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User Report

OFFENDER REHABILITATION

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The concept of rehabilitation is as old as penitentiaries. The early notions of rehabilitation were cast in terms of penance and moral reformation. The major, early 19th century models were the Quaker model, which involved solitary confinement, bible reading and contemplation, and the Auburn model, which involved congregation during the day, silence, hard labour, and Sunday worship.

Subsequent developments included the "mark system" developed in the 1840's by Maconochie at Norfolk Island, Australia and later employed by Crofton in Ireland. This innovation permitted a prisoner through good behaviour and industry to progress from initial placement in solitary confinement to conditions of decreasing restrictions, and eventually, conditional discharge on a "ticket-of-leave", the precursor of parole.

In his seminal writings, Maconochie used a medical metaphor to describe reformation, and provided a clear enunciation of the "medical model" of rehabilitation. The notion was that criminals were "morally dislocated" and needed to be cured. Since the time required to effect a cure could not be known precisely prior to the treatment, an argument was made for indeterminate sentencing whereby inmates would be held in prison until they were reformed.

At the National Congress on Penitentiary and Reformatory Discipline in 1870, a watershed in the history of corrections in America, delegations from the U.S., Canada and South America made a Declaration of Principles which called for the establishment of prisons which provided inmates with industrial work and training, as well as academic and religious education, with reformation as the primary goal of the criminal justice system.

With the rise of social science and the Positivist School in the early part of the century, attention focussed on the causes of crimes in the lives of individual offenders. This led to the notion of individualized assessment and treatment of offenders. Parole Boards were created in the U.S. at this time [ca. 1910], and indeterminate sentencing was widely adopted. In this scheme, parole release would be determined by progress in treatment.

Rehabilitation reached its peak in the U.S. in the sixties, and this era is viewed as the "golden age" of rehabilitation. California led the way, with lengthy indeterminate sentences [the average sentence was 1 to 17 years] and an array of programs, many of which had emerged from the burgeoning discipline of clinical psychology. It was a period of unbridled optimism and "state of the art" programming. In fact, much of it was illusory. The rhetoric was impressive but the reality was much less so. Many programs lacked the resources to function properly, and

program evaluations were methodologically weak or were contaminated by a lack of integrity in the information provided by officials with a vested interest in maintaining the programs.

The tide turned dramatically in the U.S. in the early seventies. Rehabilitation fell into disrepute. Punishment, deterrence and "justice as fairness" became dominant themes in the writings on criminal justice. Parole boards were abolished in many states, and determinate sentencing schemes based on "just deserts" were introduced.

Analyses of the demise of rehabilitation in the U.S. in the seventies provide several explanations. One issue was the perceived link between rehabilitation and the coercive elements of the system. Rehabilitation made long sentences legitimate, and in the extreme, intrusive techniques such as psychosurgery were carried out under the banner of rehabilitation. It was also argued that rehabilitation resulted in longer periods of time served in prisons without appreciable improvement in outcomes. On a broader plane, confidence in government had been undermined during the sixties and seventies, and there was a growing belief that government officials could not be trusted to exercise wide discretion.

In 1974, Robert Martinson published a very influential paper in which he summarized the results of a comprehensive review of the literature on program evaluations in

corrections prior to 1967, and concluded from the available scientific evidence that almost nothing works in rehabilitating offenders. In media accounts of Martinson's paper, this conclusion was soon reduced to "nothing works". Those who were already skeptical of rehabilitation used the "nothing works" dictum as a rallying cry for their criticism. In fact, the reality was, and is, more complicated, and considerably less discouraging.

Martinson's paper sparked a debate and generated response from other experts in the field which was far more interesting than the original paper. The major criticism was that Martinson was seeking the "universal" treatment that would work for all offenders in all circumstances. This led him to aggregate the results of separate evaluations of a general kind of treatment (e.g., individual counselling) involving different types of offenders in different settings. When some studies in the group showed positive effects and others did not, he concluded "overall" that the treatment had failed. In 1979, Paul Gendreau and Robert Ross, two prominent Canadian criminologists, published a review of more recent evaluations and observed that some programs had worked for some offenders. The National Academy of Science in 1979 also published a report on correctional effectiveness. They argued that the "nothing works" verdict had been too hasty, and cited several examples of effective correctional programs.

Martinson, as a follow-up to his earlier research, conducted with his colleague Judith Wilks a major study of recidivism involving a massive collection of published and unpublished reports which yielded recidivism rates for a wide variety of offenders and correctional interventions. This was an unorthodox research project inasmuch as it included data from studies that lacked scientific rigour, i.e., studies which are usually discarded in literature reviews. However, Martinson and Wilks coded information on the methodology so that differences in recidivism rates that were attributable to differences in how the data were collected could be assessed. In a preliminary analysis of over 3,000 recidivism rates derived from 128 reports, they discovered that the average recidivism rate for this sample was less than 30%, considerably lower than what was generally believed to be the rate of recidivism. This suggested that correctional programs may have been more effective than most people realized. The results of this research led Martinson to reassess his assessment of correctional treatment and by the end of the seventies, he publicly recanted his earlier conclusion that rehabilitation efforts had no appreciable effect on recidivism.

Despite subsequent criticism of Martinson's early work and further research that suggested a more encouraging picture of the state of affairs, "nothing works" continued to fuel the movement to discredit rehabilitation. The rhetoric

was strong, with critics charging that there had been a cruel hoax in corrections, what had been pawned off as rehabilitation was not rehabilitation, and "treatment" was an ideology for justifying a pernicious system.

In Canada, the trend toward rehabilitation was slower to develop, and less extreme than in the U.S. For example, it was not until 1947 that classification officer positions were established in Canadian penitentiaries. Vocational training was introduced in 1948; recreation programs and hobby-craft in 1949. Psychologists were not hired until the sixties, and at best the ratio of psychologists to inmates has been 1:150.

Although Canada had instituted in 1899 a "ticket-of-leave" system which permitted early release in the interest of rehabilitation and as clemency, parole was only introduced in 1958. Most jurisdictions in the U.S. had established parole boards by the 1920's, and had also adopted indeterminate sentencing whereby a judge would set a minimum and a maximum time to be served. This meant that the discretionary power of paroling authorities with respect to time served was very great in some states. In contrast, Canada did not opt for indeterminate sentencing and hence the discretionary power of the National Parole Board was small relative to most American jurisdictions. Accordingly, the National Parole Board was not subject to the same degree to allegations of "abuses of power" which became a focal point of criticism in certain U.S. jurisdictions, notably

California. This criticism, and doubts about the utility and necessity of parole, within the context of a broad rejection of rehabilitation, led to the abolition of parole in California, and started the movement toward determinate sentencing in the U.S.

Just as the zeal toward rehabilitation in Canada during the fifties and sixties was temperate relative to the U.S., the reaction against rehabilitation in Canada during the seventies was also temperate. Nevertheless, Martinson's paper and the events in the U.S. were widely discussed in the Canadian corrections community and the message that "nothing works" had a major influence on corrections in Canada.

Ironically, Martinson's controversial article appeared at a time when rehabilitation was beginning to occupy a stronger position in the Canadian Penitentiary Service. Regional Reception Centres had just been established to provide academic, vocational, personality and intellectual assessments and to devise individual program plans based on these assessments. Although the extent and variety of programming at the receiving institutions were not sufficient to respond to the identified needs of inmates, the diagnostic and program planning function was seen as a first step in identifying the programs that would be required to meet the needs of the offender population. However, with the growing skepticism surrounding rehabilitation, officials and

practitioners became increasingly reluctant to express support for the notion of rehabilitating offenders.

An official shift in thinking in federal corrections was reflected in the Federal Corrections Agency Task Force report (1977). The authors of this report observed that rehabilitation had been discredited, and proposed to replace the "rehabilitation model" with the "opportunities model". Accordingly, the correctional system would "provide correctional opportunities designed to assist the offender in the development of daily living skills, confidence to cope with his personal problems and social environment and the capacity to adopt more acceptable conduct norms" (p. 30). In this way, corrections would be held accountable for providing opportunities for the offender to reform himself, but would not be held accountable for rehabilitating offenders.

The response to Martinson's original paper also produced careful analyses of earlier work which provided some clues to why rehabilitation programs had not enjoyed much success. The first observation was that most lacked program integrity, that is, they failed to follow through on the theoretical assumptions on which they were based. Furthermore, the programs cited as evidence that rehabilitation didn't work were not only understaffed and underfunded, the people conducting the program were often untrained and in many cases unmotivated with respect to the program.

What has become clear from more recent work is that successful programs are those which are implemented intensively, seriously and for a reasonable length of time with offenders who are suited for them. Another aspect of successful programs is their link with community resources - family, schools, employers, social service agencies and neighborhood organizations. Therefore, the modern notion of rehabilitation has expanded from a treatment applied to the offender to a process of change that involves the individual, family, services, programs and community structure that support constructive and law-abiding behaviour in the community.

Although the reaction against rehabilitation was extreme, it is the case that programs in prisons have not fared well, and there are a number of reasons for this. The primacy of security, the general mistrust and suspicion of programs, the overriding concern for a "quiet" institution, the powerful negative effect of the inmate code, and staff perceptions of any change as a threat to good order, all work to undermine treatment programs. In general, programs have lacked an adequate theoretical base, have failed to select inmates appropriately for particular interventions, have relied on a lesser degree of training for staff than is needed, have made too many compromises in order to conform to institutional rules, have suffered from serious failures in attendance, have failed to garner the vital support of senior

prison officials, have ignored public relations, and have failed to acquire support outside the institution.

Furthermore, program developers have typically failed to ensure continuity from the institution to the community, so that even a program that overcame the obstacles to treatment within prisons would be unlikely to demonstrate benefits for the individual in his substantially different environment in the community.

In recent years in the U.S., there has been a quiet resurgence of interest in rehabilitation. The mood is subdued and cautious compared with the furor of an earlier age, but there is clearly a movement to reaffirm rehabilitation, and further, to re-define and re-focus it. Although this movement has yet to exert a major influence on the American criminal justice system, there are conditions which favour its growth and acceptance. There is a growing disenchantment with a system based on punishment, and a recognition of the futility of warehousing offenders. In addition, severe prison overcrowding is forcing the system to look for alternatives to incarceration and this provides a natural opening for a renewed emphasis on rehabilitation. Finally, there is little public support for the idea that offenders should be warehoused, and most people still believe that the system should strive to restore offenders as law-abiding citizens in the community.

There is also evidence of a reaffirmation of rehabilitation in Canada. In 1984, the Task Force on the Mission and Organizational Development of CSC published a report on the Statement of CSC Values which proposed a new model for Federal Corrections:

"The Task Force is of the opinion that CSC should move from the opportunities model to a model that clearly indicates that not only should the Service attempt to meet the needs of the individual offender by providing opportunities, but should also ensure that offenders are encouraged (actively motivated) to take part in programs and utilize opportunities that to the best of our professional knowledge and ability will help them return to the Canadian society with lifestyles likely to enhance their possibilities for leading law-abiding lives" (p. 11).

This "active motivation model" is essentially a modern statement of rehabilitation. It emphasizes the responsibility of correctional workers to actively encourage offenders to participate in programs that are intended to increase the likelihood that the offender will become a law-abiding citizen upon release from penitentiary.

Offender change is also an integral part of parole, and is clearly reflected in the Mission Statement of the National Parole Board. Indeed, the primary objective of the Board is

to facilitate the timely re-integration of offenders as law-abiding citizens. Given that offenders by definition were not law-abiding when they entered the system, parole requires that something be done to change offenders from a criminal to a pro-social orientation. This "something", which is rehabilitation, incorporates:

- a) the analysis of the individual and the circumstances surrounding his/her criminality;
- b) the programs provided in the institution;
- c) the pre-release planning and preparation;
- d) the supervision , programs, services and support in the community.

The Canadian public supports rehabilitation, and expects correctional authorities to strive to rehabilitate offenders. In a Gallup Poll conducted for CSC in October, 1984, people were asked "where the emphasis should be placed within our penal institutions". In response to this question, 62.7% indicated that the emphasis should be on "assisting the inmate to participate in programs that may assist their eventual return to the community even though some risk may be involved", and only 28.8% indicated "keeping the inmate securely confined and closely supervised even to the detriment of rehabilitation programs".

In summary, rehabilitation has proven to be difficult but not impossible. Rehabilitation is a complex and challenging task because the causes of crime and the

motivations underlying criminal behaviour are themselves complex. The current approach to rehabilitation recognizes that offenders are seriously disadvantaged in very complex ways, and that the rehabilitation process requires time, effort, resources and people who are knowledgeable, skilled and compassionate to do the work.

Offenders are characterized as persons who, more so than members of society generally, have a preponderance of deficits and disadvantages which impair their ability function as law-abiding citizens in the community. These deficits and disadvantages exist in a wide range of areas, notably education, employment, stress management, abuse of alcohol and drugs, reasoning/problem solving in social situations, and intimacy with others. Further, offenders usually have a history of criminal behaviour, and have developed values and attitudes that support a criminal lifestyle.

Rehabilitation is a process whereby offenders acquire the personal and social skills necessary to function as law-abiding citizens, while the values and attitudes that support a criminal lifestyle are changed to become more consistent with a pro-social orientation. In order to be successful, a rehabilitation program must be multi-faceted, i.e., it must address in an integrated manner each of the major problem areas that impair the offender's ability to function as a law-abiding citizen in the community.

One area of correctional programming where developments have been particularly promising is social-cognitive skills development. It is well documented in the literature that many offenders have deficits in the fundamental social and reasoning skills essential to social adaptation. That is, many offenders are unable to perceive situations from the perspective of others; fail to think about the consequences of their behaviour; have difficulty identifying and evaluating alternative courses of action, and negotiating satisfactory agreements with others; and show marked deficits in moral reasoning. Furthermore, the personal style of offenders is often characterized by egocentricity, concrete thinking, immediate gratification, and impulsive behaviour.

In a recent review of offender rehabilitation, Robert Ross, Professor of Criminology at the University of Ottawa, and Elizabeth Fabiano, a graduate from the Criminology program and currently employed in the Education and Personal Development Division in CSC, concluded that virtually all effective programs had included a component designed to change offenders' thinking. This led them to develop a comprehensive cognitive training program for offenders. In a recent pilot test of the program in the Oshawa and Pickering probation offices, they trained probation officers who in turn provided the training to high-risk probationers, as an adjunct to their regular intensive supervision. The program

consisted of 80 hours of training and was given in groups of 4 to 6 probationers. The preliminary results, based on a nine-month follow-up indicated that the recidivism rate for the probationers who received the cognitive training was significantly lower than that for a group that received only the regular intensive supervision and another group that received regular intensive supervision plus a life skills program which did not include a cognitive training component.

This cognitive training program could be easily adapted for use with federal offenders, and could be tested in institutions and in the community as part of a release program. Such a program would complement other programs in specific areas such as drug/alcohol abuse and employment.

In summary, offender rehabilitation requires intensive programs that are based on sound theories, trained and motivated staff to deliver the programs, proper classification to allow "matching" of programs to offenders, and research to guide the development and optimal delivery of programs. Institutional programs need a supportive "climate", and there must be a continuity of treatment from the institution to the community. The program plan for an individual offender should address in a comprehensive way the problem areas that impair his/her ability to function as a law-abiding citizen, and should create strong links with the community. Aspects of the offender's functioning that merit particular consideration include social/cognitive skills,

relationships with others, alcohol/drug abuse and employment. Overall, rehabilitation requires a commitment to changing offenders, and adequate resources to fund the necessary programs.

Endnote:

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