly peer group oriented, distrusting of the authority
system, comfortable with “delinquent” label, extensive delinquent histories, problems viewed as
“external” rather than “internal,” and apparently self-satisfied. In addition, both types include high
proportions of minority group members. Striking differences between the two groups appear when
the foci of observation are family stability and concern, individual capacity for self-knowledge and
self-evaluation and differentiated perception of others, interpersonal relationship ability, goal
orientation, concern with status, time perspective, etc. This series of characteristics becomes crucial
to assessment of the individual’s potential for becoming a contributing citizen and for making
management and treatment decisions. Two levels of treatment appear to be recommended for the
Subcultural-Identifier, one focused on stopping the violation behavior and one focused on changing
the content of his value system. For the former, suggestions for stopping the violation behavior
include demonstrating to the offender through use of the “lock up” that “crime does not pay”
and teaching the individual how to meet status and material needs in ways acceptable to the larger
culture. The second level of treatment involves working through a relationship with a strong identity
model who is a representative of the larger culture and thus enlarging the offender’s concept of
his in-group and broadening his self-definition.

The sixth classification band—the Situational Offender—includes Hunt’s Stage II, and War-
ren’s I₄ Situational Emotional Reaction type. To these may be tentatively added Gibbon’s Casual
Delinquent and Reckless’s Offender of the Moment. Offenders in this group are represented as
normal individuals who give no evidence of long-
term psychoneurosis or psychopathy and for
whom crime is ego-alien. These individuals have
presumably found themselves involved in violation behavior as a result of accidental circumstances or a specific, nonrecurring situation which taxed their normal coping capacities. Treatment is either considered unnecessary or, if offered, is oriented toward helping the individual solve the specific social or personal problem which led to law-breaking.

In summarizing the cross-tabulation chart, it appears that six classification bands can be ten-
vatively identified as cutting across various typologies. The minimum number of identified sub-
types within any of the included typologies is three. Of those systems which involve only a three-
way breakdown of the offender population, the single agreed-upon subtype is the one referred to in this paper as Neurotic. Of the sixteen systems charted, ten involve either a three-way or a four-
way breakdown. Of these ten, the most typical pattern includes counterparts of the following
subtypes: Neurotic (10 out of 10), Subcultural-Identifier (8 out of 10), Asocial (7 out of 10) Con-
formist (5 out of 10) and Antisocial-manipulator (5 out of 10). Classification systems which involve
more than a five-way breakdown of the offender population add the Situational type and/or sub-
divide the Asocial, the Conformist, and the Neu-
rotic categories. Warren’s typology involves the largest number of subgroups, defining—in addi-
tion to the Antisocial-Manipulator, the Subcultural-Identifier and the Situational—two kinds of
Asocial types (aggressive and passive), two kinds
of Conformist types (delinquency-oriented and nondelinquency-oriented), and two kinds of Neurotic types (anxious and acting-out), for a total of nine subtypes.

It should be noted that most of the typologies are based on studies of juvenile boys. Only Hunt, Schrag, and Warren have specifically included girls or women, but these investigators have found their typologies to be equally appropriate for the female population. Schrag's typology is based primarily on adult offenders (although institutionalized juveniles have been classified by some of Schrag's followers), and the original form of Warren's typology (Interpersonal Maturity Levels, without subtypes) was found to be as appropriate for an adult as a juvenile population. It is an assumption, albeit justified, that the six-band cross-classification system is an adequate way of subdividing female juvenile offenders as well as adult offenders.

One measure of the appropriateness of cross-tabulation of subtypes from various classification systems might be the degree of similarity between the proportions of offenders placed in each of the various classification bands. Many of the typologies do not report these data. Even for those who do, the major differences in the nature of the populations studied are so great as to make comparisons of questionable meaning. Table I presents the estimated proportions in the six classification bands, using data from five studies of juvenile offenders. The Jesness data are based on a study of young boys (ages 8 to 14) committed to a state training school. The Community Treatment Project (CTP) data are based on boys and girls (ages 9 to 18) committed to the State Youth Authority from juvenile courts and declared eligible for participation in an intensive community program. The Preston Typology Study (PTS) data are based on older adolescent boys committed to a state training school. All three of these study groups contain a population of serious or habitual delinquents. The Hurwitz data are based on cases appearing before the juvenile court. The Reiss data are based on 46% of a juvenile probation population, the 46% identified as those probationers who were examined by court psychiatrists. These last two study groups may be generally assumed to include less serious delinquents than those in the first three groups.

The higher proportion of the Conformist type in the PTS data than in the Jesness data and the CTP data probably reflects the large number of recidivists in the PTS population. Warren and Palmer have shown a high failure rate for Conformists (compared with most other subtypes) following traditional correctional programs. The Hurwitz data in Table I indicate that Hurwitz's Type II (34%) and Type I (45%) probably contain offenders which should more accurately be cross-tabulated in other classification bands. It is likely that some individuals in Type II could be classified as Antisocial-Manipulators, and that some individuals in Type I could be classified as Conformists. Another possibility is that the Subcultural-Identifier group represents a larger proportion of a court-appearance population than it does of the more serious habitual delinquent population committed to a State program. This possibility is in line with Reiss's assumption that a large number of the 54% of the probationers in his study, who were not classified by court psychiatrists, belong in his Relatively Integrated subtype (included here in the Subcultural-Identifier group).

Based on descriptive data, a cross-classification of several important offender typologies is apparently possible. In the present state of the science of corrections, this much consistency in the data of various studies is a most encouraging finding, leading us to feel that the identifiable subtypes of offenders reflect at least a partial "truth" about the population rather than simply a convenient fantasy in the mind of the criminologist. The fact that a cross-classification is possible is even more impressive when one considers the varieties of methods of deriving the subtypes— theoretical

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**TABLE I**

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<thead>
<tr>
<th>Subtype</th>
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<th>CTP Data N</th>
<th>PTS Data N</th>
<th>Hurwitz Data N</th>
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<td>18% 210</td>
<td>10% 400</td>
<td>10% 371</td>
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<tr>
<td>Total</td>
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* 54% of Reiss's subjects were not classified.

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formulations, empirical-observational methods, multivariate analysis procedures. Additionally, it is important to note that not only is it possible to find similarities in the descriptions of offender characteristics across typologies, but also that consistency is evident in descriptions of etiological and background factors and in treatment prescriptions for seemingly similar subtypes.

Having said that typologies are apparently operating on a common ground, it is necessary to add that much crucial information is missing which would be necessary in order to determine whether or not any two subtypes are exact counterparts. The ultimate test of such a cross-classification would come from a study in which a typing of individuals in a single population was conducted by experts in the use of each of the various classification systems. Such a study would not only clarify the extent to which the subtypes in one system are actual counterparts of those in another system, but also lead typologists to increase the precision of their subtype definitions.

Until the matter of classification of offenders is handled in some generally agreed-upon way, it is almost impossible to compare treatment programs being conducted in various parts of the country. If, from the cross-classification study suggested above, a group of the leading typologists could agree on a common taxonomy, the path would be open for a great number of significant studies. The next important step would be the determination of the most efficient diagnostic methods. Once the categories had been agreed upon, a number of scientists in various parts of the country could work on the problem simultaneously. Additionally, interrelated studies of management and treatment methods could be conducted—trying a variety of well-defined treatment approaches to the same category of offender. It would then be realistic to attempt the replication of experimental approaches, suggested by Keith Griffiths in his Correctional Research Model.

There is evidence that both at the theoretician and practitioner levels, the field is ready to move toward treatment programs which are based on categorizing the range of problems represented in the correctional population. Not only is there a ready ear for such conceptualizing, but it also appears that a time of consensus among typologists may be approaching in which a rational, correctional treatment model may be begun.

To date, little work has been done toward utilizing typologies for building differential treatment strategies. The work which has been done has occurred largely in small experimental programs. It is right and proper for experimental programs to be in the lead and for the rest of the field to be eyeing their exploratory work with hope. But the size of the gap between these programs and the generally undeveloped state of correctional practice is crucial in estimating what programmatic utility the typological consensus has in the foreseeable future. Are the classification concepts or the corollary program prescriptions so esoteric that only academicians can understand them? Are the treatment methods which might arise from a rational correctional model such that the average practitioner could not apply them?

While the typologies reviewed here vary considerably in the complexity of their derivation, the essence of the correctional model which follows from a treatment-relevant typology is a rather simple idea. The idea is this: The goals of correctional treatment with any offender should relate in some direct manner to the causes or meaning of the law violation, and the treatment methods should relate specifically to the goals. This idea, when put forth with examples, makes the greatest kind of sense to the practitioner who is supposed to “do something” about delinquent behavior.

If the idea is simple, what about its implementation? Assuming an agreed-upon taxonomy, what about the methods of individual diagnosis? In order to move easily beyond small experimental programs into large operating programs, it is essential that the classification be done via easy-to-administer-and-score-measures or via an already-established clinical process in the correctional agency. Most correctional programs now have a time and place set aside for intake and classification procedures, so that the machinery for typing offenders may be well available. As for methods of obtaining the diagnosis, work toward

Footnotes:

44 In the July, 1966 issue of Crime and Delinquency, vol. 12, no. 3, Glaser, The New Correctional Era-Implications for Manpower and Training; Gilman, Problems and Progress in Staff Training; and Nelson, Strategies for Action in Meeting Correctional Manpower and Program Needs, all point to the importance of developing treatment-relevant classification systems and differential treatment methods.

45 Demands for training in differential treatment methods come to the California Youth Authority's Community Treatment Project from correctional agencies, large and small, both within and outside, California.
simpler procedures should continue after an agreed-upon typology is available. Of the sixteen typologists represented in the cross-classification chart, several do not specify diagnostic methods, since presumably the major concern in the development of the typology was not the classification of individual offenders (Argyle, Gibbons, McCord, Reckless). The Jenkins and Hewitt, Jesness, and Hurwitz typologies grew out of factor analytic procedures, utilizing many tests and clinical judgments and thus do not lend themselves to individual diagnosis. The Reiss typology was based on psychiatric judgements. The Studt types were derived from a series of intensive interviews with offenders and with others who knew the inmates well. Although the diagnosis of Antisocial Character Disorder is well spelled out by Makkay, differentiations of subtypes within that category are based on a fairly lengthy observation period, with the criteria not well defined as yet. The MacGregor diagnosis is based on a series of interviews with the entire family of the delinquent. Thus, at this point in time, none of the above-listed classification systems represents a practical method for the diagnosis of large correctional populations.

In applying the Warren typology, the primary instrument for diagnosing individuals is a tape-recorded interview with the delinquent subject. A disadvantage of this procedure is the training required to achieve rater reliability. The Warren system currently has some advantages over the others in that hundreds of delinquents have been interviewed sequentially over time. Both high interrater agreement and high reliability over time have been shown. In addition, sets of specific characteristics items to be rated have been developed for each delinquent subtype.

The classification systems having the simplest diagnostic methods are those of Hunt, Quay, and Schrag. Hunt’s methods involve a simple T/F instrument and a rating made from a set of subject-completed sentences. Although the discrimination made in Hunt’s Conceptual Levels system are clearly treatment-relevant, further work in studying offenders with the typology is needed to determine whether or not the three-way classification of the delinquent population is sufficient for prescribing treatment.

As noted earlier, Quay does not view his work as leading to types of individuals, but rather to a classification of behavior dimensions. An individual is represented by a profile of behavior dimension scores. Those individuals who have similar profiles may presumably be grouped together in terms of treatment need. The diagnostic instruments developed by Quay are easy to administer and score, involving check lists and ratings of the individual’s behavioral characteristics. The measurements can be shown to have adequate reliability. The difficulty with using profiles is that, since few individuals have a simple profile—i.e., a high score on one factor and low scores on all other factors—a skilled judgement must be made with regard to grouping for intervention purposes in the majority of cases.

Schrag’s typology has been used primarily to study subcultures within the prison walls, and Schrag has not wished to claim more general applicability for it in the absence of research data. Within the institutional setting, 50% to 70% of individuals can be typed easily using questionnaire and interview data. The remaining individuals are identified as mixed types. Since the types described by Schrag compare closely with types described by others, it is very likely that the typology has more general applicability than Schrag has claimed.

An optimistic note may be made with regard to our present ability to diagnose meaningful subtypes with realistically simple procedures. In a study previously mentioned (the Preston Typology study), Jesness classified the intake population of a large California training school for boys, using the Warren typology. Diagnostic procedures include the Jesness Inventory (consisting of 155 T/F items, scored for delinquent subtype using a discriminant analysis formula), a sentence completion and a short interview. The final diagnosis is made using all three instruments, with the hope that eventually the Inventory alone may be scored to produce an accurate diagnosis. Using all of Warren’s nine subtypes, the diagnoses on 500 subjects from the Inventory alone agree 62% of the time with the final diagnosis. If, instead of
using the nine subtypes, the three larger categories (Interpersonal Maturity Levels) are used, the agreement is 83%. Within the nine subtypes, some of the groups are identified by the Inventory alone much more accurately than other groups. For example, the Neurotic, Anxious subtype is diagnosed accurately from the Inventory alone 84% of the time, and is diagnosed accurately 94% of the time as falling within Maturity Level 4. The accuracy with other subtypes is lower. It is possible that if the Inventory cannot achieve an acceptable level of accuracy for all subtypes it may at least identify that proportion of the population which needs further diagnostic instruments applied.

An important point to be made with regard to treatment prescriptions which follow from offender typologies is that the intervention strategies are not by and large made up of new and unusual treatment methods, but rather consist of many of the old alternatives differentially applied to the various categories of offenders. In this sense a typology which leads to differential prescriptions leaves the field no worse off in terms of the need for skilled treaters. In another sense, the field is far better off. If offenders can be classified by differential treatment need, correctional staff can then be assigned differentially. In this way a particular correctional line worker need not have the entire range of specific management and therapeutic skills at his fingertips. Instead, his training can prepare him to handle only those treatment and management methods appropriate for certain types of offenders. Further, since correctional workers can be characterized as having certain "natural" treatment stances, a matching of worker style and offender problem can be accomplished. 99

If the field were to move toward a correctional model utilizing differential management and treatment of various subtypes of offenders, how would the training of correctional workers be affected? Since a differential model calls for training staff who work with some types of offenders to utilize different methods than those working with other types of offenders, the job for the trainers becomes somewhat more complex; however, the job of the trainees is considerably simplified, since the worker must no longer learn how to handle the entire range of problems. Under these conditions, training content can become less vague, less general, and less oriented toward producing that nebulous entity—the "good correctional worker." Instead, the training content can be specific to characteristics of particular types of offenders and precisely relevant to the management and treatment demands of the offender type. Because of the limitation in the range of content that a particular correctional worker needs to learn in order to deal effectively with his assigned offender population, it is likely that whatever training time is now available in various correctional agencies could be more effectively used. This does not imply, of course, that all is now known about how to turn various kinds of offenders into non-offenders. It does not imply that the need for imaginative and creative approaches to the problem is gone. It does imply, however, that treatment and management programs, if based on an offender typology can become more rational by better defining the differential problems leading to offense behavior, by prescribing differential goals for the correctional effort, and by training workers within the differential framework.

A case can be made for the importance of utilizing an offender classification system at each step along the entire correctional continuum. The advantages of using explicit, rather than implicit, classification systems at each correctional decision point has already been made in this paper. To the extent that the correctional system is free to make decisions based, not on retributive justice, but rather on a goal of turning offenders into nonoffenders, i.e., offender need—to that extent it is important to have available at each correctional decision point classification information which will indicate the setting and methods most likely to achieve the overall goal. For example, what is the treatment of choice when an individual identified in the cross-classification chart as a Conformist first appears in the correctional system? Some data are available from the Community Treatment Project which indicate that such individuals (1) become increasingly oriented toward delinquency in the highly delinquent peer group atmosphere of an institution, and (2) can be satisfactorily managed and treated in certain kinds of community programs. 100

99 Investigations into these "natural" stances are being conducted at the Community Treatment Project, see Palmer, Personality Characteristics and Professional Orientations of Five Groups of Community Treatment Project Workers: A Preliminary Report on Differences Among Treaters, CTP REPORT SERIES, No. 1, CALIFORNIA YOUTH AUTHORITY (1967); C.F. Jesness, THE PRESTON TYPOLOGY STUDY (1970).

100 In CTP, the failure rate for Conformists with 24 months of community exposure time was only 33.3% for delinquents treated in an intensive community
Beyond the possibility of sorting out at each decision point those individuals who need to move on through the correctional system, there is a further advantage in making the differential diagnosis as early as possible in the correctional career. A typology with its consequent goal specification allows for a unification among the treatment efforts of various segments of the correctional process. At many points in present correctional practice, it is possible to observe the total irrelevance of the goals and methods of treatment in an institutional setting to the goals and methods of treatment in the after-care program. The goals in the two settings may even be at odds with one another—the aim of the institutional time being to achieve conformity to a strict control system and the aim of the parole time being to achieve individual self-responsibility. While it is true that these two aims follow somewhat naturally from the characteristics of the two settings, it is possible to aim for conformity in a community setting and to aim for individual self-responsibility in an institutional setting—should the nature of the problem with particular offenders require one approach or the other. Even assuming that there are institutional administration needs to consider and community safety needs to consider, it seems possible that the determination of a treatment-relevant diagnosis early in an individual’s correctional career might well contribute to a more consistent and therefore more effective total intervention program.

SUMMARY

A rationale for classifying the offender population into meaningful subgroups was presented. Various classification approaches were described and their implications for efficient management practices and effective treatment strategies were illustrated with a number of clinical and research studies. A cross-tabulation of sixteen typological systems was presented and six cross-classification bands were identified. The six bands or offender subtypes were entitled: Asocial, Conformist, Antisocial-manipulator, Neurotic, Subcultural-Identifier and Situational offender. It was pointed out that the consistency in the data of several typological studies which made the cross-classification possible is an encouraging sign. However, the importance of taking the next step—an actual cross-classification of offenders from a single population, using the various typological schemes—was noted. It was further suggested that if a common taxonomy could be agreed upon, the way would be open for conducting and replicating numerous interrelated studies of management and treatment methods.

In asking whether a typological consensus has any programmatic utility at the present time, current interest among practitioners in developing differential treatment strategies for various types of offenders was noted. It was suggested that it may be possible in the near future to make differential diagnoses of large populations, and to simplify the training of correctional workers by teaching management and treatment specialties rather than the entire range of correctional techniques. The use of differential diagnosis in decision-making along the correctional continuum and its potential value as a treatment-unifying influence was discussed.

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. At the moment, the classification studies reported in this paper appear to represent solid steps in the development of a systematic science of corrections.

Program compared with 72.7% for comparable individuals following a period of incarceration.

In addition to the references already cited, the following sources were consulted in the preparation of this paper: Hayner, Characteristics of Five Offender Types, 9 ALABAMA CORRECTIONAL J. 75 (1962); Lindesmith and Dunham, Some Principles of Criminal Typology, 19 SOCIAL FORCES 309 (1941); Loveland, The Classification Program in the Federal Prison System: 1934-60, 24 FEDERAL PROBATION 8 (1960); Peters, Treatment Needs of Juvenile Offenders, 1 CALIF. ST. BD. OF CORRECTIONS MONOGRAPH 22 (1960); Topping, Case Studies of Aggressive Delinquents, 11 AM. J. OF ORTOPSYCHIATRY 485 (1941); Vedder, Theory of Criminal Types, 9 ALA. CORRECTIONAL J. 1 (1962).