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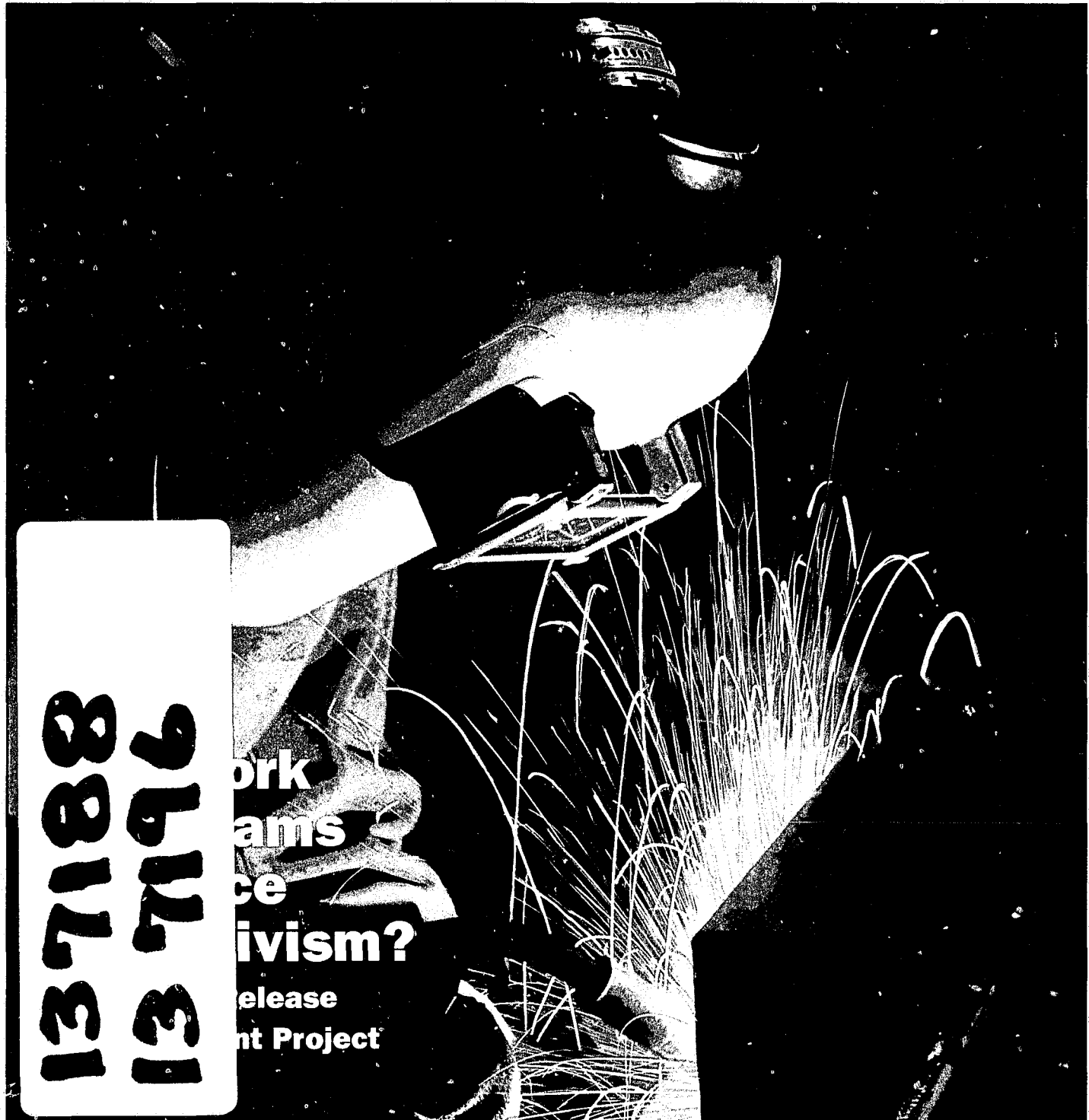


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Functional Unit Management

An unsung achievement

Hans Toch

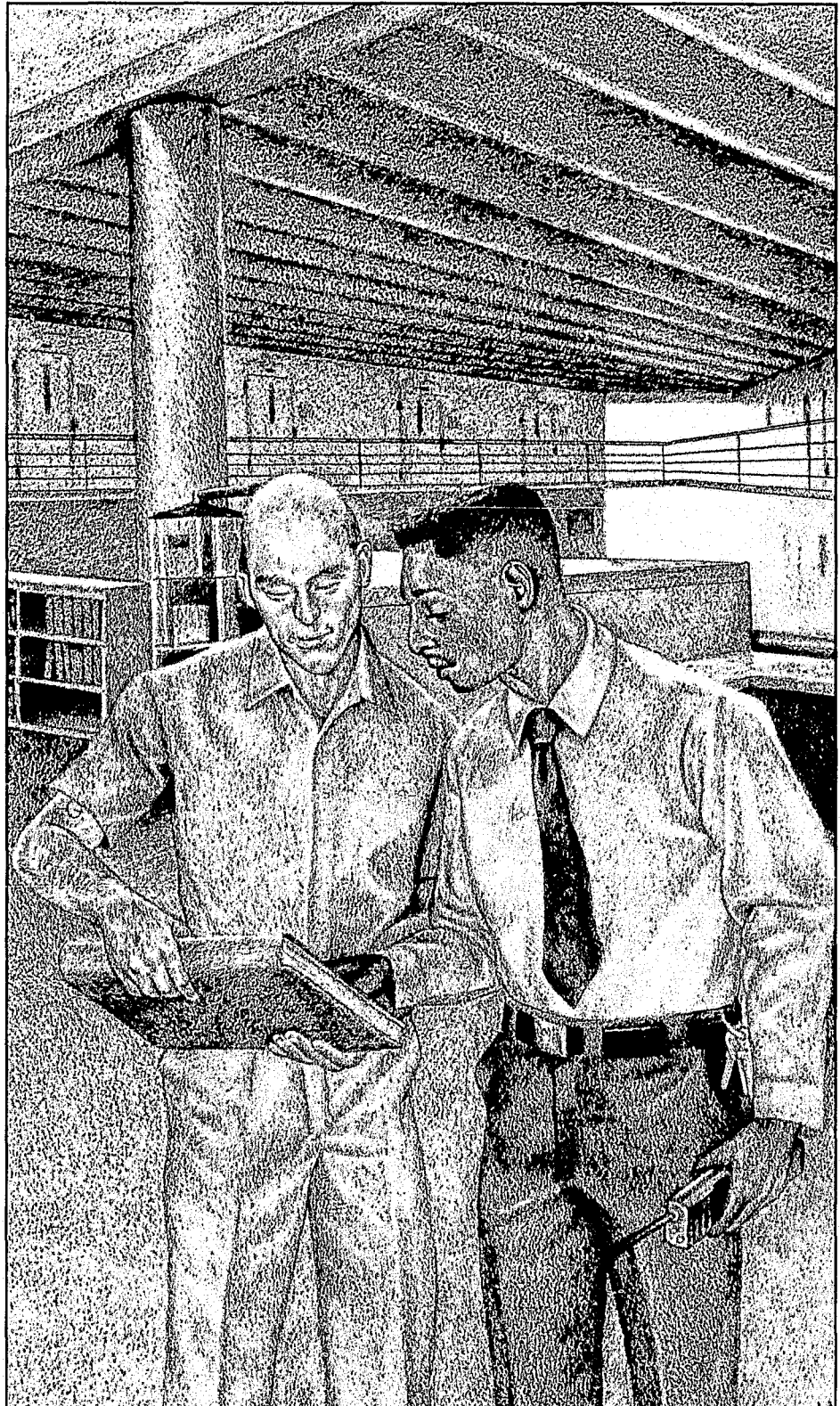
A recent issue of this journal contains a list of "BOP Firsts and Mosts."* It is an impressive list, but there is one entry that I miss—there is no mention of the introduction of unit management and of its dissemination through the Federal system in the mid-1970's. This development was unquestionably a "first." And it is an ongoing development: we have just begun to explore what units can achieve, and what we can do with them.

The idea of functional units was simple: take a prison and divide it into smaller groups of inmates and staff members. Each group of inmates (50-100 in 1970) would have its own staff team. The inmates would stay with their units and would be individually programmed. Each unit would become a specialized "mini-prison" within a larger prison and share the institution's facilities with other units.

The arrangement is analogous to neighborhoods in a city. Each neighborhood can be intimate, but is part of and has access to the amenities of the city. Each neighborhood receives municipal services, but has its own cultural flavor, which is different from those of other neighborhoods. Another analogy—which emphasizes programming—is between a prison and General Motors, which has disparate assembly areas for different cars, and "can continue production of Cadillacs even when the Chevy assembly line has run into some snags."¹

Robert Levinson, a pioneer in conceptualizing unit management, created an imaginary automotive empire as another example:

*See *Federal Prisons Journal*, Vol. 1., No. 4, Summer 1990.



Anthony Woolridge

So FL [Flivvers Limited] establishes several subsidiaries, one for each model—Bearers, Seattles, and Tallyhoes. In this way some of the expensive effectuation equipment can be shared while workers specialize and develop expertise in producing exemplary automobiles of each type. Moreover, if there is trouble with the brakes on the Bearers, FL can still go on producing acceptable Seattles and Tallyhoes.²

The flexibility of Levinson's assembly lines does not spell anarchy: Flivvers Limited decides whether market trends favor small cars (Tallyhoes) or limousines (Bearers). It sets policies that affect what its assembly lines do. Levinson and Roy Gerard write that "one of the dangers in a decentralized facility is that the Functional Units may become totally 'out of step' with one another, so that the institution appears to be headed in all directions at the same time."³ It follows that there must be ways of coordinating what the units do. As an example, "the Unit Program Plans can become part of a total Master Program Plan for the entire facility."⁴

On the other hand, units need some autonomy so that they can run programs that meet the unique needs of inmates and use the special skills of staff who design and run these programs. Autonomy also lets units develop their own cultures and identities. But the unit still functions as part of the whole prison. A few programs have lost sight of this, and ultimately have been abolished.⁵



What can units do best?

Levinson and Gerard distinguished between three functions of units. One is *correction*, the concern with helpful and constructive experiences that are shaped by staff who are closest to the inmate. The second is *care*, which means efficient use of relevant resources to assist the inmates in doing time. The third use is *control*, which means keeping and monitoring inmates as they remain in the unit, so that staff can work with them.

I have listed three functions, though some would say that only two (care and control) are still alive, and that the third (correction) is dead. A discontinuance of correction, however, is hard to envisage. It would mean that inmate programming could no longer be of concern to staff in units, and that an inmate would receive neither sympathy nor assistance with efforts at self-improvement from staff

members who know him. It is true that different functions may be emphasized over time, and from unit to unit. However, care and control and correction are inextricable aspects of functional inmate management, which is the task of unit staff.

One fact is critical for all three functions: the fostering of staff-inmate relationships that benefit from a shared environment and closer acquaintanceship. The foundation for this notion had been laid 15 years before the advent of unit management in a study of the Bureau of Prisons run under Ford Foundation sponsorship. The director of the study, Dan Glaser, had complained that

...by randomizing his caseload through the last number assignment system, the caseworker in a large prison inadvertently reduces his chances of knowing the social environment in which his clients live. By scattering his caseload throughout the prison population, the caseworker minimizes the probability of his also knowing the cellmates or dormitory colleagues, coworkers, recreational partners, or other close inmate friends or associates of any specific client.... Also, when the caseload is scattered, it clearly becomes more difficult for the caseworker to see his client's customary behavior in the institution.⁶

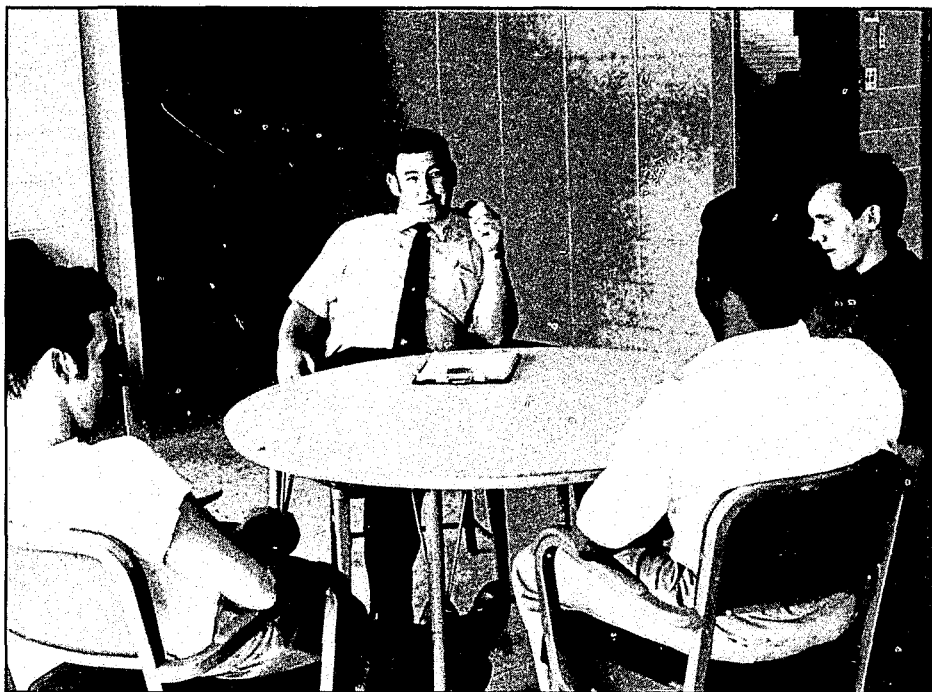
In Glaser's reports to the Bureau of Prisons, he suggested attaching caseworkers to tiers or work assignments, in which each caseworker could get to know inmates in their natural environment, observing the pressures to which they were subjected and their capacity to cope with them. Glaser also talked of

staff teaming and of "facilitating communication across traditional intra-staff lines."⁷

Among innovations he reviewed, for example, were "treatment teams" at the Federal Correctional Institution, El Reno, Oklahoma, that included custody officers assigned to dormitories to observe inmate behavior. Such experiments of the early 1960's anticipated current concerns about job enrichment for correctional officers.⁸ With respect to El Reno, Glaser reported that "before long the line custodial staff seemed unanimous in considering the new system 'the best thing that ever happened' in the prison. They feel it gives them a chance to be heard, and it raises their prestige with the inmates."⁹

Another long-standing question was how to deal with antistaff norms of "inmate subcultures" in custodial prisons. Glaser speculated that "inmate pressure on other inmates to avoid communication with officers varies directly with the extent to which there is an impersonal and authoritarian orientation of staff to inmates."¹⁰ The corollary is that a setting in which inmates and staff can relate to each other would be inhospitable to the advent of an antistaff prisoner culture. Such a setting might do more. Gerard and Levinson have observed that:

Both staff and residents come to feel a sense of pride in "their" unit and its accomplishments. Rather than offenders finding a common cause to organize against staff, competition develops along more desirable lines; e.g., which Unit has the best record in achieving some positive goal.¹¹



Above and right: Unit managers and inmates, Federal Correctional Institution, Morgantown, West Virginia, about 1970.

Functional units call for participation and involvement. Just as correctional officers, teachers, and clerical staff could be involved in teams, inmates could play an active role:

Ways must be found to offer opportunities for Unit residents to take intramural roles of increasing responsibility both for their own activities, as well as for the smooth functioning of the Unit. In the area of decision making, as it relates to a particular individual, he should be viewed as a member of the Unit team and have a voice in program decisions affecting him.¹²

Putting the issue of inmate team membership aside, the point is that staff and inmates would have more control over their environment, and new means to enhance their own development. Self-development is enhanced where the

personal contributions of team members are prized, and routinization is resisted.

Early experiments

Like any invention, unit management is a tool. Units have had to show that they can earn their keep as they are put to use.

In 1970, the Bureau of Prisons had two obvious needs. One was the need to reduce disruption and violence in prison and to protect weaker inmates from exploitation. Units could help because staff could use them to separate predatory prisoners from those susceptible to predation. Such sorting had occurred in the past, but the separating could now be done on a larger scale, based on observations at intake. Disciplinary incident rates could be measured before and after

sorting inmates, to verify the efficacy of the sorting.¹³

The second need was to house substance-abusing offenders who were being committed to the system. The units made it possible to keep these offenders in regular prisons, as opposed to special institutions such as the Public Health Service's "narcotics farms." They also made it possible to experiment with treatment approaches to addiction. Most approaches capitalized on the fact that the offenders lived together as a residential community, which made it easy to use experiences of living and working as grist for treatment, and enabled teams to mobilize constructive peer pressure in resident groups. This combination is a treatment modality, called the therapeutic community.¹⁴ It can be combined with other modalities—such as token economies—or used by itself. This makes definitions difficult, but the Bureau soon had 13 "official" therapeutic communities. Some had "siblings" outside, to which they sent graduates. Others thrived in places such as the Federal Correctional Institutions at Lexington, Kentucky, and Fort Worth, Texas. One community (Asklepieion) ran for 6 years at the U.S. Penitentiary, Marion, Illinois.

Types of units

Therapeutic communities are examples of units that provide *treatment*. Inmates are selected for such units because they have problems such as alcohol or drug addiction that can be ameliorated or remedied.

Other units provide *education, training, or work experiences*, and "an appropriately designed counseling program."¹⁵ The inmates in such units have obvious deficits (marginal literacy, lack of



Living units often field teams for such sports as softball and soccer (here, at the Federal Prison Camp, Alderson, West Virginia).

employment skills, and so forth) that can be addressed by the unit. A third type, which covers most units in the Federal system, is *management-related*.

"Management-related" does not mean that the prison gets what it wants and the inmate loses out. For example, inmates can be sorted by personality type to separate "aggression-prone" from "victim-prone" inmates, which reduces rates of predation. Management obviously benefits through fewer incidents, but the real beneficiaries are the inmates who did not become victims. The same rule applies to other sortings in which prisoners are isolated to avoid trouble or conflict.

One can form groups to facilitate service delivery. A unit composed of elderly inmates, for example, can adjoin medical or pharmaceutical services. Young

inmates can be assigned to teams that have expertise in adolescence (a side benefit is that older inmates get peace and quiet). Other teams can have expertise in problems of long-termers, Cuban detainees, persons diagnosed HIV-positive, or other homogeneous groupings.

But classification and sorting—which means specialization of programs and staff—require time and attention and (as far as possible) uncrowded conditions. Where compromise is necessary, a bifurcated situation arises in which classification and specialization are reserved for high-priority programs, and the remaining units receive prisoners on a first-come, first-served basis. Thus, a few units are specialized and serve treatment, training/vocational, or management functions for special populations. Most units receive representative intake subpopulations, and are programmed in more or less standard fashion. Teams can still introduce program variations (if they have autonomy). But they cannot apply Levinson's model and produce Bearers, Seattles, and Tallyhoes under the auspices of specialized experts.

Patterns of unit management

Unit management survives crises such as extreme crowding by changing the ratio of special to general units in the system. The challenge for management is to create special units that serve the needs of the system and the inmates, given available resources. Today, resources are scarce, but drug-related offenders need specialized drug-treatment units. Other programs could be inspired by intake disproportions involving long-term offenders, violent offenders, emotionally disturbed persons, non-English-speakers, or other groups that could benefit from

special programs. With respect to this issue, managers must ask questions such as:

- How seriously would the inmates be handicapped if they were integrated into the general population?
- What problems would be created for others if these offenders became part of the population?
- Do these offenders require a specialized program, and are staff available who can administer the program?
- Can the program at issue be effective without dealing with the offenders as a group?
- Is there an institution in the system in which the program (say, residential drug treatment) can be set up without playing a wholesale game of musical chairs; i.e., creating serious disturbances in the rest of the system?

Should the answers to these questions favor the creation of a unit, other questions arise having to do with how units are patterned in the system. One model that may appeal involves the creation of institutions that are conglomerates of special units—perhaps different types of units, perhaps of the same kind. Another option places one or two special units in prisons that are otherwise unspecialized. The former model permits the concentration of resources, and the latter allows partial mixing of special and general populations and commonality of custody grading.

Beyond these immediate questions we face long-term questions, involving a future in which special programs can be routinely created, and we can afford to decide whether to move an illiterate drug addict from a therapeutic community to a remedial education unit, or vice versa.



Many inmate programs are unit-based. Here, volunteer inmates in the Bluegrass Unit, Federal Medical Center, Lexington, Kentucky, make toys and educational materials for the handicapped.

When that time comes I shall plan to write a sequel to this essay. ■

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