

RECEPTION-DIAGNOSTIC CENTERS IN THE
UNITED STATES: A STATE OF THE FIELD STUDY

by

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B.S., Nebraska Wesleyan University, 1969

9984

A MASTER'S THESIS

submitted in partial fulfillment of the

requirements for the degree

MASTER OF ARTS

Department of Sociology and Anthropology

KANSAS STATE UNIVERSITY
Manhattan, Kansas

1972

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CHAPTER I

INTRODUCTION TO THE PROBLEM

Penal reform in the United States has been struggling for recognition since the American Revolution. The penal organization has moved from the Pennsylvania system, to the Auburn system, and to the Irish system but the basic philosophy, regardless of system, up until the late 19th Century remained the same. That is, harsh punishment through imprisonment, hard labor, corporal punishment, solitary confinement, and general human degradation. Penal reform, or a movement away from this punishment philosophy, gained impetus in 1870 when a new organization called the National Prison Association drew up "The Declaration of Principles." This "Declaration" set down goals for corrections which, as it turned out, were so idealistic that one hundred years later they can still be considered goals to attain.

The coming of the 20th Century brought with it a more widespread application of reform ideals. The 1930's saw the organization of the Federal Bureau of Prisons which offered imaginative new procedures later to be expanded on by California and other states considered to be more treatment oriented. In 1954, the American Prison Association (formerly the National Prison Association), published a Manual of Correctional Standards, which further served to orient prison officials to innovative programs. Finally, in 1955, finding themselves completely caught up in the reform movement, the American Prison Association changed its name once again, and is now known as the American Correctional Association. This trend away from even the word, "prison" (many state penitentiaries are now "correctional

facilities") is probably one of the more obvious indications of changing views in the whole field of Penology (now Corrections).

This movement toward a treatment reaction to the criminal is the general concern of this paper. It is a topic which has by no means been ignored by those in corrections, academia, or even the lay public. On the contrary, it is an area of considerable discussion and often great confusion. Textbooks in Criminology, papers presented at professional conventions, speeches to local service clubs, and articles in local newspapers, all serve as sounding boards for the discussion of the treatment orientation to the criminal.

A topic often considered in these discussions is the various programs, ranging from education to leather crafts, which are being made available to the men. A favorite phrase of Administrators is that "men today are being sent to prison as punishment and not for punishment." These programs, then, typify the move toward a treatment reaction through individualization. Because this treatment orientation is becoming more and more popular, it will serve as a general problem area for this paper. It is called a problem area because of the different ways treatment is being implemented throughout the United States. The discrepancies can be seen most clearly in the area of classification, which is in fact the essential ingredient of the treatment program (Gill, 1962). Cressey has noted that "the classification process and, consequently, the treatment program can, and does, break down at any point in the process. Obviously the entire process depends to a large extent upon the original diagnosis" (Sutherland and Cressey, 1970:500). The procedures behind this "original diagnosis" must therefore be a vital area of concern and one certainly worthy of research.

In actuality, the area of classification has received a good deal of attention. It has for the most part, however, been limited to statements about the ways classification can be implemented with little attention being given to procedures actually being used. In 1958, Coe and Shafter did a survey of classification systems in the United States, and noted that ". . . prior to this study, the techniques used by the various correctional institutions had not been reported as a group" (Coe and Shafter, 1958:316). Loveland (1951) reported the three types of classification systems in use but did not make many references to particular states. The newest method of classification seen by Loveland was the Reception-Diagnostic Center which Kendall has described as ". . . institutions to which convicted offenders are committed for study and classification with the objectives of determining the program of treatment and training best suited to their needs and the institution to which they should be transferred" (Kendall, 1951:107).

Because this is the most recent development in the classification field, the present paper will take as its particular problem area, the existing procedures in these Reception-Diagnostic Centers. Such a study will be beneficial for several reasons. (The absence of any study of classification in the various institutions in the United States which was noted by Coe and Shafter (1958) is found also in the case of Reception-Diagnostic Centers.) There are, as with classification, general articles on reception centers (cf. Sutherland and Cressey, 1970:504; Tappan, 1960:625; Carpenter and Weber, 1966:37-42; Fenton, 1947:134-144), but only a few which discuss actual procedures in the various states (cf. Kendall, 1951; Townsend and Albert, n.d.). Additionally, the National Clearinghouse for Mental Health Information could provide very few articles on Reception-Diagnostic Centers and those

provided were for the most part from foreign journals or dealt with only juvenile offenders.

A need does seem to exist for research which will provide information as to the nature of this newest type of classification system. Such a study will not only add to the knowledge in the field of Corrections but on a more practical level will provide information to Correctional Administrators who may wish to compare their own procedures with those of other states or may desire ideas for implementing Reception-Diagnostic Centers of their own. With these goals in mind, this descriptive study is presented to enable a better understanding of the various operations presently used to receive and classify adult male felons into the correctional facilities of each of the fifty states and the District of Columbia. This will be accomplished in three steps.

Because this is a descriptive study, no hypotheses as such are to be considered. Rather, there are two general questions which will be answered:

1) Why are there differences in the methods employed and the extent to which the treatment reaction to crime is implemented in the fifty-one jurisdictions of the United States? and 2) Recognizing these differences, what is the present state of the Reception-Diagnostic Center approach to classification?

The first question will be the concern of Chapters Two and Three. Theories of such men as Emile Durkheim, George Herbert Mead, and Max Weber will be mentioned as offering not only explanation of the movement away from a punishment orientation, but also will suggest certain variables which may explain the differences in procedures used by the various states. The variables themselves are analyzed and discussed in Chapter Three using

Correlation Matrices and Stepwise Multiple Regression. Chapter Four will deal with the actual state of Reception-Diagnostic Centers which are operating at the present time. This will include a review of the development of these facilities and the various procedures in use with emphasis upon some of the more innovative or outstanding characteristics in several of the states.

Because this descriptive study is presented in step form, details of data gathering techniques and methods used are presented as they arise at the first of each chapter. Therefore, this introduction has not explained each section in detail and will instead allow the reader to be introduced to the appropriate material as it is presented.

CHAPTER II

THEORETICAL CONSIDERATIONS ON THE
PHILOSOPHY OF PUNISHMENT

To be complete, a descriptive study such as the present one must include some background material so that any discussion of the present state of affairs may be seen in its proper perspective. The intention of this chapter and the one following is to provide this background by considering what changes in a society have occurred which might account for the existing procedures used by each state and the District of Columbia in receiving criminal offenders into their correctional facilities. A theoretical justification for the variables to be used in the actual analysis is presented in this chapter while a more empirical discussion of structural aspects is provided in Chapter III.

The general philosophy of punishment held by the members of a society is, of course, at the base of any subsequent reaction by those members. Theorists such as Mead, Durkheim, and Weber have concerned themselves with this problem and their views are to be discussed first.

In "The Psychology of Punitive Justice," Mead suggests that there is a primitive impulse, termed the hostile instinct, existing in man which gives rise to punishment. He saw both retribution and prevention as being the public standards of criminal justice. The emphasis on these standards has shifted from the time of the middle ages where belief in simple proportioning of suffering to offense was accepted.¹ The shift from retribution to

¹Exemplified most adequately by Dante's fictional account The Inferno.

prevention occurred because of the belief in the existence of a quantitative type relation between the severity of the penalty and the fear which it inspires. Mead is quick to point out that this does not mean retribution ceases to become the justification for punishment. Rather, it is simply that the community chooses means for collecting the debt owed them in such a manner that the severity of the penalty is determined by the standard of expediency. In this sense then, the end, retribution, is the same but the means to that end have changed.

An important point for Mead is that retribution is not the sole justification for punishment. More important is the majesty of the law, the acceptance of which is an emotional attitude responding to concrete impulses which are the values which the laws of the community conserve. An attack upon these values brings about an attitude of defense which is largely intrusted to the laws of the land. There is an ". . . attitude of hostility to the lawbreaker as an enemy to the society to which we belong" (Mead, 1917-18:221).

Durkheim takes a somewhat similar perspective in his The Division of Labor in Society. The main emphasis here is on examination of types of social solidarity with a society's law seen as being a visible symbol of this solidarity. By dividing juridical rules into repressive or restitutive, Durkheim determined that repressive, or penal, laws were representative of what he termed a society with mechanical solidarity. Restitutive (i.e. a simple return of things to a prior state) laws were seen as typifying a society exhibiting organic solidarity. As these concepts have been, and still are, widely discussed, additional comment here is not deemed necessary. Instead, some of the more minor points made by Durkheim will be reviewed.

In attempting to show that crime ". . . shocks sentiments which, for a given social system, are found in all healthy consciences" (Durkheim, 1933:73), Durkheim notes that every written law has the double object to prescribe certain obligations on the one hand and define the sanction attached to them on the other. However, repressive, or penal, law states only the punishment. Durkheim says the obligation portion is omitted because the rule is known and accepted by everyone and therefore need not be formally stated (Durkheim, 1933:75). A crime, then, is that act which ". . . offends strong and defined states of the collective conscience"² (Durkheim, 1933:80). That is, offends strong and defined states of the totality of social likenesses.

Recalling Mead's discussion of the justification of punishment as being retribution and prevention, we find similarities with Durkheim who saw punishment as a passionate reaction by society to avenge itself (repressive law) and more recently as a desire of society to defend itself (restitutive law). This change might also be viewed by considering Weber's movement of law from formal irrationality (decisions based beyond the control of reason), to substantive irrationality (decision-maker guided by reaction to the individual case), to substantive rationality (decisions based on some general principles drawn from outside the legal system itself), and finally to formal rationality (restraints are imposed by procedural formality and the need to maintain doctrinal consistency) (Schur, 1968:109). Here also, the trend is seen as being away from some type of passionate punitive reaction to the criminal.

²The process Durkheim uses to arrive at this definition of crime is by no means as simple as implied here, as each word in the definition is given careful consideration and full explanation.

More recent authors have also been concerned with changing philosophies of punishment. Joel Meyer sees three justifications for punishment. The first two, retribution and deterrence, are found in the legalistic approach following the belief that the criminal should suffer. The third justification, rehabilitation, is taken from a behavioristic approach and views crime as a product of forces not wholly within the individual's control. Here, ". . . punishment is based on psychology and sociology of crime," and ". . . is motivated by a belief in the worth and dignity of every person and a willingness of society to expend its time and energy to reclaim him for his own sake, not merely to keep him from again harming society" (Meyer, 1968:597).

Legal philosopher, H. L. A. Hart, has offered some possible explanations for this new idea of rehabilitation or reform as a justification for punishment. He finds two essential elements of traditional theories of punishment as being cause for today's general confusion concerning the appropriate reaction to the criminal. One follows ". . . the old Benthamite confidence in fear of the penalties threatened by the law as a powerful deterrent . . ." (Hart, 1968:1). This idea seems to be losing support by many who are coming to believe that actual calculation, in any sort of anti-social behavior, has been exaggerated. Secondly, the belief in retribution is being questioned with the coming realization that we can no longer state with confidence that "' . . . this man who has broken the law could have kept it' . . ." (Hart, 1968:1). The influence of the growth of the social sciences and the study of individual and social behavior has undoubtedly had influence on these changing conceptions.

C. Ray Jeffery also discusses the movement of criminal law from punishment to deterrence, to rehabilitation. Like Hart, Jeffery sees the shift of criminal law away from social control by way of punishment and deterrence and toward social control through rehabilitation and the study of individual traits, as a result of the growth of the social sciences during the twentieth century (Jeffery, 1970:524). He notes five assumptions as forming the theoretical structure for viewing criminal behavior today:

1. The causes of crime can be found through the study of individual offenders.
2. Individual offenders can be rehabilitated through the use of psychiatric and sociological concepts.
3. Punishment is not a successful means to change human behavior.
4. Criminal behavior can be controlled indirectly through the manipulation of noncriminal behavior, eg. therapy, job training, and remedial education.
5. Criminals can be changed by giving them services, rather than through basic research into the behavioral foundations of criminality.³ (Jeffery, 1970:525).

These are, of course, only Jeffery's views of the present day assumptions and needless to say everyone would not necessarily agree with them, the present author included. They do, however, serve a purpose in the sense that some of the basic ideas which are common today are concisely, even if not precisely, stated.

Other men such as Sutherland and Cressey (1970), Walter Reckless (1967), and Paul Tappan (1960), have provided other justifications for punishment but all include some notion of reformation. What seems to be occurring is that the traditional justifications for punishment (eg. retribution and deterrence) are being questioned. The implication is that the societal

³So as not to misrepresent Jeffery's remarks, it should be noted that his article actually views these approaches, which emphasize the individual, as being failures. He feels the emphasis should instead be on crime prevention through environmental engineering.

reaction to the criminal is moving away from a strictly punitive reaction toward one which can be termed "treatment" oriented.

This idea of movement toward a treatment reaction to crime calls for additional comment. A basic tenet in the remarks of all the foregoing authors is that reaction to norm violating behavior is societal in nature. Both Mead and Durkheim have suggested that society members react to crime in a punitive way because the offended values are those belonging to something over and above the individual. That is, they are values held in common by the members of a society. Because of the closeness of the individual to these community values (especially at the mechanical level), reaction to their violation is emotional and punitive. However, with the division of labor and increasing differentiation of society, its members come to have less and less in common with each other. The result is a different type of social solidarity which, as mentioned above, Durkheim termed organic. Although Mead did not employ Durkheim's terms, he too notes a different type of solidarity emerging as a society develops.

Mead sees the sole purpose of hostility as being to unite the members of a community. Thus, the hostile reaction to crime serves as a means for solidarity. He notes, however, that "It is quite impossible psychologically to hate the sin and love the sinner" (Mead, 1917-18:228). Mead does not leave us on this rather pessimistic note as have others writing in this area. He begins offering hope for the justice system by pointing to changing human attitudes toward social organization which realizes the necessity for common rights and privileges but equally important, differences of interests and function. In this way man asserts himself while at the same time affirming the status of others. This type of social organization is

slow in growth with many social mechanisms taking part but one Mead sees to be of singular importance is that of ". . . overcoming the temporal and spatial separations of men so that they are brought into closer interrelation with each other" (Mead, 1917-18:230). "When this condition has been supplied there seems to be an inherent tendency in social groups to advance from the hostile attitudes of individuals and groups toward each other through rivalries, competitions, and cooperations toward a functional self-assertion which recognizes and utilizes other selves and groups of selves in the activities in which social human nature expresses itself" (Mead, 1917-18:230). Mead notes, however, that the attitude of hostility toward criminals has remained a solidifying force in spite of the new developments in social organization. It is necessary, therefore, to find some means of emotional solidarity to replace the traditional one.

The means of doing this as seen by Mead are typified in the juvenile court procedures. That is, material and information is brought in from all social, psychological, and physical areas and used by the judge to determine the needed procedures for reinstatement in the community. These procedures were more novel in the time of Mead's article, but the continuation and expansion of these procedures into adult court as well as the juvenile court would indicate that Mead was certainly foreseeing the direction which reaction to the criminal was going to take. He saw the result of this approach as "Over against the emotional solidarity of the group opposing the enemy we find the interests which spring up around the effort to meet and solve a social problem" (Mead, 1917-18:233). "In the place of the emotional solidarity which makes us all one against the criminal there appears the cumulation of varied interests unconnected in the past which not only bring new meaning

to the delinquent but which also bring the sense of growth, development, and achievement" (Mead, 1917-18:234).

The importance of the foregoing discussion indicates the advisability of a summary in order to insure understanding. It was noted that Mead acknowledged a change in human attitudes accompanying what Durkheim termed the movement toward organic solidarity. He realized, however, that attitudes toward the criminal have not changed as one would expect and he suggests that the reason for this is the unifying service supplied by having a hostile reaction toward the criminal. The solution offered by Mead is to gain this emotional solidarity needed by members of the society through procedures designed to help each other and return such people as criminals to functional, and law-abiding, usefulness in the society. This is, of course, the basic tenet of what is commonly called the treatment reaction to crime.

Although disagreement does exist as to exactly what treatment is, it is commonly accepted that purposive infliction of suffering does not enter into the procedure (cf. Sutherland and Cressey, 1970:494; Hart, 1968:26). With the knowledge that many ideas of treatment are being ignored, but realizing the limitations of space, the concept of treatment to be used here will follow closely that offered by Mead⁴ as a solution to the need for concern with the emotional solidarity of societal members.⁵

The movement toward a treatment reaction to crime is not being suggested

⁴That is, the use of social, psychological, and physical information in determining the appropriate disposition of the case.

⁵See below, Chapter IV.

here as being complete. Quite the contrary, most writings in the corrections field today stress that there is still a considerable influence exerted by the punishment reaction (cf. Sutherland and Cressey, 1970:498; Reckless, 1967:520). The most appropriate way to view the present situation is to see it as a transitional state (cf. Gill, 1962:313-14; Reckless, 1967: 520-43), where conflicting ideologies are causing considerable confusion not only within the corrections field but in society as a whole. Various means of resolving this conflict range from open abandonment of any serious attempt at treatment to the other extreme of refutation of all punitive aspects of incarceration. However, the most common system for resolving the conflict has been in terms which maintain that the prison both treats and punishes (Sutherland and Cressey, 1970:499). Thus, treatment programs are implemented within the confines of the institution. Included here would be group therapy, education, vocational training, athletics, self betterment groups, etc., with the list limited only by the imagination of officials.

A vital link to the successful operation of any program is that of deciding just who will participate. At this point, classification enters the picture. It is this concept which ". . . destroyed once and for all another basic tenet of the old prison discipline, namely, 'All prisoners should be treated alike,' for once given case histories of offenders, treatment must be individualized" (Gill, 1962:314).

(Summary)

The intent of this chapter was to show how members of society have reacted to criminal behavior. Both Mead and Durkheim showed that certain organizational conditions, such as the emotional solidarity of societal

members, manifest themselves when reaction to norm violation is analyzed. A punitive reaction is found when the offender is seen as violating community values which are above and beyond the individual. However, as society develops and division of labor increases, the members of a society begin changing their attitudes and come to see each other as being a necessary part of society. The criminal then, should not be punished, but returned to the community as a responsible, law-abiding member, ready to perform his appropriate function. In order to do this, a need is seen to move from a punishment orientation to a treatment orientation with individualization being the basic ingredient. It was pointed out that the essential step involved in the treatment method is the concept of classification which will be dealt with more fully in Chapter IV.

The movement of society to a situation of increasing division of labor and subsequent differentiation, is seen as bringing about changes in the attitudes of societal members toward their criminals. If this is indeed the case, it should be possible to explain any differences in ways of treating the criminals by viewing variation in the society's organizational structure. One such macro-level variable, as suggested by Durkheim, is differentiation. Both he and Mead felt reaction toward the criminal would be more treatment oriented as differentiation is increased with the move toward organic solidarity.

Other variables which suggest themselves as possibly being useful would be structural rigidity, education, and migration. Structural rigidity is also a macro-level variable and its relation to social organization could supply important information not considered by differentiation alone. Education and migration can also be seen as affected by changes in the social

organization although possibly at a different level than such structural variables as differentiation and rigidity. Education and migration seem to operate at an intermediary level between macro-sociological variables and the individual himself. Both are in fact affected at the two levels and may therefore provide additional information as to the influence social organization has on the manner in which society members handle their criminals. These questions will be the concern of Chapter III.

CHAPTER III

AN ANALYSIS OF THE VARIABLES

The previous chapter provided a theoretical background for discussing societal reaction to criminals in terms of social organization. The macro-level variables of differentiation and structural rigidity, and the intermediary variables of education and migration, were seen as lending themselves to research in this area. Since the concern here is with institutions of the various states and the District of Columbia, it would seem appropriate to consider structural variables within each jurisdiction.

This being a descriptive, state of the field study, no cause-effect type hypotheses are to be considered: indeed, the variables presented may simply be different measures of the same dimension. Rather, the primary question to be explored is: What means of explanation can be provided for the differing procedures which exist to receive adult male felons into the various state correctional facilities? This reception process is seen as being a valid measure of a state's reaction to its criminals since any attempt at treatment must start at the very first especially in compiling necessary social and psychological information on the individual. It is only in this way that the treatment reaction to crime, as envisioned by Mead, can take place.

The first variable to consider is the flexibility of the social structure. From Young and Moreno we define a flexible social structure as one ". . . in which such classes and other groupings are highly intercommunicative; they have a rational and non-ascriptive basis for recruitment of

members; they have permeable boundaries and interchange members freely. . . ." (Young and Moreno, 1965:439). This is contrasted with the closed or rigid society wherein ". . . the status quo is highly institutionalized and all the forces of the system are focused on the prevention of change" (Young and Moreno, 1965:439). The index chosen by Young and Moreno for flexibility of the social structure was the openness of the social class structure. This in turn was indexed by a scale of institutionalized white supremacy developed by Shapiro, Price, and Williams. As the original scale was confined to the South, Young and Moreno extended it to cover the rest of the forty-eight states.

Fourteen items phrased in terms of fluidity and each representing a law or regulation, were formed into a Guttman Scale to index the fluidity of the social structure of the forty-eight states (Appendix A). The ranking of the states (Appendix B), indicates that states with scores nearest "14" have a higher degree of fluidity in their social structure than those states with scores closer to "0".¹ A natural control for development was seen as occurring because of the similarity of the universe, that is, the forty-eight states. Also employed were statistical controls such as the percent of labor in manufacturing. ". . . The Young and Moreno scale predicted innovative behavior, family and individual income levels, the size of the white collar and technical labor force and other indices usually assigned to development as such" (MacCannell, 1968:11). That is, a structural view

¹The reader is asked to note that the scale items are phrased in the negative and therefore a high scale score indicated low segregation and discrimination.

of development was established.

The implications for present purposes is that states having a more flexible social structure will be oriented toward change and therefore be more inclined to be moving from a punishment reaction to their criminal offender to a treatment type reaction. To test this, the scores for each state as indicated by Young and Moreno (Appendix B), were entered as a possible variable affecting the reception and classification of offenders in that state.

Another variable of importance comes from Earle D. MacCannell and is termed differentiation. As seen by MacCannell, ". . . the differentiation of social structures is--at the perceptual level--the same as increasing capacity to process information, and--at the operational level--the same as increasing complexity and diversity of social institutions" (MacCannell, 1968:8).

MacCannell has made use of Young and Moreno's work by showing the importance of considering differentiation as well as rigidity and flexibility when viewing the development process. The importance of an additional variable arose from the failure of Young and Moreno's measure to predict variation in several correlates of development. As MacCannell notes, ". . . the fluidity scale did not predict the percent of the labor force in manufacturing, value added by manufacture, construction of private industrial plants, and it negatively predicted the number of plants with over 100 workers" (MacCannell, 1968:12-13). It is MacCannell's contention that the addition of the variable differentiation will greatly improve the measure of fluidity as developed by Young and Moreno.

Recognizing differentiation to be an artificial concept, MacCannell

suggests the only accurate measure to be ". . . drawing together, and rendering orderly, a considerable range of structural variation" (MacCannell, 1968:45). In choosing institutional patterns for inclusion, he paid particular attention to state operated institutions as those would indicate both a certain level of development and the presence of a state.

MacCannell's data were gathered from general statements of organization published by all states and variously called the state, "Redbook," "Bluebook," "Roster," "Directory," or "Guide." A schedule was constructed consisting of items including such things as ". . . the presence in the state of mines and minerals survey, a general agricultural commission, licensing procedures for practicing psychologists, and industrial welfare board, narcotics rehabilitation centers and so forth" (MacCannell, 1968:48).

Initially MacCannell set up sub-scales of structural differentiation for the areas of ". . . state-level involvement in manpower, resources, agriculture, education and urbanization . . ." (MacCannell, 1968:50). Intercorrelations among the sub-scales enabled MacCannell to then develop a Guttman Scale of general differentiation (Appendix C). It is the score received by each state on this scale (Appendix D) which was entered as data for present purposes.

So as to avoid any confusion concerning the differences between differentiation and fluidity, MacCannell offers the following definitions:

Fluidity is the aspect of information processing which specifies the capacity of social structure to turn the diverse outcomes of open communications and interaction back into coherent situational focus, growth and development. Differentiation is the aspect of information processing which specifies the capacity of social structure to process information, to name, specify and organize diverse types of social information (MacCannell, 1968:23).

These two variables are seen as independently predicting the variation of indices of development. Additionally, being based on structural conditions of the society, they are seen as being macro-level variables. As suggested in Chapter II, however, these macro-level variables are not expected to have sole influence on the various state institutions. Intermediary variables are also seen as being necessary so that actual reactions of individuals in a society can exert their influence. This might be viewed in terms of three levels of interaction: macro, intermediary, and individual or micro.

Intermediary variables will serve as the means by which the macro-micro extremes can influence each other. Therefore, such intermediary variables must be affected both structurally and individually. For present purposes, the variables of educational level and migration are taken to meet this criteria. Both are influenced by individual variables as well as structural variables at the societal level. The nature of both educational level and migration indicates that an appropriate term for them might be "aggregate variables," and they shall be referred to as such in this presentation.

The potential of educational level in the present research seems strong particularly in terms of the readiness of the state's citizenry to accept new ways of handling the criminal offender. When studying community structure and the mental health movement, Edna Raphael selected educational level as a variable because of numerous studies which found better educated persons to be consistently more responsive to innovation. Or, as Raphael put it: association with education reflects ". . . a rather sophisticated acquired ability to abstract and reconceptualize action in other than traditional or customary normative frames of reference" (Raphael, 1964:346).

As the present study is concerned with discovering variables which account for societal acceptance of new ways of treating criminals, education of those societal members would seem to present itself as a variable worthy of consideration. Educational level is individual without question, but there are also structural variables which influence the attainment possibilities of the individual. The availability of institutions of higher education and the admitting standards of these institutions are such variables. The ability of one's family or self to pay for an education is also an important factor. In this way, then, educational level can be seen as an aggregate variable affecting and being affected by both individual variables and structural variables. The method used here for obtaining this educational level consisted of taking the median years of school completed by persons 25 years of age and over in each of the fifty states and the District of Columbia as found in the 1960 Census of Population.

The second aggregate variable to be considered here is an index of migration. In Social Theory and Social Structure, Robert Merton studied mass communications in patterns of inter-personal influence using data from an Eastern seaboard town of 11,000 which he called "Rovere." His analysis for the most part concerned two basically different types of influential persons: local and cosmopolitan. The difference between them which is of importance here is that the cosmopolitans were found to be more mobile than the locals (Merton, 1957:395). Additionally, the cosmopolitans tended to be secular, marginal or urban, and oriented toward the greater society rather than toward the local community. The locals, on the other hand, appeared sacred or traditional and oriented toward the local community (Raphael, 1964:347).

Merton believed that different types of community structure will yield different proportions of local and cosmopolitan influentials (Merton, 1957: 405). The implications of this for the present study are centered in the question of whether or not differing proportions of these influentials in various communities will help explain the differing methods for receiving criminal offenders. Raphael also used the migration variable in reference to Merton's work and one of her findings was that ". . . the more permanent the residents in an area the lower was the area's examined-case rate" (Raphael, 1964:347). (Where examined-case rate was taken as an indication of the community's acceptance of psychiatric aid).

From Merton's suggestions and Raphael's study, one might feel that migration could be an important variable in societal development. Since Raphael found high migration to be conducive to community acceptance of psychiatric aid, migration will be used in this study with the idea that a highly mobile state population will be more likely to have what can be considered a good reception process. As with education, migration is an act by the individual but the individual is reacting to such things as employment opportunities, financial rewards, desire for certain types of entertainment or recreation, and other structural conditions. The result is that migration serves as an aggregate variable to enhance interaction between individual and structural variables. Therefore, the migration variable consisted of the percentage of persons who in 1955 lived in a different house in a different county than the house they lived in on April 1, 1960. The data were taken from the 1960 Census of Population.

(Independent Variable Correlations)

These four variables comprise the independent variables to be used in

this study. They will be discussed as two pairs of variables with differentiation and fluidity being structural and education and migration being aggregate. The first concern, however, should be with the degree of correlation between these variables. As Roscoe has noted: "Generally, the different kinds of variables encountered by the behavioral scientist will be correlated with each other, and to the extent that two variables are correlated, they may be said to measure the same thing" (Roscoe, 1969:264). The desire therefore is to find variables which have low correlation with each other indicating that separate aspects of the problem are being measured.

A correlation matrix for the independent variables can be found in Table 1 to aid in the discussion.

Table 1

ZERO ORDER CORRELATION MATRIX FOR THE FORTY-EIGHT STATES AS RATED
ON DIFFERENTIATION, FLUIDITY, EDUCATION, AND MIGRATION

Variable	Differen- tiation	Fluidity	Education	Migration
Differentiation	--	0.4138 ^b	-0.1535	-0.3586 ^c
Fluidity		--	0.4680 ^a	-0.1796
Education			--	0.4998 ^a
Migration				--

^aSignificant at the .001 level.

^bSignificant at the .01 level.

^cSignificant at the .05 level.

Table 1 shows one of the most highly correlated independent variables to be fluidity and educational level (.001). Recalling that fluidity is based on a measure of segregation and discrimination, it is not surprising that as a state's median level of education rises, it will be less likely to have

discriminatory laws.² Also correlated at the .001 level are education and migration. As with fluidity and education, the significant relation here is not surprising. Bogue notes: "Among both white and nonwhite populations, and for both males and females, the rate of migration tends to vary directly with the level of educational attainment" (Bogue, 1969:769).

The only other independent variables significantly correlated are differentiation and fluidity (.01), and differentiation and migration (.05). Although MacCannell shows that differentiation and fluidity operate independently and simultaneously in the process of development, he also realizes and allows for their mutual association in some aspects of the social structure (MacCannell, 1968:32-35). It is felt that the significant correlation found here is indicating this mutual association.

The interesting aspect of the significant relation between differentiation and migration is that it is negative. At face value this appears to contradict the theoretical implications of such men as Durkheim since differentiation is commonly thought to be found in the urban industrial areas with increasing population. These findings may not, however, be inconsistent with Durkheim.

²As Dr. Wayne Rohrer has been kind enough to call to my attention, where education and pro-integration has in the past been commonly accepted as being valid, more recent observation of the civil rights movement and especially the busing controversy, may indicate that a reappraisal of this relationship is in order. One may find that the more highly educated do indeed favor integration de jure but resist de facto integration. This present research cannot, of course, deal with this question, but it is something which may in actuality affect problems such as the one being dealt with here.

The problem is to determine why differentiation is lower in areas with the higher migration rates. A possible explanation of the negative correlation might be in terms of prognostication. In 1960, 69.9 percent of the population in the United States was urban (Thompson and Lewis, 1965:140). If states are divided into quartiles according to migration rates, eight of the thirteen states in the highest quartile (most migration) had an urban population which fell below the national average (eg. Alaska, Montana, Idaho, Wyoming, and Virginia). Eight of the twelve states in the lowest quartile (least migration) have an urban population which fell above the national average (eg. Illinois, Massachusetts, Michigan, New York, and Ohio). Two somewhat related explanations can be offered here. First, those states with the high migration rate can be looked upon as new frontiers with greater possibilities for the individual. The related explanation refers to the discussion above of the highly significant correlation between education and migration. The implication is that the highly educated are moving to these new frontiers realizing the potentiality for self advancement and personal satisfaction.

These explanations see differentiation as occurring in response to migration and the subsequent increase in population. This implies that these states with the high migration rates are in the process of development and one would predict that future measures of differentiation would yield higher scores in this area as the high migration level is maintained. Therefore, the negative correlation between differentiation and migration found here is taken to serve as prognostication of future increase in differentiation.

Two of the independent variables show no significant relationship. These are: differentiation - education, and fluidity - migration. The negative correlation for differentiation - education is the only one which seems surprising and therefore worthy of comment. Interestingly, MacCannell also found a negative correlation ($-.12$) between differentiation and median years of education for adult whites 25 years and older³ (MacCannell, 1968: 93). In his discussion, MacCannell notes that the number of public and private colleges and universities in the state is highly related to differentiation ($.59$), in spite of the negative correlation with median years of education. Offering an interpretation which he admits goes against common sense, MacCannell suggests, ". . . that in relatively highly developed contexts, such as the United States, differentiation is accompanied by a proliferation of career possibilities which do not require elaborate advanced education If the interpretation is correct, highly developed societies may be seen as similar to underdeveloped societies in this regard: both provide place for all their people, trained and untrained, educated and uneducated" (MacCannell, 1968:94). More important for present purposes is the fact that this lack of any correlation between differentiation and education would also indicate that they can contribute independently to the evolution of correctional facilities.

This view of the correlations among the independent variables has indicated that four correlations are significant and each of these may be

³A possible explanation for the different negative correlation found here ($-.15$) might be that MacCannell used only the median educational level of the adult white population 25 years and over while this research used the median educational level of the total adult population 25 years and over.

explained theoretically. The two remaining independent variable correlations are not significant and are therefore expected to be measuring different things. Overall, it would appear that each constructed variable is measuring a different aspect of societal development. Although some overlap can be found, it is not unexpected, considering the nature of the variables.

(The Dependent Variable)

As just mentioned, the four variables discussed above comprise the independent variables for this study. They are said to affect the manner in which correctional institutions for adult male felons in each of the fifty states and the District of Columbia, implement the treatment process for the criminal offender. This implementation is seen as being reflected in the process for receiving and classifying the offender at the time of his entry into the prison.

As might be expected, there is no rating of the states along these lines. In view of this, a rather subjective approach was taken in order to compile such a ranking. Letters were sent to well known men in the field of corrections (in both correctional administration and various universities and colleges) explaining the intent of the research and the desire for a ranking of the receiving process employed at the present time by each state. The instructions stated: "Beside those states which you feel qualified to comment upon, please rate on a 1 to 5 scale (1 being low and 5 being high) and/or make statements as to their procedures for receiving offenders into their institution."

Letters were sent to seven men in the academic field⁴ and three correctional administrators.⁵ Responses were received from five of the academicians with only one of the five stating that he did not feel qualified to rate any state. Two administrators responded and neither felt qualified to rate any state.

The knowledgeable judges being used consisted then, of four professors all having a special interest and knowledge of the corrections field. One respondent, Dr. Vernon Fox, provided a ranking for every state and the District of Columbia. When the rankings by the other respondents were included, twenty-seven states were found to have more than one response (Appendix E). Considering Fox's rankings on these twenty-seven states, it is found that he disagreed with the average of the other three men on only six of the states by more than one point, but never more than two points. Additionally, Fox's rankings were in complete agreement with the others on ten of the twenty-seven states. This great similarity in the rankings indicates that Fox's rankings by themselves for each state would be an acceptable index of the receiving process for each state, thereby assuring a ranking for every jurisdiction. The great respect Professor Fox has of

⁴Dr. Robert Caldwell, University of Iowa; Dr. Chester Chiles, University of Texas; Dr. Vernon Fox, Florida State University, Dr. Daniel Glaser, University of Southern California; Dr. George Killinger, Sam Houston State University; Dr. Joseph Rogers, New Mexico State University; and Dr. Alfred Schnur, Kansas State University.

⁵Mr. Gus Harrison, Director, Michigan Department of Corrections; Mr. Lloyd McCorkle, Commissioner, New Jersey Department of Institutions and Agencies; and Mr. Sanger Powers, Administrator, Wisconsin Department of Health and Social Services.

his colleagues in the area of Criminology and Corrections gives additional credence to the use of his rankings as the sole index for this descriptive study. Therefore, the dependent variable to be used here will be Fox's ratings of the receiving process presently used by each state and the District of Columbia.

The next area of concern is with the type and degree of relationship between the independent variables and the dependent variable. The differentiation and fluidity scores for each jurisdiction, as well as their appropriate educational level and migration percentage, were then run against the ranking Fox gave that particular state. The results are given in the correlation matrix found in Table 2.

Table 2

ZERO ORDER CORRELATION MATRIX OF THE RELATIONSHIPS BETWEEN THE FOUR INDEPENDENT VARIABLES AND THE FOX RANKINGS					
Variable	Differen- tiation	Fluidity	Education	Migration	Fox
Differentiation	--	0.4138 ^b	-0.1535	-0.3586 ^c	0.5346 ^a
Fluidity		--	0.4680 ^a	-0.1796	0.5118 ^a
Education			--	0.4998 ^a	0.3234 ^c
Migration				--	-0.2361
Fox					--

^aSignificant at the .001 level.

^bSignificant at the .01 level.

^cSignificant at the .05 level.

Differentiation and fluidity are found to have a positive correlation with the dependent variable showing significance at the .001 level. From the significant correlation between differentiation and fluidity we would

expect them to relate at the same level with the Fox rankings. Education also relates positively with the Fox Ranking and is significant at the .05 level. Migration is seen as being negatively related; however, it is not significant. It appears that differentiation and fluidity are very highly related to the "goodness" of a state's reception process with education having the next greatest amount of correlation. The migration variable, although not significant, does show a tendency for those states with a lower migration rate to have a better reception process. This is not really unexpected in view of the discussion above. Differentiation shows a highly significant relation with the Fox Ranking. Therefore, something not having a positive significant relation with differentiation is not expected to have one with the Fox Rankings. In light of this, migration's negative relation with differentiation is expected to indicate that it will also show a negative relation with the Fox Rankings. Since this is the finding, additional comment does not seem necessary.

(Analysis of the data)

The next appropriate step is to determine which variable explains the greatest amount of variance in the ranking of the various states. The method of analysis used is Stepwise Multiple Regression, which is a statistical technique for analyzing a relationship between a dependent variable and a set of independent variables and for selecting the independent variables in the order of their importance as based on the reduction of sums of squares. Assumptions made by this technique which must be mentioned include linearity of variables and interval-scale relations.

Education and migration have been generally accepted as being linear

variables, so this will be accepted here also without further comment. When discussing Young and Moreno's need to expand their scale of Segregation-Discrimination (i.e. fluidity), to cover the North as well as the South, MacCannell notes, ". . . even the Northern states exhibit differences in discriminatory laws, and these differences merge precisely with a similar set of differences among the Southern states along a cumulative, linear measure of rigidity"⁶ (MacCannell, 1968:11). When introducing the concept of differentiation, MacCannell states, ". . . differentiation, is derived from Durkheim's conception of organic solidarity and is defined as a linear, complexity growth dimension of social structure"⁷ (MacCannell, 1968:4). Both rigidity and differentiation then are found to satisfy the linearity assumption. However, the requirement for interval data cannot be met by these variables.

In discussing such problems as this, Boyle (1970) determined through theoretical analysis that regression and path coefficients appear generally quite stable no matter what the interval scale. This was seen as occurring because appreciable distortion depends not on the magnitude of error, but on special coincidences between more than one kind of error. Dummy tables were then used in the path analysis to test this conclusion. "Application of this procedure to actual data supported the contention that interval-scale assumptions are not of crucial importance in path or regression analysis" (Boyle, 1970:480). On the basis of this, it is felt that multiple regression

⁶Emphasis added.

⁷Emphasis added.

may be used in the present descriptive study without concern for too much distortion.⁸

(Results)

Differentiation was found to be the variable explaining the greatest amount of variance in Fox's rankings. The Multiple R of .5346 indicates that 28.6 percent of the variance is explained by this one variable. Both the F score (19.60) and the t-value (4.43) are significant at the .001 level.

The next variable included was educational level which explained an additional 16.8 percent of the variance bringing the total to 45.4 percent. The F score (19.96) is once again significant at the .001 level, and the t-values at this step for both differentiation (5.54) and education (3.85) are significant at the .001 level as well.

Step three enters the migration variable. With three variables, the F score (17.85) remains significant at the .001 level, and the amount of variance explained increases to 53.3 percent. The t-values for the individual variables at this step are: differentiation, 4.67 (.001 level); education, 4.96 (.001 level); and migration, -2.81 (.01 level). The negative t-value for migration is expected as explained in discussion of the correlation matrix.

The final variable to be read in is fluidity. Since this now provides the final regression of all variables used here, the remaining discussion will be in terms of this final analysis (Table 3). All four variables together explain 53.4 percent of the variance in the receiving process being

⁸Flora (1970:109) also ignored interval scale assumptions in her exploratory research.

used by each state. The addition of the fluidity variable therefore added very little to the amount of variance explained. However, recalling the degree of correlation fluidity had with the two strongest variables (i.e. fluidity - differentiation at the .01 level, and fluidity - education at the .001 level) one might expect fluidity to measure much of what is already measured by differentiation and education and explain only a small amount of variance on its own.

Table 3

FINAL STEP OF STEPWISE MULTIPLE REGRESSION OF FOUR
INDEPENDENT VARIABLES ON FOX RANKINGS

Variable	t-value	beta coefficients
Differentiation	4.242 ^a	0.5204
Fluidity	-0.359	-0.0553
Education	3.781 ^a	0.6115
Migration	-2.641 ^b	-0.3650

^aSignificant at the .001 level.

^bSignificant at the .05 level.

Notes:

Standard Error of Estimate = 0.8032

Multiple Correlation Coefficient = 0.7306

Multiple Correlation Coefficient Squared = 0.5338

F score (degrees of freedom = 4, 46) = 13.1672 (.001 level).

The F score for the four variables (13.17) is still significant at the .001 level. One individual t-value has changed however. Differentiation at 4.24 remains significant at the .001 level, and the t-value for education (3.78) is also significant at the .001 level. That for migration (-2.64) is now significant at the .05 level. The t-value for fluidity (-0.36) is not significant and will therefore not be commented upon further.

The beta weights for these variables are also important as they indicate the contribution of each variable, when holding the others constant, to predicting the rating of a state's reception process. As Table 3 shows, education's beta weight indicates the most contribution, but its level of significance (i.e. t-value) is lower than that of differentiation. This is most likely due to the distribution of the variables. The beta weight for differentiation comes next, followed by migration and finally fluidity.

Reviewing the findings of the Stepwise Multiple Regression, we find that differentiation independently explains the most variance in the various rankings of state reception processes, with education coming next and finally migration.⁹ Both differentiation and education show themselves to be crucial variables and in the final analysis indicate their equal importance.

(Implications)

As mentioned above, the variables differentiation and education consistently show their significance throughout the various steps of the regression analysis. At the first of the chapter, the differences in these variables were discussed with the suggestion that differentiation be considered structural and education be viewed as an aggregate or intermediary variable. The fact that the two were found to have no significant correlation with each other added further credence to the idea that they measure different things. Also important was the finding that the corresponding variable in each type (i.e. fluidity and migration) were significantly related with its respective partner variable. That is, fluidity was

⁹Fluidity explains only .1 percent additional variance and was not significant in the final analysis.

significantly correlated with differentiation and migration with education. The implication being that they measure similar things. Their relative unimportance independently is also seen in the low amount of additional variance in the dependent variable explained when they are added in the Stepwise Multiple Regression.

What this analysis seems to show then, is that differences in reception procedures used by the various jurisdictions can be explained by the use of what are termed structural variables and also aggregate variables. The most important of which are respectively, differentiation and education.

The purpose of this chapter is not to make statements about the goodness or badness of the process used by any particular state to receive its adult male felons into their correctional facilities. Rather, it is the intention here to offer possible explanations as to why differences do exist. The inner workings and symbiotic relations found here are, of course, complex and in need of additional study, but for this descriptive study, a state's reception process is seen as being greatly affected by both structural and aggregate variables.

(Transition)

The analysis of data in this chapter indicates that indices of societal development, especially differentiation and education, can significantly predict the ranking of a state's reception process for their criminal offenders. The underlying implication being that a reception process reflects the degree of development in a state. In so far as we can say that development is good, we must also assume, from this analysis, that the more highly developed states have better reception processes. The next logical question must then be: What procedures are used in these states to which Fox gave

high rankings?

An analysis of state procedures, to be explained in the next chapter reveals that one, if not the, significant difference in those states rated high is that they make use of specific Reception-Diagnostic Centers. Fox gave ten states the highest rating possible (i.e. "5"),¹⁰ and of these ten states, six have definite Reception-Diagnostic Centers.¹¹ At the other extreme, Fox gave the lowest ranking (i.e. "1" or "2") to twelve states.¹² Of these twelve, only three have Reception-Diagnostic Centers.¹³

Of the remaining states falling at the "3" or "4" level, some have Reception Centers and some do not. This fact is important to mention so that the reader does not come to believe that the simple existence of a Reception-Diagnostic Center automatically makes for a better reception process. The subsequent operation of the unit is, of course, of utmost importance. What is being shown here is that of those states rated high, a much greater number have Reception-Diagnostic Centers than do those states receiving low rankings. Because of this, it would appear to be most appropriate to turn now to a discussion of Reception-Diagnostic Centers in order to come to a better understanding of them.

¹⁰California, Florida, Massachusetts, Michigan, Minnesota, New Jersey, New York, Oregon, Washington, and Wisconsin.

¹¹The states of Massachusetts and Wisconsin did not provide adequate information to determine their exact procedures. The states of Minnesota and Oregon gave no response.

¹²Alabama, Alaska, Arizona, Arkansas, Georgia, Idaho, Kentucky, Mississippi, Nevada, North Dakota, Oklahoma, and South Dakota.

¹³The three states were Alabama, Arizona, and Georgia. Interestingly two of these were included in the six states where Fox disagreed by more than one point with the other judges. Arizona had no other response, but both Alabama and Georgia were rated "4" by Chiles.

CHAPTER IV

THE STATE OF THE FIELD

Reception-Diagnostic Centers can be seen as a direct outgrowth of the classification concept which, as noted above, is the essential ingredient of the treatment reaction to crime. Therefore, the appropriate place to begin in a discussion of such centers is with the ideas behind the classification process.

At the first meeting of the American Prison Association (now the American Correctional Association), on October 12, 1870, the membership drew up "The Declaration of Principles" which set down in writing the goals those in corrections saw as necessary for the proper fulfillment of their duties. The "Principles" were far reaching, and in fact, so far reaching that most of the prison officials voting for their adoption subsequently only paid lip service to the ideals (Eaton, 1962:10; Loveland, 1951:91). The attempts at treatment and training programs were indeed meager, particularly in the area of education. Additionally, even where such programs were provided, ". . . they were not directed toward the individuals who could most benefit from them" (Loveland, 1951:91). In the 1920's, prison administrators finally began seeing the incongruities of this situation, and came to realize that individualized treatment required consideration of the individual offender's background, abilities, and limitations.

Classification is, in itself, a rather tricky concept. The implication is that it is merely placing inmates into types or categories. As used by

correctional personnel today, however, it is ". . . a method by which diagnosis, treatment planning, and the execution of the treatment program are coordinated in the individual case. It is also a method by which the treatment program is kept current with the inmate's changing needs"(Loveland, 1951:92). The important point here is that classification is not static. Decisions are never or at least should never be, final and instead serve merely as tentative dispositions which are continually reviewed and, when appropriate, changed. The main concern in the classification process is to mobilize the resources of the institution in such a way that the individual's needs are met to the greatest extent possible.

The classification process is actually seen as consisting of four separate but coordinated procedures. The first is the diagnostic stage where involvement of the professional staff is essential. At the second step, the classification committee decides on a program of individualized treatment based upon their review of the diagnosis. The treatment program is implemented at the third step with the classification committee having the responsibility of seeing that its recommendations are carried out. The fourth stage is that of reclassification which is the procedure used to keep the program current with the changing needs of the inmate. (American Prison Association, 1947:2; Sutherland and Cressey, 1970:500).

Loveland's 1951 work on prison classification can still be regarded as one of the most comprehensive and well presented documents in this area. He noted three general types of classification programs existing at that time, and although the extent to which each is now used has changed somewhat, they still serve as a very good guide for what procedures exist even today.

The first system used was the "classification clinic" wherein "elaborate

studies and analysis of individual inmates were prepared with recommendations regarding treatment and training programs" (Loveland, 1951:93). This was as far as the clinic went, however, serving only in a diagnostic or advisory capacity. The ultimate decision was the administration's who often tended (possibly with justification) to view the recommended actions as being impractical (Sutherland and Cressey, 1970:502).

The next system to emerge provided for active involvement of both the professional and administrative personnel in planning the program. It is in this sense an "integrated classification system," and one that is used more than the clinic. Since the executive head of the institution is usually the chairman, the decisions of the committee become the decisions of the administration¹ (Loveland, 1951:93). In 1958, Coe and Shafter did a survey of classification systems in the United States, and reported membership on the classification committee to most often consist of representatives from the administrative, professional, and technical staff (Coe and Shafter, 1958:317). This would seem to indicate that the system described by Loveland as integrative still was the most common one in 1958. Possibly the most frequently noted problem with this system is the basis for decision. The idea of having personnel from both administration and professional areas is to enable the committee to set up an institutional program for an individual which will consider both treatment objectives and institutional limitations. Many authors agree with Cressey who states: "Probably most

¹Coe and Shafter (1958) note that two-thirds of their reporting institutions indicated the chairman of the committee to be either the warden or his deputy. Even in the remaining one-third, the warden or deputy was at least a committee member.

classification committees base their decisions on considerations of custody, convenience, discipline, and treatment, in that order" (Sutherland and Cressey, 1970:501). If this is indeed the case, the integrated system may experience as many difficulties as the classification clinic.

Loveland saw the third and most recent development in the classification field as being the reception or diagnostic center where ". . . convicted offenders are committed originally to a central unit for intensive study and program planning. After completion of the studies, they are sent on to appropriate institutions where classification committees take over" (Loveland, 1951:93-94).

These then are the three types of classification systems which can be seen as existing today. Loveland saw the most common system as being integrative classification with the reception center as being the newest but having potential. As noted above, Coe and Shafter's survey also found the integrative classification method as being most prominent in 1958. Following a review of present day procedures in each of the fifty states and the District of Columbia, it appears that the integrative system is maintaining its popularity. However, where only two states had fully developed reception centers in 1951 (Loveland, 1951:94), there are now at least nineteen states operating through the reception system of classification, and ten of these have only been in existence since 1965. This would certainly indicate a trend in the direction of interest in using the Reception-Diagnostic Center approach.

At the end of Chapter III it was noted that a distinguishing characteristic of those states with the better reception procedures (as determined by the Fox Rankings), was the presence of Reception-Diagnostic Centers.

When this is taken into consideration with the apparent growing interest in developing Reception-Diagnostic Centers, the need for research into this area is particularly emphasized. The remainder of the present research will therefore be concerned with the existing procedures of some of these Reception-Diagnostic Centers with the hope of providing information as to the present state of the field.

(Gathering the data)

In order to gain information as to the existing reception procedures, letters were sent to the Director of the appropriate agency (eg. Department of Corrections) in each of the fifty states and the District of Columbia. The letter explained the intent of the research and requested any available information as to the facilities and/or procedures presently being used in that state for receiving and classifying offenders. Before proceeding, a word about the method of gathering data is in order.

There were three main factors influencing the decision to gather information from each state in this manner instead of using a questionnaire or some other more traditional technique. First, several authors have commented upon the disenchantment many administrators develop for "researchers" because of unfavorable past experience or at times personal feelings as to the doubtful usefulness of research (cf. Garabedian, 1971: Gottfredson, 1971). In light of this, it was felt that the use of a questionnaire might not get as favorable a response as the method used.

Secondly, the undoubtedly many differing procedures in each jurisdiction would require an open ended type questionnaire possibly resulting in an administrator having to write a great deal in order to explain his

program. Therefore, to gather as much information as possible in a manner easiest for the administrator involved, the decision was made to request material already compiled into mimeographs, brochures, pamphlets, or whatever was available. Where such items were not available it was hoped that the administrator would be able to provide some type of summary of procedures.

Finally, since this was a descriptive study, it was felt that material prepared by the agency involved would be the most appropriate way to determine the extent of their program. Something as formal as a questionnaire would, of course, be more suitable when more empirical research is desired. It is hoped that material gathered in this research may suggest areas for more in-depth study in the future.

(Findings - Discussion)

There are several ways by which the material received could be discussed. One approach would be to give remarks concerning each individual state, but limitations of time and space makes this rather unrealistic. Another approach might be to discuss several states taking examples of each of the three types of classification systems outlined by Loveland (1951). This would be more appropriate, but since most states would fall into the integrative type system, which has been widely discussed, it would amount to no more than an unnecessary review of procedures already well documented.

The most appropriate approach seems to be one which concentrates on the newest type of classification (i.e. reception-centers) by discussing the procedures only of those states which are now operating such facilities. Even here much overlap will be seen so discussion will center upon areas seen as strong points in each individual system with the idea that it is the new

innovative programs and methods which will be of greatest interest to those in the corrections field.

(Reception-Diagnostic Centers in the United States)

A review of the 1970 "Directory of Correctional Institutions and Agencies," compiled annually by the American Correctional Association finds fourteen states which specifically list Reception-Diagnostic Centers.² A review of the material sent from each state finds in addition to those fourteen, five more states which have facilities that may be termed Reception-Diagnostic Centers.³ The thirty-two remaining states can be divided into two categories. For nineteen of those states either no response was received at all, or the material which was supplied did not provide enough information on which to determine the specific procedures.⁴ Information received for the remaining thirteen states indicated a specific classification system, usually with initial segregation from the general population and in several instances a specific Admission and Orientation Unit.⁵ These Admission and Orientation Units are different from Reception-Diagnostic Centers in that

²Alabama, California, Florida, Georgia, Illinois, Kansas, Maryland, Michigan, New Jersey, New York, Pennsylvania, South Carolina, Texas, and Washington.

³Connecticut, Indiana, Nebraska, North Carolina, and Tennessee.

⁴No response was received from Alaska, Arizona, Iowa, Maine, Massachusetts, Oregon, Rhode Island, Virginia, and West Virginia. Alabama is the only state not responding which is not included here. This is because the Directory lists a "Medical and Diagnostic Center" for Alabama and it was therefore included with those states having Reception-Diagnostic Centers.

⁵For example, Utah.

they serve only the institution to which they are connected and are therefore not concerned with classification for institutional placement which is a main concern for Reception-Diagnostic Centers. They are most appropriate for those states having few correctional institutions.

(History)

Reception-Diagnostic Centers can be seen as having their start in various Youth Authority plans with those of California and New York being most notable (cf. Loveland, 1951; Kendall, 1951). California and New York both had programs starting in the early 1940's for their children and youth. A letter from the Department of Correctional Services in New York indicates that the Elmira Reception Center still receives only males between the ages of 16 and 20 years of age (except those sentenced to death or adjudged mentally ill or defective prior to commitment). Older male commitments undergo a somewhat more abbreviated classification process at various correctional facilities throughout the state (New York, 1971). The letter also noted the entire reception-rehabilitation-release process is undergoing study with the ultimate objectives of including all individuals, committed or recommitted, in the orientation, examination, testing, and assessing phase of the reception operation.

California seems to have progressed further than New York considering the nearly equal starting dates. Using the reception procedures for youths as a base, in the early 1950's California established two receiving units for adult male felons. The Southern Reception Guidance Center is located at the California Institution for Men and receives all adult male felons committed to state prison from the eleven southern counties of

California.⁶ Men committed from the forty-seven central and northern counties are received at the Northern Reception Guidance Center at Vacaville (California, 1971).

The influence of Youth Authority's on programs for adults can be seen in other states also. Illinois provided a great deal of information on the history of its classification program, and thereby allows an example for more complete discussion.

The Illinois material notes that the influence of the juvenile court and child guidance movements along with the development of the behavioral sciences gave rise to the Division of the Criminologist on July 1, 1917.⁷ During the first sixteen years, diagnostic work in Illinois became a multidiscipline approach incorporating professional personnel from psychiatry, psychology, and sociology. In 1933, a formal classification program was started with the establishment of two receiving clinics: the Joliet Diagnostic Depot and the Menard Diagnostic Depot. As the Menard Depot was established to receive mental patients from all units of the system, the concern of this discussion will be only with the Joliet Depot.

The years 1933-1941 are seen as a period of innovation in Illinois with the development of a philosophy of classification and treatment and the establishment of the basic classification program for the Illinois'

⁶Exceptions are those men sentenced to death who go directly to San Quentin from the county jails.

⁷Compare this date with that of Mead's article (1917-18) mentioned in Chapter II where he notes the need for procedures for adults to follow in the footsteps of the juvenile courts.

adult correctional system. From 1941 to 1961, the emphasis was on staff expansion with state-wide units functioning at Menard, Pontiac, and Dewight as well as Joliet. Classification procedures also expanded and became more sophisticated. The period from 1961 to 1970 saw even greater expansion of duties and a more than three-fold increase in staff. It was also during this time that diagnosis in Illinois shifted from mere institutional placement and management to preparation and assessment for release (Illinois, 1968). Although having a Diagnostic Depot for almost forty years it would appear that Illinois has only in the last decade expanded their procedures to include the more vital areas of concern for reception centers.⁸

On March 29, 1972, additional correspondence was received from Illinois which notes that a Public Act affecting the Illinois reception process was recently signed into law. This Act authorizes the construction of new Reception, Diagnostic and Treatment Centers for both juveniles and adults. The Adult Center will replace the old Diagnostic Depot in Joliet which is being closed in 1972. The new center will also be in the Joliet area (Illinois, 1972).

(Recent Developments)

New York, California, and Illinois offer a good historical perspective on Reception Center development. Discussion will return to these states when considering existing programs, but first the more recent Reception Center programs will be mentioned.

⁸This may provide explanation for Loveland (1951) and Kendall (1951) omitting Illinois when discussing reception centers having a fully developed program.

In 1954 the State of Washington established Reception and Guidance Units at the State Penitentiary and the State Reformatory. Their purpose was to provide professional clinical teams to study each inmate for several weeks after arrival in order to determine factors leading to criminal behavior and outline a program of treatment so that potentiality for further conflict with society would be minimized. This procedure, which was similar to the Admission and Orientation Unit referred to above, was used until early 1965. At this time a new Reception Center assumed the duties of the Reception and Guidance Units. Men in Washington are now sentenced without designation as to institution and the new Reception Center serves as a clearinghouse for all males sixteen years of age and over.

The Washington State Reception Center appears to be one of the more architecturally advanced facilities of its kind. It is located at the Washington Corrections Center but remains separate in its activities. The Reception Center has three major units each with eighty single cells and ten cells per tier at two tiers high. Each section has four units with no more than twenty cells in each section. There is a total capacity of 240 cells. A point is made to separate older men from the younger ones (Washington, 1971).

Other states developing Reception-Diagnostic Centers in recent years include Connecticut, Georgia, Indiana, and Tennessee. The Connecticut Reception-Diagnostic Unit is located at the Connecticut Correctional Institution - Somers. Its program was apparently based on a manuscript by Carleton Townsend and Lawrence Albert (n.d.) which reviewed procedures in several other states in order to gain ideas suitable to the needs in Connecticut.

Both Georgia and Tennessee represent the new developments in corrections coming from our Southern States. Of particular interest is their use of the team approach in classification which seems patterned after the procedure used in Florida and will be discussed at length below. The center in each state is a separate facility and offers a full program of diagnosis and classification. The advancements by both states in the last five years is certainly commendable.

Apparently the newest Reception-Diagnostic Center is that now operating in Indiana. The Director there notes that on January 3, 1971, Indiana opened the first Reception-Diagnostic Center in the state's history (Indiana, 1972). Although definite information is not yet available, the stated goals would indicate the makings of a very complete program.

Correspondence from Idaho indicates that although they presently have only an intake unit located in a section of their 100 year old institution, plans for significant change are being made. In 1971 the Idaho State Legislature approved plans to develop a new reception and diagnostic complex located totally apart from the prison facility (Idaho, 1971). It was anticipated in the letter that the facility would be opening in the fall of 1972.

The development in states such as these four show the great difference in time from the original base formed by such states as New York, California, and Illinois. Where a slow, uphill process was often the case before significant changes took place prior to 1960, more recent changes occur with seemingly less difficulty. Several explanations arise: First, the states now implementing new programs can learn and borrow from those states having experience with similar procedures. The publications and personnel

coming from states like California must certainly have an effect on new programs in other states.

Another possible explanation for the more rapid pace of change can be seen in terms of the changing societal reaction to crime as noted in Chapter II. The ability for State Legislatures to pass new laws and spend money for new procedures and facilities is indication of the public realizing the necessity for treatment of the offenders.

There are, of course, variations in procedures throughout the fifty-one jurisdictions and these should be mentioned before proceeding.

Pennsylvania and North Carolina both have a decentralized system. Diagnostic-Classification Centers in Pennsylvania were formed shortly after the forming of the Bureau of Correction in 1953. In 1954 the Western Diagnostic-Classification Center opened in the State Correction Institution at Pittsburgh and the Eastern Diagnostic-Classification Center opened in the State Correctional Institution at Philadelphia. The state was then divided in half by a vertical line respecting county boundaries. Counties in each half of the state then sent their sentenced men to the Diagnostic-Classification Center for their section of the state. Around 1969, the decision was made to open three more centers, with one each in the State Correctional Institutions at Huntingdon (Central) Camp Hill (South Central); and Dallas (Northeastern). The intent of this system is to give each institution a regional characteristic and to serve a constituent population. Complete diagnostic workings are provided in medical, dental, psychological, and sociological areas (Pennsylvania, 1971).

In their effort to decentralize, North Carolina is divided into six areas, each of which is administered by one person. Each area is then

further divided into regions with seventeen in all. Offenders are admitted and classified at a specialized unit (i.e. maximum security, women, youth, etc.), or one of the 8-10 field units. There is at least one of these field units per area and each follow similar procedures which include identification, medical examinations, and the gathering of any appropriate sociological and psychological data. It is noted that most felons with sentences of three years or more are sent to the Central Prison Diagnostic Center for a full work-up (North Carolina, 1971).

Before moving to consideration of programs offered, there is one more state which has an interesting variation to the classification system. In February, 1970, the State of Hawaii put into operation an Interim Adult Diagnostic Team. Membership on the team varies but the basic representation includes: one member each from the Mental Health Team, Vocational Rehabilitation Division, Adult Probation Office, Board of Pardons and Paroles, Community Center Branch of the Corrections Division, Hoomana School, Employment Service of the Department of Labor, and a Correctional Counselor serving as coordinator.

Until a full time team exists, the Interim Team is concerned with only three broad classes of offenders: 1) first offenders, 2) all women, and 3) pre-sentenced cases from the courts. Those sentenced are housed at the State Prison Diagnostic Center apart from the general prison population until classification procedures are completed. Pre-sentence cases may be processed as "out patient" without confinement.

The duty of the Team is to attempt to ascertain why an offender acted as he did, what strengths he possesses which can be cultivated, and what weaknesses must be strengthened. After interviewing and testing is completed,

Team members must recommend definite programs of action while keeping in mind the capabilities of the Corrections Division and/or the community. After agreement on the program it then becomes the responsibility of the respective institutional classification committee and/or staff to implement the prescribed program and provide feedback to the diagnostic team (Hawaii, 1971). This summary of procedures in our newest state certainly shows that it is not necessary to have new buildings with elaborate procedures in order to implement a very modern classification system. The procedure may not be appropriate for more populated states, but the point is, of course, to find a system by which the reception process can be most effectively and efficiently carried out in one's own state.

This general review of the development process of Reception Centers from the originals to the more recent systems leads to a discussion of actual programs and procedures being used today at different steps in the reception and classification process.

(Reception Center Procedures)

The length of stay for a man in the Reception-Diagnostic Center will vary from state to state. The range goes from Maryland's two and one half to seven weeks to the six to eight weeks suggested in California. The average appears to be three to four weeks. The reason for the varying times within each state is most often due to the various types of cases involved. At the Washington State Reception Center, new admissions will stay about six weeks while Parole-Violators, recidivists, and disciplinary cases will usually stay only four weeks, as much information has already been gathered on these men. The idea is to use the amount of time necessary to relieve

as many of the fears as possible which new offenders must certainly have. Of equal importance, however, is to provide activity in addition to the necessary tests and interviews so that the man does not become bored and therefore even less amiable to aiding in the preparation of his program. Most centers seem to believe that three to four weeks is sufficient time to relieve the anxieties and misconceptions of the offender while preparing a treatment program with him, yet not so long that he becomes bored and possibly uncooperative. Of utmost importance is keeping the schedule flexible enough that inmates requiring more or less time will be handled appropriately.

Orientation to the prison environment is by no means a new program. The difference is that new inmates now receive their orientation from officials instead of from inmates who are more criminally and institutionally sophisticated. Loveland (1951) notes that the first orientation programs conducted by officials were limited to simple explanation of the rules and regulations. Later, description of available facilities and programs was added. Many orientation phases now include lectures on mailing and visiting, education opportunities, vocational rehabilitation, counseling services, parole procedures, etc. Lectures are usually given by administrative and professional personnel but some states include a lecture by an older inmate where the newcomers can ask questions without members of the administration or staff present.

Material received from Tennessee included a rough draft of an Inmate Handbook which is being prepared. This is becoming a common feature at the orientation phase in many states and bears examination. The Tennessee Handbook explains to the inmate his length of stay at the center and the

nature and purpose of the various examinations, tests, and interviews he will be involved in. Tennessee uses Classification Teams (which will be discussed below) and the areas to be discussed with these teams (e.g. custody, education, work, counseling) are indicated so that the man can begin thinking about his preferences. The new inmate is also told the basis for the recommendations which would include such things as the personal interview, parental questionnaire, medical examination, and psychological tests.

The reception procedures are then outlined with the activities broken down into appropriate weeks. The first being initial processing and physical examinations; the second, orientation lectures and the start of psychological tests; and the third, continuation of orientation and the beginning of interviews with the classification team members, chaplains, and other key personnel.

Also covered in the handbook is a summary of each of the five institutions to which the man may be sent, explanation of the Quarterly Progress Evaluations, discussion of parole, work and education release, pre-release, and job assistance programs. As any correctional worker knows, the major concern of the inmate is his release date and to this end, the Handbook provides an extended discussion on Good and Honor Time. Details are given for determining how much time is due as well as circumstances in which it can be taken away (Tennessee, 1971).

Townsend and Albert (n.d.) have noted that although these lectures and written materials are good, they do not necessarily make a complete program. California uses these two and has added the idea of short term group counseling. In this way the new man can express his anxiety and ventilate fears by discussing them in the group.

It is through these procedures that the orientation phase of the classification process is carried out in the various Reception-Diagnostic Centers. The general goal of all regardless of method is to provide the inmate with opportunities to express himself, get questions answered, become familiar with institution life, and develop a positive attitude toward the institution and its programs.

(Administration and Staffing)

Reception-Diagnostic Centers are for the most part under separate administration from the institute in which the men are eventually placed. When they are located in a section of one of the institutions, as in Nebraska, for example, administration will likely be the same. A notable exception to this is the Michigan Reception-Diagnostic Center which is physically attached to the State Prison of Southern Michigan yet is administratively separate.

There are, of course, arguments both for and against separate administration. Illinois feels the autonomous nature of the Reception and Diagnostic staff in relation to the prison administration ". . . has allowed the staff to be free of any responsibility for custody and discipline, parole or pardon or inter-institutional transfer, thus allowing Classification to be a more permissive undertaking and not authoritarian" (Illinois, 1968:8). Problems can arise, however, if the staff of the Reception Center are not fully aware of the available programs and facilities in each institution.

Staffing at Reception-Diagnostic Centers usually follows the philosophy of the integrated classification system. The breakdown at Washington's Reception-Diagnostic Center provides a good example. There is first the Associate Superintendent of the Reception Center who is under supervision

of the Superintendent of the Washington Correctional Center. It is his duty to direct the Reception Center program and coordinate it with other state correctional facilities. Next is the Supervisor of the Reception Center who has direct supervision of the diagnostic staff and also coordinates the testing program, and resolves diagnostic problems faced by the staff.

The six Sociologists at the Center must interview new men as frequently as possible, interview and correspond with members of the immediate family and other persons and agencies. It is also the Sociologist's duty to compile and dictate the Admission Summary; advise the Classification Board; conduct group orientations; and serve on the Adjustment Committee for their cases. The goal at the Washington Center is to make the Sociologist totally responsible for his case and thereby avoid the stigma of just turning out Admissions Summaries.

The staff is rounded out by two Vocational Counselors who administer the group testing program; two Psychologists who review all tests, administer additional ones if the need arises, submit a psychological report for the Admission Summary, and take referrals from Sociologists and Psychiatrists; and one Psychiatrist who evaluates all cases with crimes against persons, submits a Psychiatric Report for the Admission Summary and takes referrals from Sociologists and Psychologists.

Also there is a Clerical Division, a Reception Center Lieutenant and various Correctional Officers. These Officers have the responsibility of submitting observation reports and counseling in cases of minor diffi-

culties.⁹

The nature of the Reception-Diagnostic program requires that members in each of these professional disciplines work together to provide a complete diagnostic picture of each individual. This means each must be willing to not only impart information from their own discipline but also accept and learn from the other fields. Some Centers are making use of formal training programs in an attempt to enhance the quality of professional interaction between staff (Townsend and Albert, n.d.).

(Diagnosis)

The basic procedures for obtaining information in most diagnostic programs are very similar. The traditional interviews, tests, questionnaires, and staff reports retain their popularity. Social, vocational, educational, and psychological are the main areas emphasized. Tests such as the Weschler Adult Intelligence Scale, the General Aptitude Test Battery, the California Achievement Test, the Occupational Interview Inventory, the Minnesota Multiphasic Personality Inventory, and the California Psychological Inventory are most often used. There are, however, areas of equal importance which are often overlooked. Observations as to the way an individual handles himself in groups is one such area. California, for example, uses observation reports of the inmate's behavior in orientation group counseling, his reaction to group pressure, and his leadership qualities.

A report from Custodial Officers is also important as realized by such

⁹The growing recognition of the important part Correctional Officers can play is also shown in the discussion below of the Florida Classification Teams.

states as California, New Jersey, Pennsylvania, and Washington. Such reports can give insight into the individual's reaction to authority, reaction to controls, and interaction with peers. The third area often overlooked is recreation and leisure time which Townsend and Albert (n.d.) note does not seem to be considered by most states to be a necessary function of the Reception Center. Because many individuals have never developed productive ways of using their leisure time, some evaluation of the inmate's abilities and interests in recreational areas should certainly be included in the final report to the Classification Committee.

(Classification)

The purpose of diagnosis is, of course, to enable appropriate classification to be carried out. As the philosophy of classification has already been discussed, the concern now will be with the actual process involved.

The Classification Summary is the report containing all diagnostic and evaluation material gathered at the Reception Center. As noted when referring to the Washington Reception-Diagnostic Center Staff, the Summary is usually compiled by the Sociologist (or his counterpart) at the Reception Center. His duty, then, is to synthesize the endeavors of the representatives from the various disciplines. The general length of this report seems to vary considerably by state with Florida having some fourteen to seventeen pages and other states like Nebraska keeping it to five or six pages. In all cases, however, the general format and areas covered appear similar. A description of the offense for which the individual was committed and any previous criminal record most often begins the Summary. Both the official version and that of the inmate is recorded. Medical, psychological,

educational, and vocational reports are then stated as well as reports from the Correctional Counselors. The next areas usually are done by the Sociologist and include a social history with emphasis on family relations, education, work history, goals, release plans, etc.

The summary concludes with a recommendation section for institution, custody, and program. Of utmost importance, and unfortunately a concern often overlooked, is the need to base recommendations for institutional placement and programs on a thorough knowledge of the facilities available at each institution. Also, probably a carry over from the punishment philosophy, a tendency still exists to base custody recommendations on the basis of the type of crime committed instead of on a knowledge of the individual. Additionally, "Treatment and program recommendations should be stated in specific terms so that at periodic intervals (eg. request for reclassification, parole progress evaluation, etc.) institutional personnel responsible for implementation of programming can be required to explain why recommendations were not or could not be followed, if such be the case" (Illinois, 1968).

The Classification Summary will become an important part of the individual's file and will be, or should be, read by all personnel involved with the individual. In Oregon an attempt was made to ". . . provide all employees, or anyone else who could have some degree of responsibility for the rehabilitation of each offender, a description of the offender's capacity for reaction to any human problem at a given time" (Long, 1965:5). Problems between work supervisors and the inmate is only one example of a situation in which knowledge of the inmate's Summary could be beneficial. For example, an inmate may need very clear and easily understood instructions and

directions. One may need assignments which are repetitive in nature. Another may be incapable of doing things which require judgment. The list, of course, is endless.

However, the initial use of the Classification Summary is by the Classification Committee itself. Membership on these committees seems fairly consistent across the nation except concerning numbers. Some states like Nebraska may have as many as twelve members while others have as few as four. Washington falls into the latter category with at least four members who usually include the Supervisor (acting as chairman), a Psychologist, a Sociologist, a Correctional Officer, and occasionally a Vocational Counselor. At Washington, and likely all other Reception Centers, all members are required to review and study the Classification Summary on each case before the Classification Committee meets. The members then decide, usually after consulting as a group with the inmate, what institution he will be sent to and what treatment program will be implemented.

It is in the area of Classification that the most recent changes seem to be taking place. This is seen most clearly with the new concept of "team classification" which is presently very popular in our Southern states such as Florida, Georgia, and Tennessee. Florida's Reception and Medical Center opened in September 1968, and may have been the first state facility to employ classification treatment teams.¹⁰

From the mid-forties to 1957, Florida had classification committees in each institution which were little more than assignment committees. With

¹⁰Credit for the first treatment teams is given to John Galvin who made use of them while warden of the Federal Reformatory at El Reno, Oklahoma.

the reorganization of the State Correctional System in 1957, a Reception-Diagnostic and Classification Center was established at an annexed part of the Florida State Prison. This unit operated for some eleven years using the conventional type classification committee which had the responsibility to make the initial program decisions on all inmates committed to the Reception Center after testing and interviewing.

Some of the disadvantages with this system were: 1) The large number of men being processed prevented all of the committee from gaining any specific knowledge of an individual. 2) Since the classification committee met on a fixed weekly schedule, some inmates who had completed processing were forced to idly sit by waiting for the classification meeting. 3) The large number of men to be classified often necessitated in rushing the cases through the committee with the individual taking little, if any, part in the decision making process. 4) Questions were rarely asked by the inmate, possibly because of the size of the committee members. 5) Many times the classification committee was seen by the inmate as being a cold impersonal machine type operation, handing out what appeared to be spur of the moment type decisions (Florida, 1971).

The desire to overcome these disadvantages saw Florida implement a team approach to classification. Six Classification Treatment Teams were established (there are now ten) each of which were to share equally in individual case processing to final completion. The functions of the team approach include: Inmate diagnosis, classification and development of a treatment program based on individualized study of each inmate, and motivating him toward the formulated goals.

The Florida Teams are made up of a Classification Officer who has been

professionally trained in the area of human behavior and has direct responsibility for coordinating the team in its activities. Like the Sociologist, who would be his counterpart in other institutions, he is responsible for preparing the Classification Summary. Another member is a Psychologist who prepares Psychological Screening Reports using psychological testing, personal interviews, counseling, etc. Also included is a Correctional Counselor who is a member of the custodial force and has as his duties the observation of inmate behavior in prison, supervising inmate movement, counseling, and preparing a report for the Classification Summary which indicates the inmate's adjustment during orientation. Additionally, each team has a Classification Supervisor who serves as an advisor.

The idea of actively involving the custodial force in the treatment process gave rise to the implementation of this Correctional Counselor. Florida sees this as drawing the custodial service into treatment programming on a full partnership basis, thereby bringing a sharing of responsibility for making program recommendations.

At the final team meeting, each member receives completed copies of the Classification Summary and makes additional comments as he feels necessary. The members discuss the inmate to be classified and then present to the inmate the tentative program recommendations. At this time the inmate may express his own views and suggestions which will then be discussed further among the team members after the inmate leaves the room. After a firm decision is made, the inmate is informed of the decision and the reasoning involved. The final team recommendations cover the areas of custody, institutional assignment, academic and vocational education, work areas, counseling, etc. The main concern is to identify the needs of the individual

inmate and then match these needs to the institutional resource that can meet the needs.

Those involved with this approach in Florida have indicated some of the advantages of the program and they are certainly worth noting: 1) Greater individual attention is possible. 2) Close personal contact enables better evaluation of individual's strengths and weaknesses. 3) Individual inmates are better able to relate with team members than to a strange and large committee. 4) The classification teams tend to create a more personal touch and more favorable impression. 5) Interaction and sharing of ideas brings better understanding among members of the team. 6) Particular advantages are increased participation of all parties and especially of the inmate and the custodial force. In fact, a seemingly latent function noted by Florida is the affect on Correctional Officers as their association with the Reception Center and effort in assisting team members in recommendation process has brought promotions for six of them.

The developments in this area seem interesting to say the least. Whether or not it will be implemented in other states is difficult to say due to its newness. In any event, the efforts in Florida, Georgia and Tennessee will certainly demand attention in the coming years.

(A Fictional Illustration)

This piecemeal review of procedures used in Reception-Diagnostic Centers does not provide a very exact description of what is actually occurring. Because of this, a fictional account is presented which will provide an opportunity to follow a young man through three weeks in a Reception-Diagnostic Center. Fish is the prison name for new inmates, so it seems only appropriate to name the character John Fish.

John Fish is a twenty year old white male who had been sentenced the previous day to one to three years on a charge of larceny. The County Sheriff had just escorted John through the main gate of the State Reception-Diagnostic Center. He and the Sheriff proceeded to a window which looked into a room filled with file cabinets. The woman on the other side of the window took some papers from the Sheriff and told him that everything was in order. She then asked John for all of his personal belongings except his comb, family pictures, and watch, and then placed them in a large envelope which she told him was his personal belongings file and would hold all his immediate possessions until the time of his release. His money was also taken and an account was opened in his name. John was told that when he goes to the inmate store to buy cigarettes, candy, toilet articles, etc. the clerk will subtract the appropriate amount from his account.

John was then led down a hallway and into a large room where he was told to strip down and take a shower. On his way out of the shower he was sprayed with a disinfectant and told to bend over while a guard does a cavity search for contraband. John then began to feel the full impact of what he heard someone once call human degradation.

His next stop was a long table from behind which a man was handing out white uniforms. John put on these "newcomers" clothes and was taken to a barber chair where an inmate barber gave him a rather hurried haircut. He was next taken to a room marked "Identification," and had his picture and fingerprints taken. The guard then casually handed him a card with #26106 printed on it. John realized that this was to be his new name for the next one to three years.

Two hours had passed since John entered the main gates, and he was now

being escorted through yet another gate which he overheard was called "Turnkey." John then heard the giant steel door slam shut behind him only to see another just like it open in front of him. He walked through and saw for the first time the inside of a cell block. He noticed that the other men there seemed to be about his age, but it was not until later that he discovered that two cell blocks are in operation so that the youthful offenders can be kept separate from the older more sophisticated inmates. The cell block officer led John to a cell with a bed, desk, toilet, and sink, all somehow cramped into the small area. His name and number were placed on the door and John was free to sit on the bed and begin "doing time."

Later in the evening, after dinner, John and the other men who arrived that day were taken to a large room with school desks in it and received their first of many orientation sessions. This particular one was by the correctional officers who discuss the rules and regulations, penalties for disobeying, correspondence and visiting, and other areas which may be of concern to the new men. They were given a Reception-Diagnostic Center Rulebook and an Inmate Handbook which they were told to become familiar with.

The remainder of John's first week was taken up mostly with more orientation classes. He was also able to have outside recreation in both morning and afternoon, as well as make use of such inside facilities as ping pong, pool, television, cards, dominoes, and movies. The orientation sessions themselves covered many areas. A Sociologist spoke about mailing and visiting privileges, parole, Good Time and Extra Good Time, and explained the general and specific purposes of the Reception Center program. Representatives from self betterment groups such as Alcoholics Anonymous, Checks

Anonymous, Narcotics Anonymous, Gavel Club, Stamp Club, etc., all came and explained the working of their respective organizations. There were also lectures from the areas of Vocational Training, Education, Administration, and Religion.

One of the sessions which John found most interesting was a slide tour of the Reception-Diagnostic Center and the various facilities in the state to which he might be sent. This helped reduce his fears of transfer, since he knew no matter where he went it would look somewhat familiar.

While John was attending orientation during the first week, the Sociologist assigned to his case had been gathering information on John from various outside sources. Questionnaires were sent to his parents, wife, friends, high school principal, former employers and any agency such as other penitentiaries and mental hospitals if he had ever been associated with them. The Sociologist then used this information to begin compiling a complete case history on John which will be used in the Summary that goes to the Classification Board.

As John's second week started, he began seeing the professional staff. Psychological tests were administered which John was told will measure his intelligence, achievement, and personality. Each test was explained to him and afterward he discussed the results with the Psychologist. The Vocational Counselor also interviewed him and John told him that he was interested in welding. The Counselor explained to John when classes in welding start, and what chances John had of getting into the program.

During the third week, John was interviewed by the Sociologist who had already compiled much information on John from questionnaires and the Pre-sentence Investigation which was prepared by the Probation Officer when

John was in court. The Sociologist told John that he needed more detailed information in some areas such as family relationships and work history, so that when John went before the Classification Board accurate recommendations could be made for a treatment program best suited to John's needs. The Sociologist then explained that all the information gathered on John, including social, psychological, physical, religious, vocational, educational, etc., would be synthesized into a Classification Summary. On the basis of this, a committee would decide the institution to which John will be sent, what his work assignment will be, any vocational and/or educational programs, and other areas relevant to his program of treatment.

Near the end of the third week, John was called before the Classification Committee. Many of the members have talked to John privately, but even those who didn't were familiar to John since they had given group orientation lectures. The Sociologist introduced John and gave a brief review of the recommendations which had been made concerning him. John had discussed them before with the Sociologist so he was not surprised to hear that he was recommended for transfer to the Medium Security Unit where he could participate in welding classes and group therapy. The Committee chairman asked John if he had any questions or suggestions before a final decision was made, but John said that he did not. He was then asked to wait outside the room.

While John was out, the committee members reviewed the recommendations and felt that as a tentative program, they looked very good. John was asked to come back into the room and was told that the recommendations were accepted and that he would be transferred in the morning. The chairman then explained to John that the program was a flexible one and that as his

needs changed the program would be changed. A date was set for ninety days later at which time John would come before the committee again to determine if any questions or difficulties had arisen. Words of encouragement from the chairman were extended and John left the room feeling that someone actually was concerned not only about what happened to him in prison, but more importantly, what would happen to him after his release.

In summary, then, this is what one young offender might expect as he enters the doors of a prison. Simply knowing what to expect of others and what is expected of him, relieved John of many of his anxieties and enabled him to take an active part in preparing his own program. The case is fictional, but the procedures are common in Reception Centers today.

(A Follow-up Study)

A primary difficulty in the past has been with implementing the recommendation from the Reception Center and Classification Committee. Feedback from the institution is often nonexistent, so it is not unlikely that personnel at the Reception Center are seldom aware of the actual extent to which their recommendations are put to use. This was the concern of a study done in Michigan which certainly indicates a great need for additional research in this area.

Noting that the primary output of the reception process is a recommendation for placement and programming based on a diagnosis process, Michigan saw the principal measure of Reception-Diagnostic Center effectiveness as being the value of this output to the larger system. A follow-up study was undertaken to determine the actual utility of Reception-Diagnostic Center recommendations to the receiving institutions by seeing to what extent the

recommendations are in fact acted upon.

Subjects for this study (done in May 1969) included men with numbers ending in "1" who entered the Michigan Diagnostic Center during the months of April and May 1967, October and November 1967, and April and May, 1968. No systematic record of the treatment programming received by inmates existed at the time of the study, so information was obtained by systematically interviewing each of the 111 inmates studied. The treatment program received was then recorded and coded for comparison with the treatment programming recommended on the Transfer Order (or Recommendation) Sheet from the Reception Center.

Seven recommendations were considered. Results from some of the more interesting comparisons are:

- 1) 46 percent of those recommended for group counseling received it while of those not recommended, 33 percent received group counseling. When restricting group counseling to a meaningful amount (i.e. 12 sessions) the percentage of those recommended and receiving it fell to 36 percent, while of those not recommended only 21 percent received a significant amount.
- 2) 34 percent of the sample was recommended for individual counseling, however only 5 percent of this group actually received it. No one not recommended received individual counseling.
- 3) Five subjects in the sample had been in a more serious class, and were recommended for contact with the visiting psychiatrist. None of them had had such contact.
- 4) Three subjects were recommended for evaluation and/or therapy at the Psychiatric Clinic. Two received such programming and one did not.
- 5) As to special programs, 59 percent of those recommended for Alcoholics

Anonymous received it as well as 15 percent of those not recommended. 50 percent of those recommended for Narcotics Anonymous received it with only 3 percent not recommended also being in the program.

6) 20 percent of the sample was recommended for a specific trade training program with 36 percent of them receiving it, and 9 percent receiving some other trade training. 15 percent of the sample were recommended for an unspecified trade training with 47 percent of those receiving it. 26 percent of those for whom no training was recommended received it.

7) Of those recommended for a work assignment, 97 percent received it, however, of those for whom no such recommendation was made, 85 percent still received a work assignment. Additionally, of those recommended for a specific work assignment or specific area for assignment, 65 percent received an assignment in the specified area, 33 percent received an assignment in a different area than that recommended, and 2 percent received no assignment (Michigan, 1969).

Two things appear to be indicated by this Michigan study. First, the recommendations do make a real difference in that if an individual is recommended for a program he is more likely to get it than if he is not. Secondly, except for work assignments, academic school, and Alcoholics Anonymous, it is probable that a given recommendation will not be implemented especially in reference to the counseling-psychiatric area. The majority of the men in the sample had received no counseling.

This non-utilization of recommendations is seen as being due to one of two reasons. First, the reason may lie in the fact that the recommendations are inappropriate, suggesting problems in the Reception-Diagnostic Process itself, or secondly, it could be that the recommendations are not

followed due to limitations in implementation.

In considering the first reason, the Michigan researchers determined that where recommendations for counseling were made, gross distortions in attitudes and beliefs were apparent for which some sort of counseling was highly indicated. The real defects in the recommendation process were actually in direct opposition to the idea of them being inappropriate, since oftentimes there was a failure to recommend any treatment program at all when such was considered warranted by the researchers.¹¹ Also, when recommendations were made they tended to be for group counseling, and they were vague concerning goals which the counseling should have.

On this basis, the researchers determined that failure to follow up on recommendations could not be attributable to the reception process since their shortcomings are more in a tendency to under-define or failure to recommend specific programs. Instead, the problem was seen as being in lack of facilities, especially staff, to carry out the recommendations. ". . . it is evident that counseling staff in the institutions is not adequate in numbers to provide individual counseling even for the minority of cases where that is now recommended" (Michigan, 1969:73).

This study admittedly lacks empirical sophistication; however, to this author's knowledge, it is the only study of its kind presently available. The need for more goes without saying. It is, of course, gratifying to know that Reception Center recommendations do make a difference in some program areas, but possibly more important for future development is the

¹¹The study did not state what qualifications the researchers had to enable them to make such decisions.

finding that lack of facilities and/or staff in the various institutions prevents the implementation of recommendations in such crucial areas as counseling.

This concludes the discussion of the state of the field for the newest type of classification system. The Reception-Diagnostic Center has indeed grown in popularity throughout the country and indications are that even more Correctional Administrators will be seriously exploring the possibilities of implementing such facilities in their own state.

In the following chapter the implications of the various topics discussed will be mentioned and a final attempt will be made to summarize the areas considered.

CHAPTER V

SUMMARY AND DISCUSSION

The penal reform movement has been viewed as a trend away from a punishment orientation to the criminal, and toward what has been termed a treatment orientation. The works of Mead and Durkheim served as theoretical background into the ways in which changing social organization in a society also finds changes taking place in the attitude society members have toward each other. Mead notes, however, that attitudes toward the criminal have resisted the change and he believes this to be due to the emotional solidarity provided society members when they take a punitive reaction toward the criminal. His solution to this problem is to find an alternative means of bringing about this emotional solidarity. The treatment reaction being implemented at the juvenile court level in the 1910's was noted by Mead as fulfilling the requirements for an alternative method because society members are able to work together to return the offender to a useful and law-abiding position in society. Since 1920, the process noted by Mead in juvenile court has been expanded to include the adult court which provides further evidence for the existence of a move toward a treatment reaction.

Of primary importance for the proper implementation of this treatment reaction, is the classification of the individual offender by means of recommendations which are made for his particular circumstances. The differing methods for implementing such classification procedures were

empirically discussed using variables suggested in the works of Mead and Durkheim, Young and Moreno, MacCannell, Merton, and Raphael. Using a rather subjective ranking of state procedures, statistical analysis showed that the variable differentiation and education work together to explain 45.4 percent of the variance in state rankings. This suggests that there are certain macro-level and aggregate conditions which influence the types of reception procedures employed by an individual state.¹ This was, of course, what was anticipated by Mead and Durkheim when they discussed the changes taking place as a society develops.

An interesting aspect of those states rated higher on reception procedures was the existence of Reception-Diagnostic Centers which are the newest type of classification system. Because of this, an analysis of the history and procedures of the Centers was undertaken in order to provide information on the actual state of the field in this most recent area of Corrections.

Several things seem to be implied from this descriptive study. For the field of Sociology as a whole, additional credence has been given the work of MacCannell (1968) since differentiation was found to be a very

¹Professors Neal Flora and Leon Rappaport have suggested to me that the ability of a state to provide facilities such as Reception-Diagnostic Centers, may be influenced also by the money available in that state. To test this, a separate correlation matrix was run which indicated that a state's per capita income correlated at the .001 level with the Fox Ranking, with educational level, and with fluidity. It did not correlate significantly with either differentiation or migration. Three things are implied here: 1) differentiation continues to show its importance as a single variable; 2) per capita income appears to affect a state's reception process; and 3) education may be more of an index of income than of enlightenment. Therefore, additional research in this area, or when using these variables, should certainly consider the role of per capita income in a state.

significant variable throughout the statistical analysis. This might suggest that other state institutions can be studied in the same manner using a minimal number of variables. In the more confined area of Corrections, several things can be noted. As state correctional facilities are planned, and reorganized, a greater number seem to be moving in the direction of emphasizing the initial classification phase. Of particular interest across the nation is the new system termed Reception-Diagnostic Centers. As the field of Corrections is presently in a transitional period, means must be found to combine the seemingly uncombinable areas of treatment and punishment. The Reception-Diagnostic Center may provide the most realistic answer to this admittedly difficult situation.

A recent American Broadcasting Company telecast (1972) points out that there is a growing movement to abolish all state penitentiaries and instead provide community level treatment for offenders. Even advocates of this approach realize that some offenders (usually suggested as being around 10 percent of the prison population) must be confined for the protection of society. The role of the Reception-Diagnostic Center in such a situation need not be abandoned, however, but instead should be modified to include community centers and such in the list of possible locations to which the offender may be transferred after classification. The Reception-Diagnostic Center, then, can be seen as having growing importance for the present situation of trying to combine treatment and punishment, as well as having potential for aiding in the process of implementing community level treatment.

There are many areas in which additional research is badly needed. The newness of the Reception-Diagnostic Center, and the lack of time

available to correctional personnel offers partial excuse for the lack of study in this area. If the Reception-Diagnostic Center is to play a significant part in the future of Corrections, however, more sophisticated research is undoubtedly needed in such areas as staffing, orientation, format of the Classification Summary, and diagnosis to name only a few. The advantages and disadvantages of the traditional Classification Committee as well as the new Team Approach must also be continually updated and made available to as many correctional personnel as possible. Possibly of greater importance is the need for more research along the line of follow-up studies which consider the extent of application of recommendations. The Michigan study discussed here is a start but can be no more than that. It is actually in this type of research that one can be most empirical and should therefore be taken up either by interested students or research units of the state correctional system.

The work necessary in this area is indeed endless but of great importance. Hopefully, the present study has provided some insight into the way things are at the present time in the various states so that a process of sharing information can be started which will enable correctional personnel to discover just what has been and is being accomplished in the area of Reception-Diagnostic Centers.

ACKNOWLEDGEMENT

The author would like to express his appreciation to his major professor, Dr. Alfred C. Schnur, for his continual assistance throughout the development of this study. The great interest and encouragement expressed by Dr. Cornelia B. Flora also served to give the author direction and insight. Additionally, this research would have been impossible were it not for the outstanding cooperation of the many Correctional Administrators, staff personnel, and the four professors, all of whom were kind enough to take the time to respond to my letters.

APPENDICES

APPENDIX A

Items for a Guttman Scale to Index the Fluidity of the Social
Structure of the Forty-eight States*

-
1. No discrimination in the Civil Service.
 2. No discrimination in Public Housing and Veterans Administration
 3. No discrimination in National Guard.
 4. No discrimination in city-zoning.
 5. No discrimination in Public Works, and/or Fair Employment Practices.
 6. No discrimination in "Public-places," hotels and travel facilities.
 7. No school segregation in 1948 or 1954.
 8. No slave-state in 1860.
 9. No Jim-Crow laws in railways.
 10. No Jim-Crow laws in street cars.
 11. No white-primary part.
 12. No white-primary total.
 13. No vote for Democrats in both 1924 and 1928 elections.
 14. No vote for Thurmond in 1948.
-

*Constructed from a table sent by Ruth C. Young (1971).

APPENDIX B

State's Position on the Institutionalization
of Segregation and Discrimination^a

State	Score ^b	State	Score ^b
Alabama	0	Mississippi	0
Arizona	9	Missouri	6
Arkansas	1	Montana	9
California	12	Nebraska	9
Colorado	11	Nevada	8
Connecticut	14	New Hampshire	8
Delaware	5	New Jersey	13
Florida	2	New Mexico	10
Georgia	1	New York	14
Idaho	8	North Carolina	3
Illinois	12	North Dakota	8
Indiana	10	Ohio	10
Iowa	10	Oklahoma	5
Kansas	11	Oregon	10
Kentucky	5	Pennsylvania	14
Louisiana	0	Rhode Island	10
Maine	8	South Carolina	0
Maryland	5	South Dakota	8
Massachusetts	14	Tennessee	3
Michigan	11	Texas	3
Minnesota	11	Utah	8

Appendix B (Continued)

State	Score ^b
Vermont	8
Virginia	2
Washington	10
West Virginia	6
Wisconsin	13
Wyoming	8

^aConstructed from a table sent by Ruth Young (1971).

^bScores refer to the number of statements in Appendix A which are true for a particular state. The higher the score the less the discrimination.

APPENDIX C

Items for a Guttman Scale to Index the Structural
Differentiation of Forty-eight States*

1. General Welfare Commission
 B.A. Degree in French or German
 General Agricultural Commission
 Fish and Game Protection
 2. School for the Deaf
 Beef and Dairy Standards
 3. Non-co-educational College
 Separate Mental Hospital
 Economic Development Board
 4. General Health Laboratory
 5. Regional Development Authority
 6. Private, Non-sectarian College
 7. General Conservation Commission
 8. Highway Planning
 9. Labor Statistics Maintained
 10. Health Statistics Maintained
 Flood Control Commission
 Agricultural Weights and Measurers
 11. Air Sanitation Laboratory
 Agricultural Statistics Maintained
 Day Clinics for the Mentally Ill
 12. Industrial Welfare Board
 Water Quality Control
 13. Private Institute of Technology
 Research on Industrial Safety
 Crime Statistics Maintained
 Plant Pathology Laboratory
 14. Air Pollution Research Laboratory
 Narcotics Rehabilitation Program
-

*From MacCannell (1968:70).

APPENDIX D

State's Position on General
Scale of Differentiation^a

State	Score ^b	State	Score ^b
Alabama	10	Mississippi	3
Arizona	2	Missouri	11
Arkansas	2	Montana	3
California	14	Nebraska	8
Colorado	6	Nevada	10
Connecticut	8	New Hampshire	5
Delaware	1	New Jersey	12
Florida	7	New Mexico	5
Georgia	10	New York	12
Idaho	2	North Carolina	4
Illinois	13	North Dakota	4
Indiana	10	Ohio	12
Iowa	8	Oklahoma	2
Kansas	9	Oregon	7
Kentucky	4	Pennsylvania	11
Louisiana	8	Rhode Island	5
Maine	6	South Carolina	9
Maryland	7	South Dakota	4
Massachusetts	10	Tennessee	9
Michigan	7	Texas	11
Minnesota	9	Utah	2

Appendix D (Continued)

State	Score ^b
Vermont	6
Virginia	10
Washington	11
West Virginia	9
Wisconsin	11
Wyoming	2

^aConstructed from MacCannell (1968:117).

^bScores refer to the number of statements in Appendix C which are true for a particular state. The higher the score the more differentiated the state.

APPENDIX E

Rankings of State Reception Procedures
By Four Professors

	Chiles	Glaser	Schnur	Fox
Alabama	4			2
Alaska				2
Arizona				2
Arkansas				1
California	5	4	5	5
Colorado				3
Connecticut				3
Delaware				4
District of Columbia		5	4	4
Florida	4		4	5
Georgia	4			2
Hawaii				3
Idaho				2
Illinois		4	5	4
Indiana	3			3
Iowa		4		4
Kansas			2	3
Kentucky			2	2
Louisiana			3	3
Maine			1	3
Maryland				4
Massachusetts			4	5

Appendix E (Continued)

	Chiles	Glaser	Schnur	Fox
Michigan		4	4	5
Minnesota		4	3	5
Mississippi			1	1
Missouri				3
Montana				3
Nebraska				4
Nevada				2
New Hampshire				4
New Jersey	4	4		5
New Mexico				3
New York	4	2	3	5
North Carolina				3
North Dakota				2
Ohio			2	4
Oklahoma				2
Oregon	3	4	5	5
Pennsylvania	4	4	5	4
Rhode Island				4
South Carolina				3
South Dakota				2
Tennessee			3-4	4
Texas	4			4
Utah				3
Vermont			3	3

Appendix E (Continued)

	Chiles	Glaser	Schnur	Fox
Virginia			3	3
Washington	5	4	3	5
West Virginia				4
Wisconsin		5	5	5
Wyoming				3

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RECEPTION-DIAGNOSTIC CENTERS IN THE
UNITED STATES: A STATE OF THE FIELD STUDY

by

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B.S., Nebraska Wesleyan University, 1969

AN ABSTRACT OF A MASTER'S THESIS

submitted in partial fulfillment of the

requirements for the degree

MASTER OF ARTS

Department of Sociology and Anthropology

KANSAS STATE UNIVERSITY
Manhattan, Kansas

1972

This is a descriptive study in the general area of penal reform, with particular attention being paid to classification which is seen as the essential ingredient in the treatment reaction to crime.

A discussion of philosophies of punishment suggests that certain variables exist which may serve to explain why the various states often differ in the process used to receive and classify offenders into their correctional system. A Stepwise Multiple Regression analysis of the variables suggests that differentiation and education play a significant part in influencing the reception method used in a particular state. Noting that those states which were considered to have the better reception system (and therefore had greater differentiation and a higher educational level) also were more likely to have Reception-Diagnostic Centers, the remainder of the paper discusses the history of such centers and the various procedures now being used in some of the states which have adopted this type of classification system.