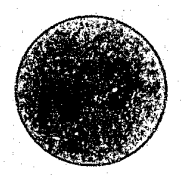


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The Kids Nobody Wants:

Treating the Seriously Delinquent Youth

Evan McKenzie, M.A., J.D.
and
Robert A. Roos, J.D., D.S.W.
Delta Institute

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Treating the Seriously Delinquent Youth

U.S. Department of Justice
National Institute of Justice

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Delta Institute is a California non-profit corporation engaged in research, training, and evaluation in the social sciences, with an emphasis on the juvenile justice system. It is located at 3401 Katella, Suite 211, Los Alamos, California, 90720.

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Introduction

This volume is a collection of writings prepared by Delta Institute on the subject of the serious juvenile delinquent. It is intended primarily for juvenile court judges, with a view to helping them make the extremely difficult decisions they must make on a daily basis regarding the lives of juveniles who have committed serious crimes, often repeatedly. It is also intended to be of use to probation officers, prosecutors, defense attorneys, social workers, and others who participate in the juvenile justice system. Researchers may find it of some value as well.

Our intent is to give an overview of the philosophical, legal, and professional problems presented by trying to treat this sort of offender. Each chapter deals with a different aspect of the situation.

Chapter One, "The Mentally Ill Juvenile Offender: Crisis for Law and Society," by Robert A. Roos and Terri Ellison, was originally published in 1976 (*Juvenile Justice*, February 1976, Vol. 27, No. 1, pp. 25-32). It reviews the problems confronted by the juvenile justice system in obtaining jurisdiction and treatment for mentally ill juveniles involved in serious bodily injury or death. Despite some changes in the law since the date of original publication, the issues raised by the article, and the recommendations made, are still important.

Chapter Two, "The Mentally-Disordered Juvenile Offender: An Inquiry into the Treatment of The Kids Nobody Wants," by Evan McKenzie and Robert A. Roos, was originally published in 1979 (*Juvenile and Family Court Journal*, November 1979, Vol. 30, No. 4, pp. 47-58). This article examines the attitudes of institutional administrators toward mentally-disordered and violent wards of the court, with a view to understanding why they often do not receive treatment, despite the best efforts of juvenile court judges to see that they do. All program information was current as of the original publication date, and readers desiring more recent information are encouraged to contact the programs. The material presented is intended to inform the reader as to the issues in treating these offenders, rather than to be definitive in describing the programs. The issues are undoubtedly very much with us today.

Chapter Three, "Treating the Kids Nobody Wants: A Survey of Innovative Treatment Programs for Seriously Delinquent Youth," by Evan McKenzie, was presented in 1981 to the San Diego County Bar Foundation. It is the result of extensive field research, in the form of on-site visits, into numerous treatment programs for serious juvenile offenders, with the intent of finding safe, effective and innovative alternatives to incarceration for youths com-

mitted by the San Diego County Juvenile Court. It is a work of applied social science, and is offered verbatim because, again, the issues it raises, and the methodology used, are relevant to the many other jurisdictions faced with San Diego's situation as it then existed: too few alternative placements for juvenile offenders in which the court could have confidence.

Chapter Four, "International Variations in the Treatment of Serious Juvenile Delinquency," by Evan McKenzie and Robert A. Roos, has never been published previously. It is the result of a three-year survey of international experts on juvenile delinquency, in which 48 experts representing 37 countries describe and evaluate procedures, practices, and philosophies concerning the treatment of serious delinquents in their native lands. The Americas, Western and Eastern Europe, Africa, the Middle East, Asia, and Australia and New Zealand are represented in the responses.

The authors hoped that this volume will serve to sensitize the reader to the troubling issues presented by this area of the law, to stimulate interest, and to offer hope and encouragement to the courageous individuals who must wrestle with the awesome responsibilities of juvenile court.

CHAPTER I

The Mentally Ill Juvenile Offender: Crisis for Law and Society

By ROBERT A. ROOS and TERRI ELLISON

This article reviews the problems confronted by the juvenile justice system in obtaining jurisdiction and treatment for mentally ill juveniles involved in violent criminal behavior resulting in serious bodily injury or death. Mental illness may be associated with the continuing violent propensities of some juveniles, whether it meets the test of legal insanity or not. While the number of such persons in relation to the total juvenile court population may be relatively small, the present resources and legal procedures relating to such juveniles are inadequate to deal with the problems.

Various weaknesses exist in current legal procedures which seriously impede the courts from obtaining jurisdiction over such youths and ordering appropriate placement for treatment and custody. Furthermore, even when jurisdiction is obtained, the courts are hampered by the lack of sufficient facilities for treatment. As a result, these youths are all too often back on the street without appropriate treatment or incarceration, despite the fact that they still may pose a continuing threat to the community.

The authors have tried to bring together in this article some of the issues which are inextricably involved in finding solutions to these problems. As there is little relevant published information in this area, much of the authors' material is based on interviews with the staff of the Juvenile Court, the Department of Public Social Services, and the Probation Department of the County of Los Angeles.

METHODS OF OBTAINING JURISDICTION OVER OFFENDERS

Comparison to Adult Procedures

The procedure in adult court for proffering the insanity defense is set forth in Section 1026 of the California Penal Code. This section provides for a specific plea and separate trial on the issue of "not guilty by reason of insanity." If the accused enters two pleas, "not guilty" and "not guilty by reason of insanity," he is first tried by the court or jury on the general issue of guilt or innocence.

If the defendant is found guilty at this phase, his legal sanity is tried. If the

defendant is found sane, then the matter is set down for the probation and sentence hearing. If he is found legally insane at the time of the commission, Section 1026a of the Penal Code provides that the defendant be confined to a hospital for the criminally insane unless or until it appears that he has recovered his sanity, as determined by the committing court. He may thereafter apply for release on the ground that his sanity has been restored, but bears the burden of proving his recovery by a preponderance of the evidence.¹

If an adult defendant is insane at the time of trial so that he cannot understand the nature and purpose of the proceedings nor assist his attorney in the defense, he may not be tried.² The issue is determined by a trial in the nature of a civil proceeding and by a preponderance of the evidence, with the defendant having a right to a jury, pursuant to Sections 1368 and 1369 of the Penal Code. If the defendant is found presently insane, he is committed to a state hospital for the criminally insane, that is, Atascadero.³

The criminal proceedings remain suspended until such time as the defendant becomes able to understand the nature of the proceedings against him and assist in his defense, pursuant to Sections 1370, 1371, and 1372 of the Penal Code. However, due process prevents the indefinite incarceration of a person on the sole ground of his incapacity to proceed to trial. If there is no substantial likelihood of his recovering that capacity in the foreseeable future, alternative commitment procedures, such as the provisions of the Lanterman-Petris-Short Act must be used.⁴

Insanity Defense in Juvenile Court

The jurisdiction of the juvenile court in California with respect to juveniles who have violated criminal laws rests primarily under Section 602 of the Welfare and Institutions Code, which provides:

Any person who is under the age of 18 years when he violates any law of this state or of the United States or any ordinance of any city or county of this state defining crime . . . is within the jurisdiction of the juvenile court, which may adjudge such person to be a ward of the court.⁵

Procedures necessary to sustain a 602 petition require that the juvenile be given all the essential elements of due process and fundamental fairness required by federal and state constitutions.⁶ Until the *In re Gault* decision,⁷ in which the United States Supreme Court first applied due process guarantees through the Fourteenth Amendment to state juvenile proceedings, the issue of the right to an insanity defense was almost consistently ignored throughout the country.⁸

However, in the *In re M.G.S.* decision,⁹ the California Appellate Court held that in a Section 602 proceeding, a juvenile is entitled as a matter of due process to show that at the time of the act he lacked the capacity to commit a crime under Penal Code Section 26, subdivision 3, because he was insane. If the minor was insane at the time of the act, the court is deprived of jurisdiction to proceed under Section 602.¹⁰

Of course, youths whose mental or emotional problems do not constitute

legal insanity may still be subject to jurisdiction under Section 602. If the court is ousted of jurisdiction under Section 602, it may be possible for the court to sustain petitions under Sections 300, 601, or the conservatorship provisions of the L-P-S Act.

Section 300

It is suggested in the *In re M.G.S.* and *In re Gladys R.* decisions,¹¹ that in the absence of jurisdiction over a mentally ill minor under Section 602, proceedings can be instituted under Section 300, which provides for juvenile court jurisdiction over a minor:

(a) Who is in need of proper and effective parental care or control and has no parent or guardian, or has no parent or guardian willing to exercise or capable of exercising such care or control, or has no parent or guardian exercising such care or control. . . . (c) Who is physically dangerous to the public because of a mental or physical deficiency, disorder or abnormality. . . .

Section 300(a) is sometimes used in lieu of Section 300(c), even though the youth may be considered dangerous and suffering from a mental illness. If the court and counsel feel that the youth's criminal acts are primarily the result of parental neglect or influence, and the removal of the child from the home would be sufficient to curtail his criminal activities, jurisdiction under 300(a) would give the court power to place the child in a more suitable setting. However, Section 300(c) is the principal statute used for juveniles who are believed to be a danger to the public because of mental illness.

One problem in abandoning a Section 302 proceeding in favor of a Section 300 proceeding is the required shift in the agency seeking to have a petition against the juvenile sustained. The probation department, with the advice and cooperation of the district attorney's office, is responsible for Section 602 petitions, while the Department of Public Social Services is the petitioner under Section 300. This conflict expresses itself in part by the shift in the role of the district attorney. In a Section 602 hearing the district attorney represents the state's interest in prosecuting a criminal act. However, in a Section 300 proceeding, the district attorney represents the interests of the juvenile against the parent or guardian who has allegedly failed to provide appropriate care and support.

These two code sections have different purposes. This difference is accentuated when the juvenile in question has committed a violent act and is mentally ill. Further, the Department of Public Social Services is not designed to provide supervision and custody for such violent and dangerous offenders.

As a result of these complexities and lack of appropriate statutes and procedures, some juveniles are provided inappropriate treatment or released to the community without treatment. If a Section 300 petition is sustained, the Department of Public Social Services is responsible for placing the youth in a suitable setting. Placements are limited to private homes, institutions, or agencies and may not include a probation camp or the California Youth Authority.¹² Jurisdiction under Section 300 does not provide the court with

the power to place a dangerous youth in a custody or involuntary psychiatric program unless the L-P-S procedure is followed. It is clear that the types of placements which can be made for 300 cases are more limited than for wards under Section 602. In addition, Section 300 jurisdiction ends automatically at age eighteen.

In the past, the juvenile court sometimes attempted to accomplish placement in state mental hospitals by having the probation department seek "suitable placement" under Section 300, which provides in part: "In the case of a minor person, the application shall be made by his parents, or by the parent, guardian, or other person entitled to his custody."¹³

The state hospitals have in the past interpreted this section to mean that the probation officer or social worker was the person entitled to a minor's custody, and therefore such officer or worker could sign the minor into the hospital. However, the general policy of the Department of Public Social Services has been that the L-P-S Act provided the only means of securing involuntary commitments to hospitals. This was in contrast to the policy of the probation department which allowed their officers to make suitable placements of 601 and 602 wards in mental hospitals. A special juvenile court hospital screening committee was established approximately one year ago to assure that all placements would be consistent with state mental hospital criteria. Since the establishment of this committee, juveniles in all three categories, 300, 601, and 602, have been placed in mental hospitals pursuant to Section 300.

The practice of using an order for suitable placement to avoid the L-P-S procedures was disapproved in the *In re Michael E.* decision, in which the California Supreme Court held:

The actual commitment [*sic*] of a minor ward of a juvenile court to a state hospital can be lawfully accomplished only through the appointment of a conservator who is vested with authority to place the minor in such a hospital. (LPS Act, ch. 3, §§ 5350-5370.) Such conservator may be appointed only for a "gravely disabled" minor who is entitled to a jury trial on the issue whether he is in fact "gravely disabled". . . . Conservatorships automatically terminate at the end of one year (§§ 5361, 5362), and every six months a conservatee may petition for a rehearing as to his status (§5364). Finally, the entertainment of a petition for conservatorship is a function of the superior and not the juvenile court.¹⁴

Short term evaluation or treatment can be accomplished under Sections 6550 and 6551, if a juvenile court is in doubt concerning the state of mental health or the mental condition of a ward. Such treatment and evaluation procedures are nevertheless expressly required to be conducted consistent with the provisions of the L-P-S Act.¹⁵

Commitment in a Section 300 case will, under the *Michael E.* decision, apparently require referral to Department 95 (Mental Health Department of the Superior Court in Los Angeles County) for conservatorship proceedings which conform to the requirements of the L-P-S Act, which is discussed below.

Section 601

Section 601 deals with juveniles who are thought to be incorrigible because they will not obey the lawful and reasonable orders of their parents or guardians. Such petitions are no longer being used to obtain jurisdiction over mentally ill youths for two major reasons: (1) the definition and meaning of incorrigibility is vague and (2) the placements available under the section are now extremely limited.

The California Youth Authority is no longer available because its administrators have indicated that they would reject any youths who have not had a 602 petition sustained against them. Further, the county probation camps are not generally available, because of a relatively recent policy change indicating that Section 601 wards should not be sent to county camps except under the most compelling circumstances. Other types of placements for Section 601 wards are set forth in Section 727.

Conservatorship Proceedings Under L-P-S Act

The *Michael E.* decision requires the appointment of a conservator for long-term commitments. Department 95 of the Superior Court is responsible for processing all conservatorship petitions in this county. Before the *Michael E.* decision, the juvenile court has referred approximately five cases a year to Department 95.

There were apparently many problems in handling such referrals, which included transferring jurisdiction and custody. Once the petition was sustained, problems arose with the placement of the conservatee and follow-up services. The Department of the Public Guardian had the responsibility for supervising the wards, but did not have the staff to effectively carry out this responsibility. Although the conservator had the power to place the youth in a state mental hospital, often there were long waiting lists for such placements, and there continued to be a lack of other appropriate facilities for alternative placements. In addition, a new petition had to be sought each year in order for the court to retain jurisdiction, with the conservatee having the right to a jury trial at each such proceeding.

Because of the above problems, the Los Angeles County Superior Court issued a policy statement dated April 19, 1974, which declared:

It shall be the policy of the Juvenile Court to retain control over all cases involving minors who are unable to stand trial, or are mentally ill or mentally retarded. Cases shall not be transferred to Department 95 for proceedings under the Lanterman-Petris-Short Act.

As a result of the *Michael E.* decision, it is likely that the Los Angeles County Superior Court will have to reverse the policy stated above and again refer certain juveniles to Department 95 for conservatorship proceedings.

Because of the inefficiencies in the referral process, there is a possibility that juvenile court judges may rely on commitments of Section 602 minors to the California Youth Authority. Section 300 youths may be released to the community if appropriate facilities are not available, or be sent to settings

where they do not get adequate treatment and where they present a threat to the safety of other juveniles, the staff, and to the community.

TYPES OF FACILITIES FOR PLACEMENT OF MENTALLY ILL JUVENILES

In dealing with mentally ill juvenile offenders, solving the problems of jurisdiction is only the first step in arriving at an appropriate treatment program. The lack of appropriate facilities is a crucial problem, and one that to some degree makes more complex the decisions in the adjudicatory and dispositional process.

California Youth Authority

Wards of the juvenile court under Section 602 who are eight years of age or older and have no infectious diseases, and youths sentenced in the adult courts who are under 21 years old at the time of arrest, can be sent to the California Youth Authority.¹⁶ Commitments are further limited by Sections 1731.5, 1732.7, 1736 and 736. The Youth Authority may reject severely mentally ill or retarded wards, or may send them to Atascadero pursuant to Section 1756.

Despite these limitations, it is the general policy of the Youth Authority to accept practically all youths committed from the juvenile court under Section 602.¹⁷ The reason is simple: There is a need to incarcerate some of these juveniles, as they represent a threat to the community, and the Youth Authority is often the only resource available.¹⁸ This is especially true for the smaller counties in California.

As a result, the Youth Authority has a more difficult, more delinquent-oriented, more emotionally disturbed population than found in other types of juvenile institutions.¹⁹ At the present time, it is acknowledged by the Youth Authority that the most serious gap at both state and county levels is the lack of services required for emotionally disturbed juveniles or chronic drug users (such drug users are considered by the Authority to closely resemble the emotionally disturbed youths, and to pose the same types of problems). As a result of the lack of alternative placement resources, and the scarcity of treatment programs within the Youth Authority, some juveniles may be accepted into the Authority merely to provide the custody necessary for the protection of the community.

To help solve the problem of providing treatment for mentally disturbed juveniles in its custody, the Youth Authority has contracted with the Los Angeles County Department of Mental Health and has established a new program consisting of forty beds at its Southern Reception Center at Norwalk, California. Because Los Angeles County is funding this program, only those juveniles committed to the Youth Authority from Los Angeles County are eligible. Under this program, which began in October, 1973, these juveniles are detained in a special custody setting and are receiving special psychiatric services. Because this facility is relatively new, its success rate has not yet been determined. However, such a program appears to be a step in the right direction.

State Mental Hospitals

As noted above, the state mental hospitals serve as a limited resource for some emotionally disturbed juveniles. For instance, Camarillo State Hospital is the only mental hospital to provide a specialized facility for juvenile offenders for the entire Southern California area (Ward 5B with forty beds). Placements in the program had been primarily made pursuant to Section 300, rather than under the procedures of the L-P-S Act. It presently appears that the program may be continued, but juveniles received prior to the *Michael E.* decision may be sent back to the courts for disposition consistent with the L-P-S Act.

The Camarillo program has been designed for relatively short-term intensive counselling and treatment. After this period, the juvenile is released and, in theory, local community services on an outpatient basis are provided where indicated. However, appropriate follow-up services often do not exist. The youth may therefore be returned to the home which may have helped produce his problems, or may be placed by the Department of Public Social Services in a foster home or community facility which has little or no psychiatric services available to it. If the juvenile is a 602 ward he may be placed in a county probation camp, but such camps lack the type of intensive psychiatric services that a seriously disturbed juvenile might require. Alternatively, the 602 ward may be sent to the Youth Authority.

Another problem with state hospital treatment programs is that such hospitals are not strict custody settings. The escape rate of juvenile wards from Camarillo is reported to be as high as fifty percent. Juvenile offenders who are violent and dangerous are often rejected as unmanageable by the hospitals, though by definition they may need treatment the most. The Camarillo program may exclude youths described as homicidal.

Atascadero is the only state hospital which has custody facilities, because it is the hospital for commitments of the criminally insane. It has recently begun a treatment program for juveniles referred from the Youth Authority, pursuant to Section 1756 and 1756.5.

Community Residential Psychiatric Facilities

Residential psychiatric community facilities for juveniles are extremely limited. Of the few such facilities that do exist, placement is rare if the child is dangerous to the community, or if placement is to be paid for by public funds from the probation department or the Department of Public Social Services.

Specialists in the area of placement of dangerous youths state that there is a chronic need for facilities similar to that of the Ingleside Psychiatric Hospital, located in Rosemead, California. This is a private hospital specializing in the treatment of extremely disturbed, dangerous, and even homicidal adolescents. It has a complete range of residential facilities, including a school, crafts, exercise equipment and grounds, as well as a security system which makes the hospital safe for the community. This facility allocates eight beds to Los Angeles County for treatment of mentally ill juveniles. The county is

charged nearly \$1,000 less per month than private patients, who pay approximately \$2,850 per month. Even the eight beds may be eliminated as the facility has been losing too much money because of the reduced rates.

The University of California Neuro-Psychiatric Institute in Westwood is reported to be an excellent treatment resource for the more bizarre and unique cases, but because of a lack of security facilities, it does not accept homicidal or extremely dangerous cases. A maximum of approximately sixteen county placements can be accepted.

Gateways Hospital in Los Angeles has a special program for juveniles and will accept special cases on a long-term basis. However, this excellent residential program does not accept homicidal or extremely dangerous youths.

Because of the lack of closed psychiatric settings, disturbed and aggressive and even homicidal juveniles sometimes are sent to such private placements as the Boys Republic. This is a large, privately sponsored, open, ranch-type setting. It has limited psychiatric resources and no security facilities.

The provision of long-term residential programs, with a trained psychiatric staff and security facilities, is believed by many to be one of the most urgent needs of the juvenile justice system.

Out-Patient Psychiatric Services

There is also a severe lack of out-patient psychiatric services specializing in the treatment of adolescents. A few private facilities with group treatment are available. For instance, the Centinella Valley Hospital does have a youth group, but there is a long waiting list. While there are a number of private agencies which may also have programs, the county ward or dependent child usually will not have the money or other means of finding and attending such services.

RECOMMENDATIONS

As a beginning point, adequate statistics should be collected regarding the problems discussed in this paper. At the present time, statistics are not being regularly and systematically collected by the various components of the juvenile justice system that deal with mentally ill juveniles involved in violent behavior. In addition, there needs to be a comprehensive survey as to the availability of facilities into which these juveniles in need of intensive psychiatric services can be placed.

The statutes dealing with disturbed juveniles who have engaged in criminal behavior should be analyzed by the state legislature. Many changes are needed. While codes and procedures used in adult courts for handling mentally ill offenders are far from perfect, we believe that they are more rational and effective than present juvenile procedures. Juvenile procedures would probably be improved if the law were written to provide for a suspension of proceedings in a 602 case when sanity is in doubt and limited treatment

indicated. Perhaps the adult procedure of separate guilt and sanity trials followed by automatic commitment might be in order. The Lanterman-Petris-Short Act was originally designed to deal with civil commitments. Where it is determined that a crime has been committed, and that the accused was insane at the time of the commission of the act, there is a rational basis for automatic commitment for the protection of the community and treatment of the offender.

The above suggested changes need not mean a change in the treatment orientation of juvenile courts. What is needed is a well balanced system. Society needs to be protected from dangerous juveniles, and such juveniles, especially if mentally ill, need effective treatment. The legal and moral obligation to effectively treat these juveniles is suggested in many code sections.²⁰

It is believed by many in the courts, probation department, and the Department of Public Social Services, that current programs of infrequent and sporadic treatment may have very little effect in modifying the behavior of disturbed and dangerous juvenile offenders. In more general terms, the whole gamut of psychiatric services should be substantially expanded and improved. As a part of these services, facilities to provide custody in addition to meaningful treatment should be given top priority.

Los Angeles County, through the Departments of Probation, Public Social Services and Mental Health, might consider providing its own specialized treatment facility for mentally ill juveniles who have been involved in aggressive acts. This would give the county control over the program and eliminate the problems of dealing with other agencies that employ restrictive criteria to reject juveniles most in need of treatment. Perhaps one of the existing juvenile facilities within the county could be redesigned, and specialized wards established for such cases. Rebuilding the probation department's Sylmar facility for such treatment is one alternative that should be seriously considered.

As a result of the *Michael E.* decision, it is now clear that all involuntary commitments for psychiatric treatment from the juvenile court, except those to the Youth Authority, must be fashioned to meet the requirements of the L-P-S Act. In view of this requirement, the superior court should seriously consider establishing a specialized L-P-S or mental health court within the juvenile division. This court could specialize in the involuntary placement of juveniles who have been involved in violent behavior and who are in need of psychiatric treatment. The probation department, rather than the public guardian, should be authorized to supervise these juvenile conservatees when they are not confined to a state hospital.

Unfortunately, the juvenile justice system has often been treated like an unwanted stepchild of the adult court and ignored. It is clear however, that the problems encountered in dealing with mentally ill and dangerous juveniles have far-reaching ramifications to the entire criminal justice community and the society at large. It is hoped that this article will help to shed some light on these problems and encourage efforts to find solutions.

NOTES

¹See *In re Franklin*, 7 Cal.3d 126, 148 (1972).

²Pen. Code §1367; *People v. Markouris*, 52 Cal.2d 672, 678 (1959).

³Pen. Code §§1370, 1372.

⁴See *In re Davis*, 8 Cal.3d 798, 801 (1973). The Lanterman-Petris-Short Act, Welf. & Inst. Code §§5000 *et seq.*, will hereafter be referred to as the L-P-S Act.

⁵Except where otherwise indicated, all statutory references are to the California Welfare and Institutions Code.

⁶*Breed v. Jones*, 95 S.Ct. 1779, 1785-1786 (1975).

⁷387 U.S. 1 (1967).

⁸Popkin and Tippert, "Is There a Constitutional Right To The Insanity Defense in Juvenile Court?" *U. Louisville L. Rev.* 10 (1971): 421.

⁹267 Cal. App. 2nd 329 (1968).

¹⁰*Ibid.*, p. 337.

¹¹1 Cal.3d 855, 865 (1970).

¹²§727.

¹³See *In re LL*, 39 Cal. App. 205, 216 (1974).

¹⁴4 Cal.3d 892, 900 (1975).

¹⁵*Ibid.*, p. 899. The *Michael E.* decision contains a good discussion and explanation of related L-P-S procedures.

¹⁶§§733, 734.

¹⁷E. Kamm, D. Hunt and J. Flemming, *Juvenile Law and Procedure in California*, 233 (1971).

¹⁸*Ibid.*

¹⁹State of California, Human Relations Agency, Board of Corrections, *Coordinated California Corrections* 14, 28 (1971).

²⁰See §§ 727, 730, 734, 736, 740, 741.

CHAPTER II

The Mentally-Disordered Juvenile Offender: An Inquiry Into the Treatment of The Kids Nobody Wants

By EVAN MCKENZIE and ROBERT A. ROOS

Authors' note: This article contains comments by staff members of various institutions. In the interest of research and to avoid embarrassment to those interviewed, the authors have deleted names and identifications where possible.

There are many social problems which, for one reason or another, draw the attention of academic and/or professional disciplines only when some set of circumstances has brought the problem to public attention. When public concern subsides, so, to a large extent, does academic and professional activity. There is reason to believe that the set of legal and social scientific issues presented by the treatment of mentally-disordered juvenile offenders is a problem of this sort.

It came to public attention in 1974 via a series of newspapers articles in the *Los Angeles Times* that juvenile offenders who were considered mentally disordered and had displayed any predilection to violence seemed to be destined, by some unknown set of circumstances, to spend most of their institutionalized time in juvenile hall. That juveniles with such special needs should be confined for long periods in a temporary holding facility when there existed a host of private and public facilities set up to treat juveniles with special needs was peculiar enough. What was even less explicable was how so enlightened a legislature as that of California could, in the words of former Presiding Judge of the Los Angeles County Juvenile Court, William P. Hogoboom, have ". . . devised a rather complicated set of laws on the subject which seem in practice to deny a juvenile offender treatment for his mental disorder." (Hogoboom 1974)

Hogoboom's article is notable for being the first serious attempt to call scholarly and professional attention to this problem, and because it presents a concise analysis of the reasons the problem has arisen. Hogoboom traces the inadequacy of the system with regard to these juveniles to these causes: "(1) The attitudes of institutional administrators, and (2) The confusing state of our statutes and case law on the subject." (Hogoboom 1974)

Other commentators have addressed themselves directly to the latter problem by attempting to discover precisely how these youths manage to "fall between the cracks" of the legal system. Roos and Ellison show that the legal framework within which the juvenile court judge must work is not well-suited to deal with mentally-ill juveniles, and especially those who are violent. The existing procedures "... seriously impede the courts from obtaining jurisdiction over such youths and ordering appropriate placement for treatment and custody." (Roos and Ellison 1976, p. 25) They recommend streamlining juvenile proceedings where mental illness is a factor, and point out that despite their inadequacies, procedures used in adult courts for handling mentally ill offenders are "... more rational and effective than present juvenile procedures." (Roos and Ellison 1976, p. 31) They also detail the judge's dilemma in finding suitable placement for these juveniles once jurisdiction is obtained.

Facilities for these youths are severely limited. State mental hospitals offer only one facility in the Southern California area; this is Camarillo State Hospital, which is designed for short-term intensive counselling and treatment. Residential psychiatric community facilities for juveniles, which could provide the long-term intensive care which is often necessary, are very scarce, and dangerous children are not welcome in such places. Few out-patient psychiatric services specialize in the treatment of adolescents. Consequently, judges are faced with extremely limited treatment options once the legal barriers to acquiring jurisdiction are overcome. (Roos and Ellison 1976, pp. 29-31)

One last alternative — and the one which is used with alarming frequency — is committing the youth to the California Youth Authority, which is the most prison-like set of institutions for juveniles in the state. To help solve this problem a special Intensive Treatment Unit was established at the Southern Reception Center in Norwalk. This unit features a high therapist/inmate ratio as well as a high level of physical security. However, it contains only forty beds, which means that the overwhelming majority of these youths are placed in the general population of the Youth Authority. Some judges use the expedient of housing the juveniles "temporarily" in juvenile hall until suitable placement is found, in order to avoid committing the child to the Youth Authority; however, opportunities for such placement are few and far between.

Hogoboom does not dispute the fact that there is a need for more facilities to which these juveniles could be sent. However, he stresses the special problems created by the aforementioned "attitudes of institutional administrators." One of his two suggested reasons for the ill treatment of the mentally-disordered juvenile (having been explored by Roos and Ellison, it is appropriate to make some initial inquiry into the other. It is the purpose of this paper to begin to examine in greater detail the nature of the attitudes which Hogoboom finds troublesome; to set these attitudes in the larger context of ideological struggles which are a part of the institutional-political atmosphere which has proven so uncongenial to juvenile delinquents with

mental disturbance; and to present some suggestions for ways in which the situation could be improved.

A PROFILE OF THE MENTALLY-DISORDERED JUVENILE OFFENDER

Any attempt to understand the position of program administrators toward these children must begin with a careful description of the children themselves. Until very recently this would have been possible only after an impressionistic fashion. However, in 1975 a team of researchers working for the Los Angeles County Department of Health Services was set to the task of identifying all juvenile court wards of this description within the county (no small task in itself, as they may enter the system through any of fifteen agencies) and developing a profile of these juveniles. This ongoing project led to the dissemination of a preliminary report which provides the best data currently available on this subject. (Cheung and Chen, 1977) The report contains a summary profile which is worthy of being presented in its entirety.

In summary, the typical "mentally disordered" Ward of the Juvenile Court in this study was a Caucasian (50.6%), Male (77%), Protestant (54%), 16 years of age (the mean age was 16.2 years), born in Los Angeles County (59.2%) and with a 10th grade of education (58%; this level of education may not reflect the actual level of scholastic functioning). Most likely this minor came from a large family of four or more members (66.7%) with an average monthly income of \$1000 or less (66.4%) and the primary source of family income was from employment (56.9%).

The minor lived with only one or no natural parent (79%). His parent(s) had a rather chaotic and/or unstable family history, such as marital discord, divorce, separation and birth out of wedlock (65.5%). Evidently, he was deprived of parental affections (66.7%) and had an early experience of being placed out of home (78.7%). He became known to the Probation Department because of his repeated acting-out behavior; including runaway (79.9%), behavioral disturbance (e.g., auto theft, burglary, firesetting, disturbance of peace, petty theft, etc., 68.4%), battery (60.3%), and drug abuse (48.9%). Consequently, he had been detained in Juvenile Hall or Camp for at least once (97.7%) or more (70%), and had been so-declared as Ward of the Juvenile Court under the California Welfare and Institutions Code Juvenile section 601 (60.3%) and 602 (82.2%) at the same time or repeatedly over a short period of time.

By the impression of his probation officers as well as his family members, he was reported to have emotional/psychiatric problems of some sort (79.9%) and had also been hospitalized in psychiatric facilities for at least once (67.8%). (Cheung 1977)

In non-psychiatric terminology, it is the opinion of many persons who have studied this problem that, as a result of a life-time of neglect, these juveniles develop extreme anger at their parents — which anger they transfer to others. They are generally barely capable of forming emotional relationships with anyone, and are given to outbursts of extreme violence in many cases. This violence is often directed at persons as well as property, and is ordinarily not accompanied or followed by feelings of guilt. This stunted emotional makeup has historically hampered rehabilitative and therapeutic efforts. In fact, many

therapists consider these juveniles simply not amenable to therapy in most cases, although this opinion is by no means universally-held. Of special note is that 34.4 percent were diagnosed as having "behavior disorders of childhood or adolescence," and 29.2 percent as having "personality disorders." These classifications often reflect a disposition that the child is not readily susceptible to psychiatric treatment as would be most neurotic and even psychotic patients. As will be seen, institutional employees who have worked with these children hold a picture of them which is very similar to the profile.

It should be noted as well, to set the sample size of 174 in larger perspective, that the number of mentally-disordered juveniles is much larger than often supposed. The California Department of Health commissioned a study of mentally ill persons incarcerated in detention facilities; it was discovered that in a five-county sample of 651 *incarcerated* juveniles, 49.9 percent were evaluated as mentally disordered, with 20.6 percent considered to have non-psychotic mental disorders, and 25.2 percent judged to have personality disorders. (Bolton 1976, p. 5) The large numbers of these juveniles who are receiving no treatment highlights the attitudes of administrators of institutions which could provide such treatment.

INSTITUTIONAL ADMINISTRATION — THE FINE ART OF PROGRAM ENHANCEMENT

Hogoboom feels that "Directors of institutions, whether they be state or county, hospitals or correctional, are fond of telling the Juvenile Court judge that the minor is unacceptable to their program." (Hogoboom 1974) The children are seen as too much in need of therapy to spend years in a prison-like detention facility, and too dangerous to the community and staff to receive treatment in a purely therapy-oriented one. The implication here is that directors are, for reasons which will be discussed below, concerned with producing high success rates for their programs. Disruptive, hard-to-help children spoil the success rate. Should they manage to enter a therapy-oriented facility, and find themselves in trouble, they are soon transferred out.

From numerous interviews, formal and informal, with the administrators of a wide variety of agencies, hospitals, and placement facilities, the following five were selected. While this is neither a random nor a stratified sample, it may be considered a scope sample, which serves to outline the parameters of more systematic survey research which should follow. In the reports of these interviews, the administrator describes his program, and its suitability for juveniles who fit the profile set forth above. They include representatives from the state mental hospital system, private facilities, county facilities, foster homes, and the California Youth Authority. These are the five major options from which the judge must choose.

A STATE MENTAL HOSPITAL

Mr. A is in charge of the hospital's three programs for juveniles. Unit 1 is for the acutely psychotic, extremely disturbed child; treatment methods range

from the use of drugs through traditional psychotherapy to intermediate-level rehabilitative efforts for those preparing to re-enter the community. Unit 2 is exclusively for the "intermediate-level psychotic under control"; these children receive more intensive therapy and go to school in the facility; the behavior disorders here are "more fragile, borderline cases, with maybe some underlying problem." That is, they are perceived as having a disorder which is treatable, but they are not ready for the most intensive therapy. Unit 3 is exclusively for behavior disorders. It combines a behavioral format (using a point system) with "high-confrontation, Synanon-type groups." No medication at all is used. This unit costs the state \$100 per day, per child, and contains in the neighborhood of twenty children. Mr. A felt that his program was successful as a rule, and said that probably only about fifteen of sixty children who leave the program each year are not significantly helped. The rest are discharged as "improved." He doubted whether funding of a program such as this would be available on a larger scale because of the high cost.

He described AWOLs as "a daily occurrence," because there is no perimeter security, and only a small police force. Chronic runaways are referred back to the County Hospital Screening Committee (which makes placement decisions for these youths) with the recommendation that they be transferred to a secure facility. The key factor, Mr. A said, is "the potential for violence." If a child displays this at any time, he or she may be unconditionally and permanently rejected from the hospital.

The authors took special note of the contrast between Mr. A's initial claims, which were congruent with the program's reputation, that in Unit 3 we would find "the kids no one else wants," and his later statement that children are removed for good if they show the potential for violence. These *are* "the kids nobody else wants." This statement was confirmed by our visit to the unit, where we spent nearly an hour talking with four of the children. One had raped an elderly woman, but had never before or since committed a crime; another had a history of physical assault, but had never seriously hurt anyone; one had committed two acts of child molestation. The fourth, a girl, had been involved in a prolonged incestuous relationship with her father, had been declared a ward of the court, and was admitted to the hospital and placed in this unit voluntarily. All of these children were white, as were all but two of the rest. All were very verbal, and obviously accustomed to discussing their feelings. All felt that they would be rejoining society within a year or two. As will be seen, these were by no means "the kids nobody wants." They were the kids all of the program administrators like to admit because they are amenable to treatment and not given to outbursts of violence. Closer probing of the allegedly Synanon-like groups with the children themselves revealed that they did not consider it any more confrontational than normal encounter groups, with which they had all had experience. In short, the program's reputation and Mr. A's description of it did not conform with our experience of it.

A PRIVATE FACILITY

Mr. B directs this private facility, which accepts girls thirteen to eighteen

and is paid by the county for its services. It has no perimeter security or guards. At the time of the authors' visit, it had twenty-eight residents. Its throughput is 120 per year. Again, the program's reputation and Mr. B's initial characterization of it suggested that the population would be exclusively composed of serious behavior disorders. Mr. B said that the girls are "mostly 602s" (children who have committed what would be a crime if done by an adult, as distinguished from status offenses such as truancy, which only a child can commit). He saw them as part of a "new breed," because many of them committed car thefts, burglaries, and assaults — "boys' offenses," as Mr. B called them. Formerly girls had tended more toward directing their rage at themselves, he said.

Treatment is done exclusively by social workers. Psychological input is only by way of consultation. He described "coping" with a variety of chronic and severe problems as the thrust of the program. About one-third of the girls are victims of incest; another third have a history of adoption. Most are prone to some kind of self-destructive behavior, ranging from suicide attempts to drug abuse. The focus is on learning to function effectively despite the problems. "These kids have been over-treated," Mr. B said, "and they can give you a barrage of traditional psychiatric lingo." This causes them to focus on pathology, to become fixated; he feels that they need to "refocus on society." He described the program as a "pretty pushy" attempt to get them active in school, in part-time jobs, and out of the institution altogether as soon as possible.

Children who behave violently are removed for up to two weeks. When they are brought back, they are often fine, he said. Medication is seldom used. Presently, children who chronically act out are permanently removed. Mr. B said that if he had access to a closed, secure facility over which his facility could retain control of treatment, he could handle the more violent cases. However, he does not have this option. Again, the population here is overwhelmingly white. The atmosphere is that of a boarding school, which is essentially what the facility is.

A COUNTY FACILITY

Ms. A is the assistant to the director of this county-operated secure facility for forty boys and sixty girls. Their ages range from thirteen to eighteen, and they stay an average of seven to nine months. She was very frank about their admissions policy. "This place wants kids it will be successful with," she said, which contrasted sharply with the program's reputation and its literature. The program was ostensibly designed to handle the most serious kinds of violent and disturbed juveniles. However, Ms. A said that this sort of child "soaks up too many resources; the staff don't want to deal with them, and aren't trained to. They are too aggressive." Consequently, the program contains no "real" behavior disorders or severely psychotic children. It does, however, help a great many children, she feels. Studies of their children reveal "improved ego strength" as a result of their behavior modification program, which helps those who are not sufficiently socialized and have little impulse control.

The contrast between reputation and reality was especially sharp here. The authors had been told by Domino K. Cheung, one of the authors of the report from which the profile was drawn, that this program did, indeed, successfully treat severely disturbed and violent juveniles. In our talk with Ms. A and in our tour of the facility, which included spending one-half an hour in one of the cottages talking with several inmates, this appeared to be an undeserved reputation.

FOSTER PARENTS

Mr. & Mrs. A have had custody of 180 children, all but three of whom were girls. The county pays them to care for the children for from one night to several years. The couple is not especially conversant with psychiatric terminology, however, they noticed an absence of conscience in the children, and said that it appeared to be an increasingly common phenomenon. Clearly, they felt, "the children are getting worse." They have handled some children who had committed fairly serious crimes, and felt that they generally helped them. However, signs of impending violence would likely lead to a request to be relieved of the child. They said that any child who stayed with them less than six months could not be expected to "move in psychologically." They are convinced that these children are the victims of long-term neglect and require long-term care.

Although it seems inappropriate to describe them as administrators, it is not without foundation. They have their own six children to protect, and their neighbors to think of. Children who are responsive to affection, mostly girls, are within their ambit. Children who have difficulty forming relationships, especially those who are given to violence, are really more than Mr. & Mrs. A are willing or able to handle, and understandably so.

CALIFORNIA YOUTH AUTHORITY

Dr. A is a psychologist and director of the Intensive Treatment Unit at the Southern Reception Center in Norwalk. The official description of this unit says that it is intended for acute psychiatric and sociopathic personality problems. It has forty residents and forty-one staff members, and offers twenty-four hour care. Average stay in the thirty, long-term spots is one year, although some have stayed for as long as five. Five beds are for crisis intervention from the larger facility, when non-mentally ill inmates — or at least those who are not diagnosed as such — become suicidal, severely depressed, or acutely psychotic. Another five beds are used for transitional inmates who are approaching release and are working or going to school outside of the institution. Juveniles who come to this unit must first be committed to the Youth Authority for some crime, which means generally that other placements have failed. Failure in programs like the ones described above is common among those youngsters in this unit. This option is sought after among youths committed to CYA because of its therapeutic nature, and there are many more juveniles who desire this placement than can possibly be admitted. It is still in something of a trial stage.

Dr. A told us that eighty percent of these juveniles had committed very serious crimes and were very seriously disturbed, as well as violent. Some were considered psychotic, but most have behavior disorders. He said that they had usually been dropped from the State Hospital program or another like it, and had "picked up all the tricks." The program's recidivism rate was thirty percent in fifteen months.

The authors had a one-hour interview with three of the wards. One was white, twenty-one years old, and had committed an armed robbery in which he had severely pistol-whipped an old man for no particular reason. As he put it, "I changed his face." He saw no chance of making it "on the outs." He expected to get into trouble as soon as he was released and probably for doing something for thrills. Another of the three was a twenty-two-year-old black who had committed manslaughter, and described the act as something that "had to be done." The third was a Chicano who felt that he was wrongly convicted for this particular offense, but agreed that he had "a violent jacket," meaning a long record of and reputation for violence, which he described as "righteous," meaning accurate. It was evident that this unit did contain a large number of juveniles who fit the characteristics of the profile offender. Many of them were in fact "the kids nobody wants." More than one-half the population of this unit, and the overall facility, is minority, and most of that portion is black. It is sometimes said that the CYA is a more likely disposition for minorities with mental disorders, while whites are sent to therapy institutions. This is said to reflect the racism of administrators. However, it has been pointed out in detail that amenability to various kinds of therapy is influenced by social class. (Hollingshead and Redlich, 1958) If the white inmates are of a higher socio-economic status on the average, they may be more verbal and therefore considered — perhaps correctly — to be more amenable to therapy of the traditional sort. In any case, many of the forty youths in this unit were of the type which state, county, and private institutions as well as foster homes would almost certainly refuse or discharge. Here one must note the small size of the facility and its enormous cost, which is the result of providing *both* intensive treatment and a high degree of security. This type of unit is not open to the vast majority of disturbed juveniles. If the Bolton report is correct, the number of such juveniles is very high indeed.

SUMMARY OF INTERVIEWS

Our research tends to confirm what Hogoboom and others have suggested. Outside of the CYA, no therapy-oriented facility is likely to accept hard-core violent and disturbed juveniles, and should one slip through, he will probably be ejected at the first violent outburst. Within the CYA, therapy facilities are rare, and the Intensive Treatment Unit is both very small and possessed of an uncertain future, largely because of its high cost.

Despite the fact that most therapy-oriented institutions are not willing or able to provide for the more serious cases, their programs are described as being designed to handle children of this sort, perhaps because it is commonly known that many juveniles fit this description. Yet they try to accept the most

"treatable" juveniles, in a sort of "creaming-off" process, which tends to exclude the more serious cases. When wards of this description have exhausted the list of therapy institutions, commitment to the CYA may follow. This will in all probability result in the ward receiving no therapy; he will, in short, be incarcerated. As Hogoboom and others have pointed out, many judges try to avoid this by placing the youth in Juvenile Hall, a temporary holding facility, while looking for some suitable but rare placement — rather than committing him to the Youth Authority, at which point he is in different hands. This created the situation which prompted the *Los Angeles Times* series mentioned earlier.

INSTITUTIONAL ADMINISTRATION AND INSTITUTIONAL POLITICS

The attitudes of these administrators, and their desire to preserve the image of their program's effectiveness even at the expense of failing to help those for whose benefit they were created, is more easily comprehensible when one considers the institutional politics of the juvenile justice system. As these politics are the consequence of almost one hundred years of reform and counter-reform, it is well to briefly set out the ideological framework which has so much importance for the treatment of mentally-disordered juvenile offenders.

Few aspects of the judicial process present more urgent and challenging dilemmas of morality and pragmatics than the institution of juvenile court. Although the continued currency of debate and research in this area tends to create the impression that society is facing many problems for the first time, these matters have in fact a long history of discussion.

Until the beginning of the twentieth century, juveniles who broke the criminal law were treated in substantially the same manner as adults, except for those below the age of fourteen, who were presumed incapable of forming criminal intent. During the latter part of the nineteenth century, a reform movement began to emerge which sought to establish a separate court for juveniles. These reformers felt that the "rigidities, technicalities, and harshness" (*In re Gault*, 387 U.S. 1, 13, 1967) of the criminal process could only serve to make the juvenile more hardened in the criminal mold, and that young minds were malleable enough to be subject to influences of a more desirable nature. They believed that, given custody of the minor, the state, acting as parent, would find it possible to correct the moral disorder which presumably existed in any child who broke the criminal law, and then to restore him to a productive and wholesome role in society.

It has been pointed out that this vision rested on several assumptions: (1) that human beings were basically good; (2) that human behavior could be controlled through techniques drawn from the social sciences; (3) that the law could be used to shape moral character; (4) that the juvenile court judge could simultaneously fill the roles of objective finder of fact, defender of society's right to be protected, and advocate of the best interests of the individual child; and (5) that the American public was willing to provide support for social

reform on a large scale. (Winslade 1975, pp. 181-99, 181) These assumptions were debated and subjected to considerable research at the time, and the result was the establishment in 1899 of the first juvenile court in Chicago, Illinois, to handle by way of civil procedures children who had broken the criminal law or were neglected, homeless, or otherwise perceived as being in need of supervision. This movement and the moral stance which accompanied it spread rapidly through the country, and by the end of the 1920s special legal provisions for juvenile criminals and neglected youth had been passed in almost every state. (Lou 1927, pp. 13-31)

Juvenile court did not offer procedural safeguards normally associated with the criminal process, because it was felt that, first, this was not a criminal proceeding, but a civil one, and second, that it was not a question of the society versus the defendant, but of the society acting in the best interests of the defendant, that is, the juvenile offender. This posture was thought to justify dispensing with constitutional guarantees. However, considerations involving society's interests inevitably crept into the process. A child who had committed a very serious crime could not always be freed merely because imprisonment was thought not to be in his best interests. Society needed to be protected from such a person in any case. This dilemma, the practical and moral impossibility of considering no interests but those of the child, and the inevitability of some degree of compromise in the philosophy and practice of juvenile court, continues to plague scholars and practitioners in the field. By 1967 the disparity between philosophy and practice in juvenile court had become so severe that the United States Supreme Court pointed it out in great detail as it extended to juvenile offenders certain of the procedural rights reserved to criminal defendants. (*In re Gault*, 1967)

Those who opposed the traditional institution of juvenile court claimed that persons who would reform children are unable to prove that they can do so, and that children came out of juvenile institutions in worse moral condition than when they went in, just as if they had been sent to adult prisons. In fact, it was pointed out that, had they been treated as adults, they would at least have served shorter sentences in many cases. The juvenile court could simultaneously serve society's interests and those of the child only if it could in fact transform the child through a program of moral education. If it could not, it lost its moral justification for depriving the child of his procedural rights. Hence, since 1967 the trend in juvenile courts has been to approximate with increasing closeness the surroundings, the procedures, and the nature of the adult criminal court; and the humanitarian ideals of social justice aspired to by the early reformers have increasingly been supplanted by a conflict between two sets of ideals. At one extreme stand the defenders of individual liberties who would advance every constitutional protection for the juvenile offender, and at the other stand the defenders of society's right to be protected who seek to "sweep the streets." Both sides despair of "curing" juvenile offenders, and both seek to make juvenile court an adversary proceeding, but they differ as to which side should prevail in the contest. Hence, much debate over the proper manner to handle these offenders has taken on the aspect of

the debates concerning adult criminals, described by Herbert Packer as involving a Due Process Model and a Crime Control Model. (Packer 1966) In the middle ground of this struggle are those who wish to maintain a juvenile court in the traditional mode: a sort of informal, family-court proceeding in which the best interests of each minor are the main, if not the sole, concern, and "justice," in the normal context of the criminal process, is de-emphasized.

Both sides, as well as the middle, of this controversy are constantly on the lookout for evidence to support their own outlook. Statistics concerning the success rates of programs, and the recidivism rate, are scrutinized with great care by the adversaries, and programs are scrapped or refunded as a consequence of prolonged and often savage arguments over their cost-effectiveness. One has only to look at the fate of Rahway State Prison's Lifer's Program, documented in the Academy Award-winning film "Scared Straight." The initial impression that the program was both cheap and successful led to nation-wide acclaim and a host of imitations (that it also degraded and humiliated juveniles, whose lives had presumably been sufficiently brutal in any case, perhaps satisfied those who desired some form of retribution). However, later research apparently suggested that the program was not as successful as claimed, and that it may have led some youths to commit more violent crimes than before just to recover their shattered self-esteem. Far from being treated as just another work of social science, that is to say, ignored, this report was featured on national news programs, and resulted in the scrapping of many of these programs and severe restrictions on the original. The consequences for Rahway's program of failing to protect its image were severe indeed. It becomes understandable for a sincere program administrator, who believes that his or her program is doing some good, to try to protect that program, and those who can be helped by it, by refusing to allow its image to be tarnished. That it denies therapy to those who perhaps need it the most is lamentable to them, but beyond their control — or so they feel, perhaps.

There is yet another set of institutional issues at stake here. During the same period in which the institution of juvenile court has existed, the mental health profession has come to play an increasingly significant role in the criminal process in general, and juvenile justice in particular. Therapists have provided expert testimony on issues of mental state, assisted in selecting suitable placements for convicted offenders, and provided therapy for inmates in correctional, mental hospital, or outpatient settings. Their involvement has been evaluated in a variety of ways. Some observers feel that they have humanized the criminal process to some extent and made it more sane, and even that we ought to move toward a therapeutic state. Others feel that their contribution has been mixed. (Meehl, 1970) Still others feel that their contribution could be greater if they participated only at the dispositional stage of the proceedings. (Suarez, 1973) Some claim that their participation is merely an excuse for gross violations of individual liberties, and that mental illness is itself a myth.

In any case, the moral education which the law sought to provide for juvenile offenders has come increasingly to involve the use of mental health

professionals and psychotherapy. Hence psychotherapists who administer therapeutic programs may feel that their position is somewhat uncertain, and that their participation must be defended against those who would like to see their involvement reduced, or even eliminated except when the ward requests treatment.

PROPOSALS FOR FURTHER REFORM

When scholars and professionals are called upon to cease criticizing for a moment and offer suggestions concerning how improvement could be brought about, it becomes obvious that the issues involved run very deep indeed. Sociologist John R. Seeley, in his often-cited article on the juvenile justice system and the helping professions, manages to discuss the dilemmas presented by this conjuncture for sixteen closely-printed pages before concluding:

I find, therefore, up to this point, no question of juvenile justice to be discussed — or at least none that can come clear until the major prior injustices committed upon the young as such have been substantially dealt with and removed. (Seeley 1977, p. 16)

A slightly, but only slightly, less sweeping approach to reform came from a Los Angeles County Probation Department employee. He points out that correctional institutions assume a rationality these youths do not possess, and that the medical model does not apply because of the coercive nature of the institution, not to mention the truculence of the juveniles. The need, he feels, is for "an institution designed to take the responsibility and not say it's somebody else's job." Such an institution would contain one very special reform: the professional hierarchy would be reversed. Presently, he feels, professionals are rewarded in inverse proportion to the amount of time spent dealing with the youths. Youth counselors, lowest on the scale in education, pay, and status, are constantly on call to talk, argue, discipline, and wrestle with the youths whenever they are needed. Psychiatrists, highest on every scale, see the children on their own terms, and that is occasionally at best. People are rewarded, he says, for being well-educated, for being good supervisors, and for being good in the office but not necessarily for being good with the youngsters.

This is especially important given the needs of these juveniles, he feels. They desperately need to be accepted, which requires a non-judgmental attitude and a great deal of patience and personal commitment. These youths have great needs, and the Probation Department employee feels that they can be helped through extended contact with people who will try to satisfy those needs.

The idea of creating a special secure therapeutic institution for just these youths, which would not have to pass the responsibility along, and which would have a high staff/inmate ratio, is tempting. The main impediment here is the cost, which would be staggering, if the State Mental Hospital unit and the California Youth Authority's Intensive Treatment Unit are any guide.

Here the needs of these children come into conflict with the expressed desires of California voters, who have made it quite clear — via Proposition 13 — that they want cutbacks in government spending, not the inauguration of costly, risky, new programs and facilities.

Recent developments suggest that the "creaming off" process described herein is by no means an exclusively American phenomenon. From May 27 to July 1, 1979, the United Nations sponsored a "Meeting of Experts on Juvenile Justice: Before and After the Onset of Delinquency." This international conference, which the authors attended, was held at the National Judicial College on the University of Nevada, Reno, campus, and was a prelude to the United Nations Sixth Congress which is to be held at Sydney, Australia, in 1980. The report of this conference makes mention of this "creaming" process as a problem of many nations. Some suggestions for reform, based on international experience, emerged from the discussion. It was suggested that judges could order institutions to accept and treat these juveniles, removing the discretion of administrators. The Japanese experience places more reliance on frequent meetings of representatives from all agencies and institutions involved, including the courts, to recognize and handle this particular problem on a cooperative basis, so that no stigma is attached to institutions whose success rates are adversely affected. These meetings could conceivably be mandated by statute. The most extreme route was placing all these agencies and institutions under one administrative umbrella with a single budget and a single purpose, which would remove or reduce the tendency toward competition. This latter alternative may be most appropriate for smaller units of government; the state of California would probably find such an agency unwieldy, assuming that the formidable political obstacles to its creation could be overcome. However, mandated placement and formalized meeting procedures could conceivably have application to the urban American situation.

Failing these alternatives, at least one remains which is much less expensive. This is public and professional awareness of the situation and a commitment to set ideological quarrels aside where this group of youths is concerned. If the concept of child-centered juvenile justice — as opposed to act-centered adult justice — is to have any meaning anywhere, it should be here. The evidence suggests that these juveniles are the victims of long-term parental neglect. It is tragically ironic that, when the state assumes the role forfeited by these parents through this neglect, and becomes *parens patriae* (the state as parent) it should perform in as neglectful a manner as did the natural parents. One hopes that the interests of these youths can be put ahead of other considerations just once, and that if this is done, the children will respond in kind.

It is also imperative that scholarly inquiry into this situation continue. The need for further extensive exploration of the matter is pressing. It is hoped that the present study will serve to delineate some of the major problem dimensions in the area, and that gathering the academic literature together in this way — scarce as it is at this point — will give future researchers a head

start in the pursuit of deeper understanding of, and more effective response to, the great need which exists.

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CHAPTER III

Treating The Kids Nobody Wants: A Survey of Innovative Treatment Programs for Seriously Delinquent Youth

By EVAN MCKENZIE

INTRODUCTION

The purpose of this report is to make recommendations to the San Diego County Juvenile Court for dealing with serious juvenile offenders in some manner other than committing them to the California Youth Authority. It is a search for safe, effective, and innovative alternatives to incarceration.

It is based upon on-site visits to some of the nation's best delinquency programs, public and private, and analysis of their elements. It is also informed by review of academic and professional literature on the subject.

This project began out of the desire to simply document the inadequacy of alternatives to incarceration for San Diego serious juvenile offenders. However, at an early stage of the process, it became evident that there was no serious disagreement with the proposition that in this county the juvenile court is forced to incarcerate large numbers of serious delinquents either in the CYA or county camps, because of the almost complete lack of safe, effective treatment programs, public or private.

In fact, in 1979 the county undertook a comprehensive evaluation of its juvenile justice system. One of the four major conclusions of this project was that the county suffers from the "lack of a range of correctional alternatives" (Yaryan, et al., p. viii) for juveniles.

"For the largest percentages of juveniles, the choices tend to fall on the extreme ends of a possible correctional continuum, representing in overly simplistic terms, 'institutionalizing them' at one extreme, or virtually 'letting them go' at the other extreme. Few alternatives between these two extremes are presently used to any great extent in San Diego County." (Yaryan, et al., p. 113)

This accounts for the large number of San Diego youth sent to the California Youth Authority — the state juvenile prison system — and county-operated equivalents. Of the eight largest California counties, San Diego had the highest rate of commitment to the Youth Authority — almost twice the average of all eight counties. (Yaryan, p. 52) When placements in county-

operated detention camps are included, it becomes clear that San Diego County is incarcerating juvenile offenders at a rate almost *three times the national average* (Yaryan, p. 132)

Incarceration of juveniles in large numbers is widely considered to be one of the most effective methods of increasing the population of adult career criminals. The county study reviewed the leading research on this subject and documents the conclusions of three major projects that imprisonment of juveniles increases the likelihood of recidivism. (Yaryan, pp. 125-129) Because of the overwhelming evidence that incarceration reduces the chance that the offender can ever successfully reintegrate into society (Yaryan, p. 128) a federally-funded national advisory commission recommended in 1973 that "All major institutions for juveniles should be phased out" over a five-year period. (Yaryan, p. 125)

Of course, this is not going to happen. There are too many good arguments for keeping certain offenders locked up because they are not amenable to treatment of any kind now known and because they present such a danger to the public. Yet it is clearly in the public interest to reduce reliance on secure detention for offenders who are not irredeemably lost. Locking them up protects the public temporarily, but in the long run it endangers us all. We are locking up youths who are not yet hardened offenders and who do not need to be locked up, merely because there is nothing else to do with them, because the court has no effective programs in which to place them. In the process of locking them up, we are turning many of them into the kind of offender who *does* need to be locked up. It is often true that on the day he walks out of the institution a free young man, by virtue of the changes which that institution has wrought on him, by all rights he should do an about-face and walk back in. In fact, a glance at the high recidivism rates reveals that most of the time this is just about what happens.

It was out of the desire to improve this situation that this project was conceived by the researchers and G. Dennis Adams, Presiding Judge of the San Diego County Juvenile Courts. The remainder of this report documents the search for safe, creative alternatives to incarceration for the San Diego County juvenile justice system.

Those who would like to examine in greater detail the evidence supporting the claims that (1) San Diego lacks suitable delinquency placements short of incarceration, (2) that San Diego is incarcerating juveniles at a very high rate, and (3) that incarceration does not change juveniles except for the worse, are encouraged to examine the 1979 county evaluation and the massive supporting literature cited therein.

It must be pointed out that in a study of this sort, which involves visiting many programs and presenting a relatively concise report, it is impossible to do a thorough evaluation of all aspects of the programs. During the course of the study an enormous stack of program literature was collected, including descriptions, analyses, and evaluations. To analyze the issues presented by this mountain of material alone would require a book-length report. When

one adds to this the researcher's notes, observations, and impressions, as well as material gathered from academic literature on the subject, it becomes clear that this report cannot possibly be as comprehensive as the researcher would like it to be. It is to some degree impressionistic.

Keeping this in mind, it is necessary to limit the scope of the report itself to the specific purpose for which it is intended: to provide the San Diego County Juvenile Court with information it needs to make decisions in the near future concerning new placement options for "last chance" delinquent youth who would otherwise be sent to the California Youth Authority. Therefore, the major questions in each case are, "Do we want to use it here?", "Can we use it here?", and "What can we learn from it?" This report is intended to be supplemented by the continued personal contact the researcher, Evan McKenzie, and the consultant, Robert A. Roos, have with the court. All program literature collected is available for review by the court and other interested agencies through contact with the researcher.

PROCEDURE

We began this research project with the intention of visiting some of the best alternative treatment programs for delinquents. We intended to cover a broad range of types of placements. Various knowledgeable individuals were consulted to help locate these programs. Ted Rubin, of the Institute for Court Management in Denver, Colorado, was very helpful, as were staff members of the California Criminal Justice Planning Agency.

In addition to examining these programs on-site, we decided to conduct a review of the literature on this topic with the intent of discovering what aspects of our research did not need to be duplicated. This began with a computerized MEDLINE search and is still continuing.

Combining these two sources with what we knew already about the effectiveness of various kinds of programs, and about the San Diego juvenile justice system, we could proceed to designing and proposing a model approach to the problem for San Diego.

There are many schools of thought concerning how to change delinquents, and consequently more than one method of treatment. The facilities we examined represent a wide range of treatment approaches. For our purposes, they may be grouped into four categories:

1. The Therapeutic Community.
2. The Clinical Model.
3. The Educational Model.
4. The Adventure Experience Model.

After consulting with our informed sources, a list of programs representing all these approaches was assembled which Evan McKenzie would visit. These programs included the following:

1. Synanon (Tomales Bay, California).
2. Delancey Street (San Francisco, California).

3. Devereaux School (Santa Barbara, California).
4. Circle S Ranch (Salome, Arizona).
5. VisionQuest (Tucson, Arizona, and Denver, Colorado).
6. Provo Canyon School (Provo, Utah).
7. New Pride (Denver, Colorado).
8. Closed Adolescent Treatment Unit (Denver, Colorado).
9. Devereaux School (Victoria, Texas).
10. Centerpoint (Danvers, Massachusetts).
11. Elan (Poland Springs, Maine).
12. Illinois State Psychiatric Institute (Chicago, Illinois).
13. Southwest Martial Arts Association (San Diego, California)

It is worth noting that we have also done research on the placements used by the Los Angeles County Juvenile Courts which is presented in the article, "The Mentally-Disordered Juvenile Offender: An Inquiry Into the Treatment of the Kids Nobody Wants", (*Juvenile and Family Court Journal*, Vol. 30, No. 4, Nov., 1979, pp. 47-58), a copy of which is attached as an Appendix to this report. It supplements this report to the extent that it describes the inadequacy of most available types of facilities for the serious offender.

Arrangements were made to visit all of the placements on the list except the Circle S Ranch. Telephone conversations with the owner, Leo Stein, ultimately failed to persuade him to permit a visit. Although he was interested in the project and said he would like to cooperate, he was advised by his attorney to decline because of the implications the visit might have for lawsuits currently pending against him. Our efforts to change his attorney's mind on this subject were fruitless.

This was our first encounter with the legal dilemmas facing some of the facilities. The Circle S, VisionQuest, the Provo Canyon School, and Elan have been plagued to a greater or lesser extent by attorneys representing parents, children, or the state agencies with which they have to deal. These difficulties are related to the innovative nature of their treatment methods. One common complaint of program administrators is that in order to avoid these difficulties, they would have to become ineffective. These matters will be discussed further as each program is taken up.

The site visits were conducted by Evan McKenzie from January 12 to March 14, 1981. At a later date, Robert A. Roos visited VisionQuest in Tucson, and on April 23, Judge G. Dennis Adams visited VisionQuest as well.

What follows is a series of individual reports on the programs. At the conclusion of these reports, there is an analysis of the elements of a successful program, and recommendations for San Diego.

PROFILE OF THE OUT-OF-CONTROL YOUTH

It would go far beyond the purposes of this report to extensively document the entire range of problems and personality characteristics of delinquents in

general. It is sufficient for our purposes to restrict our concern to a particular segment of the population that passes through the juvenile courts: The chronic serious offender. This is the juvenile who has been given the benefit of most or all of the treatment options short of commitment to a juvenile prison.

In a previous article we have referred to these offenders as "The Kids Nobody Wants." We gave them this name for two reasons. First, they present such problems to the administrators of correctional programs that they are not readily accepted into these programs. Second, examination of their social history reveals that they are victims of parental neglect and abuse.

For a detailed description of these two points, see Appendix A, which is a reprint of that research. For those who want simply to know what segment of the juvenile court population we are concerned with here, there follows a brief summary.

We might begin by pointing out who we are *not* talking about. We do not include in this group the runaway, the truant, the disobedient child. This is the "status offender," who under the law cannot be confined against his or her will. We are not including the psychotic child who is mentally disturbed to the point of being out of touch with his environment. We are not including the offender who is no longer a juvenile delinquent by virtue of having become a hardened adult professional criminal whose identity as such is solidified. This is an easier distinction to make on paper than in real life, but trained judges and probation officers are required to make just this distinction every day.

We are concerned here with the juvenile identified in psychiatric parlance as the "character disorder," sometimes diagnosed as "behavior disorder," "unsocialized aggressive reaction to adolescence," or "anti-social personality disorder." In older terminology, the word "sociopath" was used to describe them, but has fallen into disfavor because of its menacing connotations. In ordinary terminology, we are talking about an adolescent who is not really mentally ill, in the sense of being crazy, but who is unable to control his impulses; who has a great deal of rage and very little conscience and is therefore capable of exploding into violence for little or no reason.

They are extremely manipulative and very concerned about the way others see them. They approach their relationships with others, especially adults, from an enormous social distance. They lack the capacity to trust; they often have confusion as to their sexual identity, and they tend to express themselves physically rather than verbally.

One observation which could be made at this point is if these are their characteristics, then they are apparently no different than any other adolescent. In fact, there is some truth to this. Adolescence is a time when one's identity is of necessity in a state of crisis. One has to face the need to leave childhood behind and establish a role in the adult world, and to incorporate the emergence of strong sexual feelings into one's life. These things make adolescence a tough time for most of us, even under the best of circumstances. When the identity placed into this crisis situation is already damaged or incomplete in certain ways, it is a time when the potential for criminal activity

is very high indeed. Close examination of their social histories reveals that this type of offender has typically been the victim of severe parental neglect, and often outright rejection, at an early age. Single parent families are the rule rather than the exception.

The lack of close contact with a parent figure induces a failure of trust in human relationships, a minimal conscience, feelings of deprivation and compensatory rage, low self-esteem, poor frustration tolerance and impulse control, and a self-image of the "tough guy," or girl, who appears impervious to hurt. This is, of course, a facade which conceals feelings of rejection and worthlessness.

To say it in the fewest possible words, these are youths who are *out of control*. They cannot be controlled by their parents, their schoolteachers, the court system, or the correctional system. More importantly, the reason they cannot be controlled by anyone else is that *they are unable to control themselves*. Anyone in this situation would be frightened, and they are no exception. Their lack of self-control excites them, but at a more fundamental level it scares them. For this reason, they search for controls. It is this characteristic that makes them amenable to treatment. If they become adults before finding controls, and their identity solidifies, it is too late to do very much about them, and society is stuck with one more adult sociopath — an uncivilized, predatory creature prowling in the midst of a highly organized and generally vulnerable culture. If they are induced to develop self-control before this point is reached, they can be redirected into relatively constructive pursuits. The question then becomes how to accomplish this.

All the programs examined herein have this as their goal. The first approach discussed is the therapeutic community.

THERAPEUTIC COMMUNITIES

The point of a therapeutic community is to create a living environment which is largely self-sufficient and which meets as many of the residents' human needs as possible, but which has the central purpose of improving them, in a moral or spiritual sense. Its organization, its rules, and its creed are all created with the goal of providing a path for character development and a place where it can occur.

Such communities are controversial by their very nature because they seem to imply a divorce from the larger society in which we nest and grow. This is not necessarily the case. Some such communities, such as Delancey Street and Elan, are designed specifically with the end goal of returning their members to the larger society in a much-improved and better-functioning state. However, there are those which do not aspire to this goal, and which see themselves as an *alternative* to life in America rather than a road back to it. One of these is Synanon.

Syanon — Tomales Bay, California

Syanon was founded in 1958 as an offshoot of Alcoholics Anonymous by

Charles Dederich, an alcoholic and former Gulf Oil Company executive who brought his alcoholism under control through AA but was still dissatisfied with it in some undefined way. He found his dissatisfaction shared by many heroin addicts, who were drawn to AA because it seemed to hold some hope for them, but who were not entirely welcome in AA because their apparent incurability within the AA context posed a threat to the organization's survival. (Kendall) On Saturday night in August of 1958, at a meeting of an AA chapter at 26th and Broadway in Santa Monica, California, Dederich led a mass walkout in protest against the AA leadership's lack of sympathy with the problems of drug abusers.

At the root of Dederich's dissatisfaction with AA was its single-mindedness. AA is an outgrowth of the Oxford Group, which was a sect with somewhat utopian goals, and AA itself, in its Twelve Steps, aspired to certain wide-ranging ideological objectives. However, to Dederich it appeared to be too narrowly focused upon maintaining sobriety among its members. He was searching for more than a way to keep people from drinking; once he accomplished that in his own life he became more concerned about finding a way to cleanse the world of neurosis — a sort of mass psychoanalysis.

Out of noisy, rough-and-tumble rap sessions at Dederich's apartment, the tool for that task evolved. It is called "the game," and it is the focal point of Synanon's social structure. It is hard to describe, but briefly it consists of an encounter group of about twelve people who in most cases live and work in Synanon, in which the only rule is that there can be no physical violence and no threats of physical violence. The art of the confrontation and self-defense: members confront each other with their frailties, and the person attacked tries to defend himself as skillfully as possible. The areas of criticism can be extremely intimate as nothing is off-limits. One's physical appearance, sexual behavior — anything is fair game. It can be one-on-one or all-on-one. It is like street fighting with no contact. Out of this merciless, brutal, extremely confrontive stripping away of pretense and self-deception, the self becomes more authentic, stronger, freer of neurosis, more giving, and ultimately healthier. This, at least, is what Synanon members believe.

Following its beginning with heroin addicts, Synanon expanded rapidly into a largely self-sustaining community with substantial resources. It began to encompass other "character disorder" people, including alcoholics, adult criminals, and juvenile delinquents. In the late 1960's it expanded further to include many individuals who were functioning in the larger society, often very successfully, but who wanted to share the Synanon life-style while continuing to hold jobs on the outside. They became known as "lifestylers." They lived at Synanon and worked in middle-class occupations on the outside. Many lawyers, doctors, and other professionals adopted this way of life, and they provided a more acceptable public image for Synanon as well as a source of income.

Perhaps because of its increasing respectability and its undeniable success in getting character-disordered people moving in positive directions, many

court agencies began referring adult and juvenile offenders to Synanon as a condition of parole or probation. Many of them found in Synanon a sense of belonging that had eluded them elsewhere. It is impossible to fade into the woodwork or slip into a deviant subculture in Synanon. The game provides a very powerful mechanism of group control, and it enforces the norms of Synanon behavior in a very effective and explicit way. These people were forced to confront the facts of their character and their behavior, to accept their failures, and yet to discover that acknowledgement of these failures did not lead to ostracism. In fact, outside of the game, Synanon is a very friendly place and people are expected to smile at each other, to be polite and considerate, and to be helpful to each other. There is no way to escape from the responsibilities and the benefits of being a member of the group. This is a new experience for the character disordered person; it is like being forced into membership in a gigantic family.

Synanon became increasingly self-sufficient economically through various cottage industries and by becoming very good at "hustling" — approaching individuals and large corporations for gifts of various necessities such as food and clothes. Its ability to provide for all a person's basic needs rapidly grew, and it became an attractive alternative to mainstream life for many middle-class Americans.

In fact, it became so complete an alternative to life "on the outs" that the idea of leaving Synanon is regarded as absurd by those who become committed to it. Unlike true rehabilitation programs, Synanon does not aspire to returning people to society in improved form. It does not keep statistics on the re-arrest rates of those who "split." It is assumed that returning to the streets will lead to a return to addiction or whatever destructive behavior brought the individual to Synanon in the first place. As Dederich put it, "I know damn well if they go out of Synanon they are dead." Synanists prefer to point to the dramatic behavioral changes evident in those who stay, and say there are more "clean" addicts in Synanon than anywhere else. When asked how they prepare people for a return to the streets, the answer is almost invariably, "Why would anyone want to leave?" This is generally followed by a lecture on the horrible state of life outside of Synanon — crime, selfishness, loneliness, alienation, competition, conflict — and a description of the idyllic life-style enjoyed by Synanon members.

There is some merit to this. Who could deny the advantages of having all one's material needs taken care of by a community where one is surrounded by a community of like-minded people who care about each other? Then there is the game — the glue that holds this utopian community together. Here grievances are aired and members' actions are continuously directed toward the common goals of the group, among which the improvement of the individual's character ranks high. If it were not worthwhile, its ranks would not have swelled with middle- and upper-middle-class professionals who are there by choice.

While this is in many ways an enviable way of life, for some reason this

utopia came crashing down around the ears of its members in a flurry of lawsuits involving an alleged kidnapping and an apparent attempt to murder an attorney by two members. Synanon is now struggling to re-establish itself and remake its public image. The moral of this sad story — a story which it is not necessary to elaborate upon here — is that the supreme isolation and self-sufficiency of which Synanon was so proud, and which it considered such a strength, turned out to be a major contributing factor in its downfall. The other major factor was the dictatorial quality of Charles Dederich's charismatic leadership.

In combination, these two factors led to an increasingly self-protective and ultimately paranoid attitude among the membership. Signs of Dederich's emotional decline began to emerge. He issued various orders: all members were to quit smoking; later to shave their heads; the men were ordered to have vasectomies; finally the command came for all married members to divorce their spouses and take new ones. Then he ordered \$62,300 spent to arm and train a Synanon security force. The ultimate breach came when Dederich violated the sacred rule of the game, and had a member removed from a game by physical force.

The reasons for Synanon's deterioration are instructive because there are merits to the therapeutic community idea, as practiced at Synanon, for the treatment of character-disordered delinquents. It offers a sense of belonging, which is important for adolescents. It provides adult role models who are living productive lives. It keeps them working hard, which redirects their abundant energies. Perhaps most important, through the game it confronts them with their behavior and the failures of their character, and leads them to accept themselves and to grow, within a community of supportive people.

During our visit to Synanon we were advised that Synanon was still willing to accept delinquents, if San Diego wanted to send them. The members told us that court-referred juveniles are generally harder to deal with at first than adults, because they are so wild and impulsive. However, they quickly become better game-players than adults because they are more honest, by virtue of having had less time to develop an adult self-image which they need to protect. Consequently, they said, their progress within Synanon is usually rapid, although their initial entry period is disruptive for the other residents.

Despite Synanon's willingness to accept San Diego youths, it would not be advisable to do so, for several reasons. First, Synanon has acquired the public image of being a dangerous religious cult. However unfair this may be, it makes community confidence in the program unlikely. Second, it is in a state of massive reorganization and leadership change, which means that its future is uncertain. Third, it does not aspire to preparing people for return to society, and this is not acceptable to the juvenile justice system or society.

The question then becomes whether the positive qualities of Synanon can be embodied in an organization which avoids isolationism and a dictatorial structure. Synanon bred many offshoots in which these and other elements were modified. Topic House, Phoenix House, Harmonie House, Daytop

Odyssey House, Gateway, and others incorporated Synanon principles and added and subtracted from the formula as they saw fit. One of the most successful of the Synanon offshoots is Delancey Street. This organization has particular relevance for our purposes.

Delancey Street, 2563 Divisadero Street, San Francisco, Calif.

John Maher was once a small-time hoodlum in New York. At age 23 he was an ex-con as well as a grade-school dropout, when he was sent to Synanon. He stayed there for eight years and eventually became a director. For the first time, he was confronted with his responsibility for changing himself, and he responded to that challenge, but he was dissatisfied with the dictatorial quality of its leadership — meaning Dederich — and he especially disagreed with the cult-like nature of Synanon. He felt that there should be a way to prepare people to live on the outside. He was especially concerned with convicts.

The product of his ideas is Delancey Street, located in San Francisco and founded on January 1, 1971. He co-directs it with Mimi Silbert, a Ph.D. in Criminology and Psychology. Its population is composed predominantly of probationers and parolees. Instead of the austere, isolated, substitute life-style of Synanon, Delancey Street plants them in group residences squarely in the middle of San Francisco and puts them to work in a wide variety of industries, including a moving company and a Union Street restaurant. More than 3,000 people have passed through the program, and there are now about 400 members. They have incorporated a modified version of the Synanon game. The leadership is more diffuse. The biggest difference is that the residents are expected to "graduate" in two years, at which time they should be able to live in society without addictions and without resorting to crime.

Residents are encouraged to become as involved in the mainstream community as possible, and as they approach graduation they begin to work outside the Delancey Street industries while still living in the residences. The final step is moving out, and returning for periodic reporting.

This program is a comprehensive re-education process in which residents receive psychological awareness, tutoring on dress and manners, vocational training, and formal education. For the majority of residents, it also involves drug rehabilitation. In sum, it amounts to learning how to cope with real life. All of these things are needed by most of the particular juvenile population we are concerned with in San Diego. Over the years, Delancey Street has had considerable experience with juvenile offenders. Their members feel that juveniles are by far the hardest offenders to deal with.

By virtue of their age and impulsiveness, it is necessary to give them more slack than the adult residents get. Consequently, the adults, whose adulthood is fragile at best, are inclined to feel jealous of the leniency granted the younger residents and begin to act out themselves. This requires careful management.

Sex presents a large problem as well. The youths are more likely to act out sexually, within and outside of the residences. Female juvenile offenders were

often involved in relationships with older male residents, which was extremely disruptive.

Despite these problems, Delancey Street felt it was successful with the juveniles it handled. At the time of our visit, there were few young offenders, and the direction seems to be toward a more homogenous population from an age standpoint. The program was originally designed for adults, and it will probably remain basically that.

However, there are some very desirable modifications on the Synanon model that make this particular therapeutic community a good example, although it cannot itself serve as a placement for San Diego youth.

It shows that a therapeutic community does not have to exist in a vacuum; it can thrive in the environment which breeds delinquency and crime, and in many cases reform people without removing them forever from society. There is also a strong aspect of economic strength to Delancey Street. The industries it runs seem to be doing well. This is an element we would do well to try to incorporate, as government funds for program support are definitely scarce and on the decline. Further investigation into the Delancey Street economic structure and how it could be adapted to our purposes would be beneficial.

Elan, R.F.D. Box 33, Poland Springs, Maine 04274

Some of the best features of the therapeutic community are set in the framework of a residential treatment program with an accredited high school, in the Elan program, located in rural Maine. This 250-bed program was founded by Gerald Davidson, a psychiatrist, and Joseph Ricci, a graduate of a drug-rehabilitation and self-help program which was to some considerable degree an offshoot of Synanon.

It is very difficult to describe the theory and operation of Elan in a few pages; it has been articulated at length in their own literature. Residents live in group homes of thirty to forty, and attend school in these same groups. A great deal of sophisticated planning and screening has gone into structuring the residences along lines of educational ability, and the more advanced houses have produced some first-rate graduates. There is also a major division between the kids who are placed there voluntarily by their upper-middle class parents, who bear the cost of their stay, and the "state kids," who are mostly poor, inner-city delinquents. The two groups are segregated.

The theoretical view of the Elan resident is the "out-of-control" youth, or the child who has been loved "too well, but not too wisely." The emphasis is on breaking exaggerated emotional bonds to parents and others, which lead to "acting-out" behavior. The goal is to force the child into accepting responsibility for his or her behavior. This is done by creating a highly structured environment in which a certain kind of peer culture is created. This culture forces the residents to monitor each other's behavior and confront each other with their failures. The organizational structure of each house is used to teach lessons to the residents. They run the entire residence. Everyone is forced to move up the ladder and to move laterally into areas where he or she is

guaranteed to fail and be demoted, or "shot down," several times. This is designed to teach the capacity to tolerate failure and rise from it.

There are various kinds of encounter groups. Some are confrontational in the extreme. I sat in on one of these in which the residents took turns screaming at each other at the top of their lungs for over an hour. After this was done, they began to tear each other apart in a more analytical way under the guidance of the group leader. It was in many ways like the Synanon game in the lack of inhibition, the lack of any "safe" areas of privacy which may not be discussed. However, it did have a formal leader, a trained therapist, which the Synanon game does not. There are also primal groups, in which one resident becomes the focus of a group designed to lead him into re-experiencing some of his most deeply repressed pain. Here the other residents act as supports, and the therapist is like a guide, leading the resident deeper into contact with his feelings.

Dr. Davidson pointed out to me that in Elan, the kids administer rules made by adults. This is not like the illusory power of an ordinary high school government; here they really have responsibility to run their own residences, but they must do it according to the comprehensive system established by the adults. The inevitable effect of doing so is the emergence of the therapeutic community atmosphere, in which a positive, growth-oriented peer culture is created.

Dr. Davidson said that he is "being driven crazy by advocacy lawyers," to the point where Elan has considered not taking juvenile court placements. These lawyers, he said, "feel that kids should *like* the place, shouldn't be harassed, and who want to be called if the kid doesn't like things." The point is not that the kids should like Elan, but that they should learn and change there. These lawyers sometimes work at the behest of parents who have been unable to keep the child in line themselves, but then feel compelled to interfere in the treatment process. Dr. Davidson feels that excessive parental interference is highly disruptive and can cause great problems for the child while he is in the program.

Edward Morris, Elan's Director of Education, said that above all else Elan teaches its residents to "be objective," and to "stand up for yourself." These are part of the Elan philosophy, a set of eight statements which are very explicitly transmitted, discussed by the residents, and used as a standard by which they can gauge themselves and measure their progress. There is no trace of a value-free atmosphere.

Elan claims a success rate of 80-90% with the privately placed kids, and 70-80% with the "state kids." This is based upon their own research in which they have done followups for five years on 92% of their graduates. This is obviously a remarkable success rate.

However, this placement is in all likelihood not open to San Diego juveniles in any large numbers, at least not through the juvenile courts. First, Elan is moving away from court placements because of the many legal squabbles

which result from them. Second, Elan is not eager to expand in size, and it is filled to slightly beyond its optimum capacity as it stands.

Nonetheless, there is a great deal to be learned from Elan. It appears to be successful. It uses elements of confrontation and encounter. It takes juveniles out of their element, and uses unconventional methods. These factors need to be considered as San Diego decides upon which option, or options, to choose.

Treatment, room, and board at Elan cost \$1,200 per month. School fees are an additional \$3,000 per year; so the total yearly program cost is \$17,400. The average length of stay is 16 to 18 months.

CLINICAL PROGRAMS

This term is used to designate programs which operate on the dominant model of a hospital. The program exists as one or more closed, secure wards or units in a larger medical, psychiatric, or correctional facility. The juveniles are generally referred to as patients, rather than residents, or members, as would be the case with a therapeutic community. The staff are predominantly trained in the mental health field, and conceive of their activities as treatment. They view the patients as having one or another form of mental illness, which can be classified according to the DSM 3 (Diagnostic and Statistical Manual) and treated in certain prescribed manners. The goal is to cure the mental illness by some form of psychotherapy, which may involve the use of individual therapy, group encounter led by one or more therapists, behavior modification, and drugs.

Three of these programs were visited: the Closed Adolescent Treatment Center, the Illinois State Psychiatric Institute, and Centerpoint.

Closed Adolescent Treatment Center

3900 South Carr Street, Denver, Colorado 80235.

This program is in large part the reflection of the ideas of its director. She is Vicki Agee, a Ph.D. in clinical psychology from the University of Texas, Austin. The program is located on the grounds of the Mountain View School, which is a state institution. It is, as its title implies, a closed, secure unit from which escape would require the use of considerable physical force. It has 26 juveniles, usually 6 girls and 20 boys, and 26 staff. Fourteen of the staff are B.A. level youth service workers, and the rest are professional therapists. The cost is billed at \$1,117 per youth per month, but this does not reflect the hidden costs which accrue from the unit's existence as part of a larger state institution. According to Dr. Agee, the real cost is about \$1,500 per month per juvenile.

It was started with a large federal grant and is now entirely supported by state funds. Its residents have been committed by a juvenile court to the Colorado Division of Youth Services — the equivalent of the California Youth Authority — which has in turn made the decision to send the juvenile to the CAT Center. The point is that judges do not send wards there directly; they are carefully screened by mental health and correctional professionals.

Over half of the juveniles there at the time of my visit were convicted of rape, murder, or attempted murder. The rest were convicted of armed robbery, assault, or some other serious crime involving violence.

The program is very highly structured, and the theory of its structure and content is too sophisticated to admit of full explication here. However, in general terms it is described as having three "treatment modalities." The first is the "I-Level system," (Warren, 1957) which permits classification of adolescents into seven successive stages of interpersonal maturity. It is used to classify the residents, match them with staff members and peers, and suggest treatment approaches. The second is the "team system," a behavior modification structure which provides a point system and is the basis activity framework of the program.

The third is the core theory, called "Guided Interaction Therapy." It is derived from several different theorists and combines concepts of the therapeutic community, positive peer culture, and William Glasser's reality therapy.

The point of this form of therapy is to create a situation in which the youth are forced into healthy involvement with peers and staff. Their relationships, and the nature of them, are discussed in the highly structured daily encounter groups, as is the life history and character of each individual. I sat in on one of these groups and found it to be very effectively managed by the staff leader. It was quite open and some emotions were exposed, although it did not approach the total catharsis witnessed during the initial phase of the group I observed at Elan.

The team system is a set of teams, privileges, duties, points, and goals, which is much too involved to explain here. It is a behavior modification technique designed to work in conjunction with the therapy component.

There is no doubt that this program is very fine. It takes extremely dangerous youths who would otherwise be incarcerated — probably for most of their lives, off and on — and apparently has some degree of success with them. This is an unusual accomplishment. However, this particular population is probably more hard-core than those we are seeking placement for. Further, within the CYA, there are Intensive Treatment Units, one of which is in Norwalk at the Southern Reception Center Clinic, which are very similar to the CAT Center and have a similar population. We described this unit in our 1979 article (McKenzie and Roos, 1979). Once a youth has been committed to the CYA, that organization can decide to commit him or her to the ITU, just as Colorado's Division of Youth Services places youths in the CAT Center. These placements are beyond the discretion of a judge, and are therefore a matter of correctional policy rather than judicial discretion. Finally, as this is a Colorado state institution it would not be a placement for California youth in any case. For these reasons it is not recommended that San Diego pursue the creation of local programs along the lines of the CAT Center. This does not preclude the adoption of some of the ideas which it employs.

Adolescent Program, Illinois State Psychiatric Institute 1601 West Taylor Street, Chicago, Illinois 60612

This program is in some ways a spinoff of the Menninger Clinic ideas which were developed in the late 1950's. Ideally, programs of this sort claim to be effective with up to two-thirds of the delinquent youth they treat, in the sense that they will not be convicted of another crime. It is close to a purely clinical, or medical, model. The youth are called patients, and the units, of which there are three, are run by Richard C. Marohn, M.D., a psychiatrist. This program has three purposes. The first is treatment of disturbed adolescents. The second is training of staff members. The third is research. The program has been the source for two books and a number of scholarly articles.

One of the three wards, 6 West, is for psychotic and other severely disturbed youth. It was described by Marohn as a "traditional psychiatric unit." Its cost runs from \$175 to \$190 per day per patient, and the average stay is one to two years. As we are not concerned here with psychotic juveniles, this unit will not be discussed. The other two units are for delinquent and behaviorally disordered youth, and are therefore most relevant to our purposes.

The second is called 8 West, and is designed to provide moderate length hospitalization for 15 youths. The average length of stay is one year. The patient population is characterized by "a wide range of psychopathology." Each treatment team, of which there are two, is "led by a clinical psychologist and consists of a psychiatric social worker, an activity therapist, a special educator, and two representatives from the milieu staff with various trainees participating as therapists in the work of the team." This language is quoted to give the flavor of the approach. It is highly professional and clinical in nature, built on a medical, or psychiatric, model.

The 11 West unit is called the Intensive Care Unit. It is one component of the Unified Delinquency Intervention Services program, which "develops and purchases services for delinquent youth who would otherwise be committed to correctional institutions." UDIS covers a wide variety of services, ranging from vocational counseling and tutoring to foster home placement. It is an amalgam of local programs whose services are paid for by the Illinois Department of Corrections. The program began with an LEAA seed grant.

11 West itself serves as a short-term psychiatric placement which is designed to implement the principles developed and employed in the Adolescent Program in a short-term model. The youth are accepted on a no-decline basis, and include boys and girls from 13 to 18 years of age who have been referred by the judicial system. The placement is voluntary. Its goal is to involve the youth and his family in an effort to understand the reasons for his delinquent behavior and to change that behavior. The treatment team is composed of staff, UDIS case managers, and juvenile court probation officers. The program contains 16 staff and 12 kids.

Its goal is to make it possible for long-term goals to be accomplished in a short time. At 11 West the youth is given some degree of self-awareness and

started on the road to recovery, but is then transferred into an after-care plan using other UDIS-funded programs in the community, in lieu of being treated in ISPI until cured.

The theory on which the units operate generally is that all acting-out youths are emotionally disturbed. Marohn believes that adolescents show their problems through behavior rather than psychological symptoms. Its philosophy is to change their behavior by making the ward a microcosm of the outside world, and by dealing with what Marohn calls "the little delinquencies of everyday life" in a way which forces them to relate their behavior to their emotions. They learn that they are acting in order to avoid feeling, that their behavior has meaning, and that they must experience the feelings. This is the first step to changing the feelings which are at the root of the behavior.

In order to do this, the patients' behavior is watched with extreme care, and nothing goes unnoticed. Kids are confronted with their "little delinquencies" and forced through this feedback into experiencing and understanding motivating emotions behind them.

It is in essence a psychodynamic approach with some behavioral aspects, in which the "milieu," or environment, is very tightly controlled and can be shut down in short order if any serious hostility develops.

The therapy consists of a combination of individual sessions and groups. The staff meet often to discuss the minutiae of the patients' behavior. I sat in on two of these sessions and found them to be casual, friendly meetings in which the staff kept their morale high and displayed astonishing familiarity with the most trivial details of each patient's life, daily activity, behavior relative to the rules, and relationships with staff, other patients and family. Immediately after these meetings, the staff went out to the group session for the patients. This was extremely mild and involved no confrontation of the patients by each other. For the most part, staff members commented on the patients in an insightful manner. The level of self-awareness displayed by the particular group I observed did not seem impressive; however it may well be that this comes out more in the individual sessions.

The value of the ISPI program is beyond dispute. It is one of the very best psychiatric programs for delinquents in the country. However, it is extremely expensive to hospitalize anybody. If something along the lines of the UDIS system could be worked out in the San Diego area, it might be a very worthwhile development. However, this would require state and/or federal participation, as it is the state correctional system which benefits from diverting offenders into UDIS and therefore finds it cost-effective to some extent. It would be wise to look into the possibility of such a program statewide in California. However, short of this, it is unlikely that San Diego can duplicate the clinical model used at ISPI. Again, this does not mean that the valuable understanding provided by this program could not inform San Diego's efforts.

Centerpoint

P.O. Box 50, Hathorne, Massachusetts 01937

At the time of my visit this program was located in a state mental hospital. It serves 12 juveniles and employs 24 staff (nearly all B.A. level counselors) at an annual cost of \$600,000. It has a reputation as one of the best innovative treatment programs in the country. However, it has been in a state of extreme flux and relative disorganization for the past few years. During this time it has gone through four directors and changed from a behavior modification program to a youth-administered "just community" model (which rapidly degenerated into chaos), to a clinical model.

This most recent change is in part due to the influence of new director John Mrozak, a former child care worker and Assistant Chief in unit 11 West at ISPI. The influence of Dr. Marohn on Mrozak's approach is strong, as he was trained under Marohn and worked for him for 9 years.

The program has been evaluated twice by the Harvard School of Education, and the staff feels that it is working now. It is, however, a little too soon to be certain.

The target population here is low-incidence/high-risk youth, who are selected for the program because of their emotional problems and their potential for serious delinquency, rather than for delinquency itself. Referrals come from both the correctional and mental health systems. The program is psychiatric in nature, and individualized to each patient. There is some family therapy as well.

In many ways the approach to treatment is similar to that of ISPI. Mrozak pointed out a particular feature which Centerpoint emphasizes. He feels its uniqueness stems from the staff speaking as a unit and being utterly consistent in its treatment of each patient. Again, the values of the program are non-negotiable, and kids are called on their behavior constantly. In the groups, over time, the kids begin to impose nondelinquent behavior on each other.

Mrozak characterized many of the boys as being "enormously self-centered," with fragile egos, who are easily offended and explosive. Many of the girls are prostitutes who have been sexually abused by their parents. In most cases there has been a lack of parental consistency in discipline or lack of discipline, and often the kids are the product of several generations of disrupted families. This description is very similar to the content of conversations I had with people at Elan, and I found the populations very similar in these two programs.

There is also a school at Centerpoint, as there is at UDIS, and it is paid for by the local school districts from which the kids come — but not without considerable protest. Classes are small and designed to provide some challenge for each juvenile, but with the idea that he will succeed in spite of himself. It occupied five hours per day. Most of the remainder of the day is spent in some form of organized activity, but there is structured free time as well. As in nearly all lockup programs, there is television watching, which is pretty much the extent of their contact with the outside world.

David Gottesman, the clinical director, characterized the kids as being scared because they are out of control of themselves. He attributes this lack of impulse control to the absence of any relationship where they could trust that their needs would be met. Consequently, they developed the attitude that waiting does not pay off, so they learn to attack and take what they want. Therefore, the treatment program must provide structure and control of their behavior, and also create an atmosphere in which they can learn to expect that their needs will be met — including needs for intimacy, understanding, and guidance. They are expected to be children — that is, they do not make all the decisions, but they learn to accept authority, and then gradually accept responsibility for themselves in appropriate areas. Of course, there is an emphasis on getting them to understand the feelings that motivate their behavior, and to rely on words rather than action. This requires an increase in trust in general. There is a good deal of talk about the patient's self-concept, and how to change from the sense of being "bad" to being "productive."

Mrozak has a wealth of practical advice for anyone trying to start a program. He emphasized the importance of beginning to treat young kids of about 13 rather than waiting for them to prove to society how dangerous they are at 17 or 18. He prefers a coed program, particularly one which is three-fourths female and one-fourth male. He feels this provides a more normal interaction and reduces the-patient-versus-the-staff hostility, meaning less potential for violence. It also cuts down on homosexuality, although it requires setting rules with regard to heterosexual activity. He advises against any program making a commitment to take *any* juvenile, as there are some kids who can "bring a program down." The administration must be in a position to threaten a correctional commitment if the treatment option fails. He also advises against any program beginning with the very toughest kids, because they can demoralize the staff in a short term. He seems to have a thorough understanding of staffing dynamics.

Realistically, we cannot hope to raise the necessary funds for a Center-point-type approach. It is prohibitively expensive. Neither can we place juveniles there. It is worthwhile as a model for further study of the staffing problems and staff-patient relations problems which would need to be overcome in starting a program if the county decided to do so. Mrozak would be a valuable source of guidance, and it would be wise to maintain communications with him to this end.

EDUCATIONAL PROGRAMS

These programs are essentially residential schools with a structure that has a therapeutic emphasis and a staff that includes therapists. The educational plans are individually prepared and designed in such a way that failure is almost impossible, but appears possible to the youth. It is used as the focus of the child's life, and takes his mind off his problems in order to direct his energy in productive directions. Drugs may be used; various forms of disciplinary procedures are employed to control behavior, including special secure wards, isolation rooms, and corporal punishment. These placements are generally

used for youths who are at risk but have not yet committed a serious crime, and in many cases they are used for status offenders who are placed there by their parents. They all create highly structured environments. There is often a religious element to the programs. This is one of the first treatment models used with delinquents, and continues to be a favorite with juvenile court judges.

I visited three of these: the Provo Canyon School in Provo, Utah; the Devereaux Foundation in California and Texas; and New Pride in Denver, Colorado.

Provo Canyon School

P.O. Box 1441
4501 North University Avenue
Provo, Utah 84601

This school has 143 students, all boys. Fifty-two are paid for by their school districts via Public Law 94-142; 1 was funded by the Indian Tribal Council; the rest are having the costs borne by their parents. The annual tuition is \$19,200, and the average length of stay is 16 months. There are 110 full and part-time staff, including 9 therapists. At the time of my visit, none of the boys were wards of the court, although apparently juvenile court judges have suggested that parents put a boy at Provo Canyon as a voluntary alternative to more severe placement. They are generally out-of-control boys from middle-class backgrounds who have had brushes with the law.

About 90% of the staff is Mormon, which is perhaps a reflection of the surrounding community. Only about 20-30% of the boys are members of the Church of Latter Day Saints. It is not a religious school, although it does encourage the development of the boy's spiritual side in some manner.

The educational experience is the core of Provo Canyon. When a child enters, he is placed in a secure section called the "orientation unit." He is assigned a partner, called a "buddy," a boy who has been there for some time and has developed confidence in the program. This unit is kept in order by several extremely burly guards — there is no other word for it — whose presence is necessary because the boys are often rebellious at first. I spoke with one boy who had just been admitted a few days previously. He told me that he would escape at his first opportunity because he hated the place. His buddy patiently explained that he might never like the place, but that he would soon stop hating it and see that he needed it. The advice fell on deaf ears.

As the boy adjusts to the inevitability of his stay there, he is moved into the "open-door" unit and assigned a living space which he shares with several other boys. He begins to get into an individualized education plan which is to become the focus of his life during his stay.

It is set up so that he will succeed in spite of himself. The kids are seen as lacking in self-worth, and it is felt that they must have some immediate success in order to begin to build self-confidence. They are then set up in daily sessions

with a psychotherapist which gradually taper off as time goes by. The aim is to get the boy "hooked" on the therapist at once, and family therapy may be done as well.

There is a behavior modification component as well. There are four "levels," each of which has different privileges. Only level four boys are allowed off the grounds without supervision. There is no formal group therapy, but it is felt that the structured group living experience fills that need. To a large extent the boys govern themselves, according to rules set by the adults. The aim is for them to learn values and confrontation skills, as well as the use of freedom.

The only form of discipline now used regularly is "standing," which is exactly what it sounds like. It is measured in hours depending on the severity of the offense.

If the program is successful, the boy should gradually increase his self-esteem, learn awareness of his methods of dealing with people, and become more productive.

There was a time when Provo Canyon took large numbers of severely delinquent boys. Jack L. Williams, one of the three owners of the school and director of its residential aspect, said that it was necessary to keep their number at 10-25% of the total population. If it rose above that, "it's not treatment, it's custodial care." They begin to form into groups and compete to see who can do the most to disrupt the program. He added that they cannot be admitted in large numbers simultaneously, but must be brought in individually, so that each new entrant sees a few models to guide his behavior.

As the school is doing well, they do not feel the need to accept the more hard-core youths. However, it is not ruled out for the future. There were apparently a few boys there with fairly severe criminal activity in their backgrounds, although I did not find the population generally to be particularly formidable.

Dr. Eugene Thorne, a law school graduate and psychologist, is another of the school's three directors. We discussed at great length the school's lawsuit brought by the ACLU, which cost the school a great deal in legal fees and resulted in some minor changes in procedure. The suit was brought by the ACLU on behalf of two boys who ran away from the school. It attacked the school for alleged civil rights violations based on certain practices. These included the "hair dance," a restraint hold in which the boy's hair and arm were grasped; the use of the polygraph to examine boys returning from visits home, in order to determine whether they had drugs with them (Thorne said this obviated the need to search them); the practice of having parents make a list of people from whom the boys could receive mail and screening out all the rest; the "standing" practice; and the use of a "time-out," or isolation, room.

A four-week trial resulted in a unanimous verdict in favor of the school. However, the judge imposed some sanctions of his own. The school was not able to use the polygraph, had to limit its mail-opening to particular cases, and was forbidden to use the time-out room except in cases of actual physical

violence. This raises many questions regarding the power of the bench to insert itself into a treatment process; these rulings were being appealed at the time of my visit. It also raises questions concerning the rights of parents to place their children in schools, and their freedom from government interference in that process.

Provo Canyon is a fine school, and has a record of success. Some 82% of all its graduates for the past 9 years are still straight, according to their statistics. It may be that San Diego will want to place certain youth there in the future. If this is the case, there are jurisdictional matters to be resolved, which could be hampered by the consequences of the lawsuit, but it may be resolved in the near future. It would be wise to place younger teenagers there, rather than the more hardened 16 and 17-year-olds. The school is not a secure facility — it is just a school. With a younger boy, the chances of success at Provo Canyon appear quite high.

Most of the problems occur upon leaving. The school is a total institution and one staff member pointed out that "leaving is like pulling the cord on a life-support system." The school likes to keep boys until they graduate from high school in order to keep them away from the dangers of the public schools. If this is done, they sometimes re-enter society gradually by living with a staff member for six to eight weeks in the same kind of structure with gradually increasing privileges. Staff members indicated that this re-entry period is the area where the school has most room to improve. In this they are no different than most other programs.

New Pride

1437 High Street, Denver, Colorado 80218

This program is one of those of which the federal government is so proud that it has been designated a "demonstration program" — in other words, one for which the federal government will fund imitations. It is supported by federal funds to the tune of about \$500,000 per year, which is augmented by \$280,000 in state money. It has about forty staff, and at the time of my visit was servicing about 80 youths. It is set up to serve 150 per year.

This is a nonresidential diversion program (with which New Pride "coordinates behavioral objectives.") The kids live in their own homes or group homes for the most part, but not at New Pride. The program gets them jobs through the simple method of paying their salary for three months if an employer will hire them. This may seem a good deal for the employer, but he or she takes substantial risks, as most of these kids have never held a job for more than two weeks, according to Al Lung, one of their employment specialists. He felt that their success was indicated by the fact that many of their kids have held jobs for up to two months after coming to New Pride. Recently the program has begun to employ its kids on New Pride construction projects.

In addition to finding jobs for them, New Pride provides diagnostic, counseling, and educational services. Some clients attend public school under

intensive supervision. Others attend the New Pride Alternative School, which has recently graduated from federal funding to state funding. It is designed to build the kids' confidence slowly by providing some structure, no confrontation, lots of compliments, individualized lesson plans, and creating a supportive atmosphere. (As one staffer put it, the message is, "We care about you, and so should you.")

This in many ways is like programs which emerged during the 1960's, when professionals were trying to find ways to make people like themselves by *giving* them self-esteem instead of making it possible for them to earn it. The atmosphere at the New Pride school was unruly and very boisterous, although basically friendly. There is considerable absenteeism and pot-smoking on the grounds. One incident of the latter occurred while I was there. The staff, which appeared to be composed largely of young white females, was reluctant to draw any hard and fast lines of conduct. This is understandable when one considers that the New Pride kids are multiple offenders, tough street kids, mostly black, many of whom would be in jail if not for the program. Many were physically intimidating, and felt free to exhibit verbal aggression with other residents. The program appears to offer few, if any, role models for these youths.

Despite the loose atmosphere, those close to the program feel it is worthwhile. It enjoys a good reputation among the judicial community in Denver. This may be because it keeps the kids out of trouble during the period when they are most at risk. Whether it produces long-term character changes is doubtful, in my opinion. New Pride has never done a longitudinal evaluation of itself, so they were unable to give me any information on their real success rate.

It appears that this program aims to support the kid's ego rather than challenge him. For example, the school does not use grades, but basically rewards any performance. It was described by Peggy Lore, one of New Pride's administrators, as having three unique characteristics. First, the treatment, employment, and educational programs are tailored to the individual client. Second, all the program elements are used for every client so that "we are working with the needs of the total child." Third, the staffing and organization form what they characterize as a "management and process model" as opposed to a treatment model. It has, she said, no particular philosophy, but many unspoken parameters. The focal point of this process is client interest.

I do not recommend that San Diego move in the direction of creating a copy of New Pride. It seemed to me like a sort of day care center for delinquents. This is an idea which may have some merit, as noted above; however it does not appear to address the particular needs of the San Diego courts.

The Devereaux Foundation

P.O. Box 1079, Santa Barbara, California 93102
P.O. Box 2666, Victoria, Texas 77901

This chain of residential schools was founded in 1912. It is based in Pennsylvania and has schools in six other states. It accepts children and young adults as well as adolescents, and concentrates on those with emotional or mental handicaps. Nationwide, it has 1800 residents. Its student body is much more diverse than that of most other treatment programs, as it includes the retarded and other learning-disabled people, along with character-disordered delinquents.

The Santa Barbara program is notable for what it once was. There was a time when it accepted large numbers of severely delinquent kids, many from San Diego. It had boys and girls on the same campus, which is just north of Santa Barbara proper in a very beautiful location. There was an effective behavior modification program at the time. The program ran into public relations problems when residents continually ran off the open campus and hitchhiked into town. No major incidents were recounted to me, but it points up the difficulties of managing this sort of program near an urban area. It is difficult to say much more about this program as it has now become primarily a center for treating and vocationally educating the learning disabled. This is not the population with which we are concerned.

The reason for the change in emphasis is also instructive. According to Carol Purich, it was a matter of funding. When Proposition 13 passed, the county funds which had been used to place delinquents there dried up. P.L. 94-142 funds seemed to be a more secure source of revenue, so the school began to emphasize special education needs.

Ms. Purich supplied me with material on the Lodge Unit, which in 1978 was composed of 36 emotionally disturbed and/or delinquent boys ranging in age from 11 to 16. They were broken into four groups, or "cottages," based upon the level of their "accountability." It was a combination of psychiatric and behavior modification treatment, and was apparently successful with most youths, except those with severe, chronic behavioral problems dating back to preschool years, and those who were actively psychotic.

The Texas program, which is located in a very rural area, is also getting out of the delinquent business, although it continues to accept delinquents from San Diego and other places. Thomas K. Porter, its director, has worked previously in a Devereaux school which consisted of 85% character disorders. He said they were the most difficult kids to run a program for, especially in an open setting. (Both Santa Barbara and Victoria offer minimal restraint — no fences, little to prevent runaways except the lack of any place to go.)

He feels that changes in the atmosphere surrounding child care have made this particular kind of youth harder to treat. "You have to document everything. You can't restrain kids. You have to ask him to return if he runs away." He feels the only remedy for this is to keep the program completely open to inspection and to remain in constant contact with parents.

The Texas program has 180 students, of which 18 are character disorders. There are 185 to 190 staff. The fee for services varies from \$45 to \$75 per day depending on the individual resident's needs.

I was allowed to sit in on an intake interview in which several staff sat down with a probation officer from Florida who had flown in a child for placement. The analysis of the child, his family, and his needs were extremely thorough and free of the dogmatic pigeonholing sometimes seen. I later met and talked with the child and watched some of his initial adjustment to the program.

Delinquents are often taken on a trial basis for up to three months. This is necessary to avoid disrupting the program and wasting money on a placement which may be inappropriate. After the intake, an initial treatment plan is developed and revised as necessary. Presently, residents can sign out of Devereaux in 96 hours if they desire. This is apparently a rare occurrence.

The educational program itself is exceptionally good. The classes are small and lesson plans are highly individualized and highly structured — to the point of having daily plans. Education can be provided for kindergarten through high school. There is also vocational education, including an auto shop and other manual arts provisions.

The atmosphere is supportive but disciplined, and there is a quiet room option as well as the use of drugs for extreme cases. There are, in other words, some teeth to the rules at Devereaux.

The program rates behavior in a particular way. Over the years an item known as the Devereaux Behavior Rating Scale has been developed, which has been adopted by other organizations. It is used as a yardstick for gauging a student's progress.

The theory of Devereaux is not unusual. It is a simple concept of "structuring of controlled experiences within a dynamically oriented, psychotherapeutically directed environment." Its main function is to bring the child's behavior under control if it is a problem, and then prepare the child to move on to college or a vocation. However, in practice it is quite a sophisticated program, and one which has proven itself over many years. It remains a treatment option for San Diego youths. However, in view of the expressed desire to cut down on character-disordered youth in favor of the learning disabled, the county needs to think about making other options available as well.

ADVENTURE EXPERIENCE PROGRAMS

The two programs of this description discussed here reflect an approach to delinquency which relies on challenging the youth physically and mentally. It contains the element of stress and requires mental and physical discipline. Initially, it breaks down the narcissistic self-image of the youth by showing him his inadequacy in the face of the new challenge. Over time he or she comes to a new sense of self-confidence as hurdles are mastered. This should result in authentic pride, and eliminate the need to oppress others in order to feel strong. These programs also rely heavily on role models in the form of program leaders. These people may be seen by the youths as "Supermen" and they may encourage that characterization.

One program which was not visited has used this approach. It is the

well-known Outward Bound program. The two which were visited have little in common with each other except the elements described above, and are in fact radically different from each other in many ways. However, they both have at their core the overriding element of presenting the youth with a physical challenge or adventure, and are therefore discussed in this section. They are Jim Wilson's Southwest Martial Arts Association, of San Diego, and VisionQuest, located in Arizona.

Southwest Martial Arts Association

c/o James A. Wilson, Attorney at Law
P. O. Box 85028
San Diego, California 92138

Jim Wilson is a fifth-degree black belt in the form of Korean karate known as Tae Kwon Do, as well as an attorney who sometimes acts as a Judge Pro Tem in the San Diego Juvenile Court. He is one of the principals in this karate association and runs several classes which are held at local YMCA's. Judge G. Dennis Adams has placed several hard-core offenders in Wilson's class as a last-ditch effort to avoid sending them to CYA. Adams, who visited the program several times, felt that Wilson had done remarkably well with kids nobody else had been able to deal with.

I visited the program. It was held at the Jackie Robinson YMCA in Southeast San Diego. Nearly all the students were black, as is Wilson, and it was immediately evident that he is a very strong role model for the youths. In fact, it is a sort of charismatic leadership of the Superman variety. His physical skills are truly exceptional, and he has a very strong personality. In addition to teaching martial arts to the students, he lectures them on the subject of character, behavior, self-image, values, and interpersonal relationships. He is clearly interested in character development, and the martial arts instruction is the vehicle for that goal.

The class consisted of about thirty students. Most were black male teenagers, several of whom were pointed out to me as court-referred delinquents. Two of them are among the best students in the class. They appeared completely dedicated to the program. I spoke with them and found them polite and self-confident. There were several older female students who participate in only the exercise portion of the class; there were also several white male students.

The class began with an extremely vigorous session of stretching, calisthenics, and running. This lasted nearly an hour and left most of the students seemingly exhausted. This was followed by several minutes of silent meditation. Then began the martial arts instruction. Wilson demonstrated various techniques on some of the students, and when he did so he actually struck the students. On several occasions he clearly hurt students to the point of making them cry out in pain, and twice students were thrown to the floor so hard that they were stunned and had difficulty getting up. This was followed by the students practicing the techniques. Later each rank of students — they wear

the customary colored belts — demonstrated various *katas*, or forms, and Wilson criticized and complimented them in turn. The conclusion was a lecture by Wilson on behavior and character, followed by several minutes of silent meditation.

The class lasted a total of nearly four hours, and was one of the most strenuous workouts I have ever seen. It is hard mentally as well as physically, because it is a para-military-type of class in which the slightest lapse in concentration, the most minute sign of disrespect, the least breach of the rules, is immediately punished, generally by some number of pushups which must be done perfectly. The students must make constant signs of respect and obedience to Wilson. This is part of the treatment element of the program, as I see it. Wilson fills the need many of these kids, especially the delinquents, have for a strong male figure in their lives with whom they can identify. By living up to his expectations, which are very high, they earn a great deal of self-esteem as well as self-discipline. This latter element is something Wilson emphasizes heavily.

Despite the apparent harshness of the instruction, after class Wilson socializes with the class in a very affectionate way. They all seemed to idolize him, but he is approachable nonetheless. Nobody seemed to mind the punches, kicks, and throws they suffered at his hands, as it was all taken in the spirit of toughening them up for competition and self-defense.

It appears that Wilson has had some success with the kids Judge Adams has sent him. It would be instructive to track their later behavior to determine the long-term results of the program. However, it appears to instill pride and develop character along socially acceptable lines, while directing physical, aggressive energy in an appropriate direction.

Because of the nature of the program, probably not all delinquents can be referred there. Those who are just not physically capable are bound to be placed at an insurmountable disadvantage. But for those who have adequate physical abilities, it can be a good program. It goes beyond the old police approach of placing wayward boys in boxing programs, something which worked to greater or lesser degrees for generations of boxers who might have had a lifetime of trouble with the law had it not been for their involvement in boxing. Wilson surpasses this idea by blending in oriental mysticism, meditation and moral instruction.

It is possible that Wilson's program could be expanded into a full-blown residential school, along the lines of a karate commune. This would require a good deal of work and research into licensing and administration, and without Wilson's charismatic leadership would probably not work. However, it is an option that could be looked into.

Two potential problems would have to be addressed. First, how would charges of child abuse be avoided, given the extremely litigious nature of the juvenile placement area? Second, how would the community feel about the idea of training juvenile delinquents to be more adept at inflicting harm with their hands and feet?

The first question is one for which I have no ready answer. The second is answered by pointing out that even after a great deal of instruction, one of these kids is no more dangerous than he would be with a gun, a knife, or a pipe. These items are in plentiful supply. By the time he becomes adept, he would have ideally developed to the point where he is no longer dangerous anyway. However, the public might well see the situation differently.

This program is probably worth using in the future, and the possibility of expanding it into a school could be explored, but it must be examined very carefully in order to avoid running afoul of the law or public opinion.

VisionQuest

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It should be noted at the outset that there is a great deal more to VisionQuest (henceforth VQ) than adventure. However, because outdoor adventure experiences, set within a framework of Plains Indian philosophy, are at the core of the program, it is not entirely unfair to classify it in this manner. It is certainly not primarily a hospital or a school. To characterize it as a therapeutic community might not be entirely inappropriate, except that it is not a system in which the kids are expected to control each other. The adults are clearly in control. Consequently, the therapeutic community label does not really fit, despite the community nature of the program.

There have been so many descriptions of VisionQuest, in print and on national television, that one more is really not necessary. Furthermore, it has been evaluated, probed, and analyzed so many times that to do so again seems equally superfluous. However, to analyze and describe in the context of what San Diego needs is worthwhile, and that is the aim of this treatment. I will go into it in greater detail than with the other programs for reasons which will be explained.

VQ is not one institution, but many, and they include several different kinds of programs. The idea is to provide a continuum of placements designed to make up a single treatment process and address the needs of individual youth at each stage of their treatment. The first component is the diagnostic and evaluation center, where the youth can be examined and some treatment approach developed. The second is the "impact" programs, which include the celebrated Wagon Train (which is just that), the Wilderness Camp, and the temporarily discontinued OceanQuest. The third component is HomeQuest, a program which supervises youth intensely while they live at home. The fourth is a chain of group homes. The fifth is a set of learning centers. Children generally pass through most of the program elements.

Most of VQ's operations are located in Arizona, but they have branches in Pennsylvania and Denver, Colorado. Its approximately 250 kids include boys and girls ranging in age from 13 to 18, with a few exceptions. They include substantial numbers of black, Chicano, and American-Indian kids. Nearly all of them are court referrals, most are fairly serious offenders, and a substantial number are hard-core delinquents. The bulk of them are clearly CYA mate-

rial, or on the road to being such. There are some lesser offenders mixed in with them.

The staff consists of about 250 people. They are chosen for desire to work with children, ability to communicate with them, and emotional consistency and resiliency rather than on the basis of formal training, although many of them are trained in the youth service or correctional field. There is enormous dedication and camaraderie among the core staff; to them, it is not a job, but a lifestyle. Normal working hours, conditions, and benefits are clearly not their primary motivations.

The cost of the program is \$77 per day for all programs except HomeQuest, which costs \$44 per day. The average length of stay is 14 to 16 months. VQ has been evaluated numerous times, by itself, by private consultants and by state agencies. Estimates of its success rate range between 60% and 80%.

VQ specializes in the hard-to-place delinquent; that is, the youth who has been shuffled around through a series of placements and has managed to beat them all by failing at them. VQ sees this as one way of reinforcing the youth's "failure identity," and refuses to let him fail. He is forced to succeed in spite of himself. Early in the program the youth discovers that it is impossible for him to intimidate the staff. They simply will not be backed down, and they back each other up immediately and vociferously in their dealings with youths.

As a condition to entry, the youth is required to make a one-year "commitment." This is his promise that he will not run away, will participate in one or more wilderness experiences, will abstain from drugs, alcohol and sex while in the program, and will work on understanding and resolving his "issues," or his problems with himself and his family.

This commitment, he or she soon discovers, is to be taken seriously, because the staff takes it seriously and they will hold the youth to it very strictly. Violation of this commitment is the basis for "confrontation." This consists of "getting in the kid's face" and loudly telling him that he has let himself down. These confrontations are "stalked" by the staff; that is, they develop a sense for the kids and can tell when some transgression is about to occur. When it does, they are ready *en masse* to bring it to a head. They do not let go of the problem until it comes to resolution through emotional catharsis on the part of the youth. If he becomes physically violent, he is "taken down" and "held." These are exactly what they sound like. Holding is the only physical restraint used at VQ. As the problem is resolved, the holding becomes affectionate and supportive. No form of physical punishment is permitted at VQ.

Confrontation is not the extent of VQ's therapy process, but merely the beginning of it. The youth is introduced at once to the VQ philosophy which is a combination of psychotherapeutic principles, parenting skills, and common sense, all clothed in the mysticism of Plains Indians philosophy. It is appealing to the youths because of its sense of justice and mythological quality.

It has several basic concepts. The first and most important is that of the rite of passage from childhood to adulthood. The youth is expected to earn his

adulthood by keeping his commitment, and the significant steps along the way are marked with formal, elaborate ceremonies, using symbolism and other trappings, which the youths come to take very seriously and which mean a great deal to them.

A second concept is that of the circularity of all things. This concept is one of universal harmony and is engrained in the youth in order to cut through the sense of internal and external conflict which has marred his or her life. They are encouraged to see all sides of issues and to learn to understand and respect others.

The third concept is that of adult responsibility for teaching children how to behave. The Senior Professional Staff are called "Bishkewalakai." The term means "dog soldiers," and refers to those Indian warriors who occupied the perimeter of an encampment and took responsibility for the safety of those on the inside. In VQ, it means that minority of the staff which is allowed to touch the youths, to initiate confrontation; in other words, those who set the boundaries for behavior and are responsible for developing in the youth the capacity for understanding himself and growing. It is very important that they be perceived as fair and honest.

There are no formalized, scheduled therapy sessions, and no token economies or other behavior modification techniques employed at VQ. However, there are elements of individual therapy, group encounter, and behavior modification in the VQ process. The program is based on the capacity of the staff to respond spontaneously and appropriately to a desire on the part of the youth to communicate with someone.

The fundamental assumption VQ makes about youth is that they are out of control, afraid of that lack of control, and in search of some means of gaining it. Therefore, they test the limits of everyone they deal with, looking for someone who will lay down limits for their behavior, give them the guidance they need to understand themselves, and point them in a new direction. This is the primary goal in VQ. It is intended to bring the youth into a state of self-control and enhanced self-esteem.

Typically, a youth will be sent out on one of the impact programs soon after his entry into VQ. This is designed to break through his defenses and open up the issues with which he is expected to deal. This lasts several months. The most highly-publicized of these is the Wagon Train, which might take a child halfway across the country in a covered wagon. There are also wilderness survival experiences for all VQ kids prior to their rate of passage. The OceanQuest program, which put the youth at sea in small boats, was temporarily suspended following a tragic accident in which a VQ boat was caught in a storm, which resulted in the deaths of two staff and seven youths. A Coast Guard investigation cleared VQ of any negligence in the incident, although lawsuits by some family members are pending.

If the impact program has served its purpose, the youth is returned to a group home or his family. He may attend a VQ learning center or go to

school, and will very likely participate in the HomeQuest, or "street" program.

The HomeQuest program is a system of extremely intensive supervision of the youth's life to make him live up to his commitment on the outside. While he has been away on an impact program, VQ has been working with his family, if that is possible. Parents are expected to make certain commitments regarding their contribution to the child's situation, and if they do not live up to them, the child may be placed in a group home. I traveled with a VQ HomeQuest worker in Globe, Arizona, as he made his nightly rounds. I watched as he confronted several youths with their minor failures, such as failing to call him when they were supposed to, inadequate school work, and other things. He appeared to have an extremely intimate understanding of each youth and his activities, and had good communication with them. One of the youths I observed was terminated on HomeQuest for his continued failure to live up to expectations, and was scheduled to go back out to an impact program. Occurrences of this sort happen from time to time, and are not viewed as failure as long as the youth remains in the program.

I also sat in on a meeting at which a girl was graduated from VQ. The women who had been working with her sat down with her family and the girl and discussed the progress she had made over her time in VQ. It was an open, frank discussion in which the family participated actively in talking about the girl, the family problems, and the relationships involved. The girl felt that she would make it outside of VQ, but she discussed the possible pitfalls, such as peer pressure, candidly.

I spent some time at the wagon camp, which was preparing a wagon train for departure, and talked with several youth. Throughout the days I spent at VQ, I was allowed to roam freely and talk with anyone. This is unusual, and indicates that there are no secrets or taboo areas in the program. I found the youth to be involved in the program; I did not see or talk with anyone who was just "doing time." This is very unusual, especially to one who has seen the "television therapy" used at many state institutions.

The kids I spoke with displayed considerable insight into themselves, and generally seemed to find the program meaningful, and even exciting. Several asked me to describe the other programs I was visiting. When I did, they responded with comments to the effect that they didn't sound very interesting. I take that to mean that VQ is successful in getting the youth's attention and in getting him or her involved. Morale is high among the kids, and they seem to feel good about what they are doing.

Morale is also high among the staff. There is a high turnover in the first year of employment, when staff are coming to grips with whether they want to make the substantial commitment VQ requires of them. If they do not, they leave early. If they do, they stay for a long time and eventually end up as Senior Professional Staff. VQ's Chairman of the Board, Bob Burton, told me that they do not have a problem with staff "burnout." Those who stay on apparently do not become disillusioned. This may relate to the intense mutual

support they lend to each other, and to VQ's policy of shifting staff around to different assignments from time to time.

VQ is two private, profit-making corporations, with a Board of Directors. It has grown very rapidly since its inception in 1973, and has received enormous national publicity as the subject of a one-hour CBS Reports documentary, a spot on 60 Minutes, an upcoming story in Life Magazine, a cover story in Parade, and numerous other articles.

It has also been charged with child abuse because of its practice of touching the youths. To my knowledge, none of these charges has been sustained in any court, although VisionQuest has fired staff for misconduct in this area.

There have also been squabbles with state bureaucracies over the unconventional nature of the program, and particularly the Wagon Train. It is hard to apply licensing standards to an outdoor adventure experience. However, it should be noted that based on what I saw, the evaluations I have read (which are numerous), and the conversations I had with youth who are veterans of one or more Wagon Trains, I am convinced that the children are cared for in a careful, conscientious, and safe manner while in the impact programs. They are fed well, encouraged to stay in touch with their families, protected from the elements, kept clean, and given a great deal of very personalized attention. These experiences mean a great deal to the children; they take them very seriously; and no one should doubt that they really do see the program as a rite of passage into adulthood.

VQ has also run into problems because of the confrontive nature of the therapy. This is an issue which has not been settled in professional or academic literature in any case, so it is pointless to jump to any conclusions here. However, it should be remembered that when you are essentially forcing therapy on someone, as we do in therapeutic correctional placements, there is enormous resistance to change, or even to admit that the problem lies "not in the stars, but in ourselves." This is a problem even for people who enter therapy voluntarily. Therefore, I am inclined to believe that confrontation in some form is necessary for many of these youths, especially the hard-core. It should not be abusive, nor should it be the extent of the program; but in VQ it is not abusive, nor is it all they have to offer, but merely the beginning of a therapeutic process which is really very sophisticated and supportive. It has attracted attention because it is so visible, while the more tender and nurturing side of the program consistently escapes notice. Being at the program in person results in seeing the more comprehensive nature of this form of child care.

It should also be noted that VQ is hardly alone in using confrontation, as any visitor to Elan, Delancey Street, and other innovative programs can attest. It is a treatment technique, and like any other must be used properly; the manner in which it is used is the point, rather than the mere fact of its use.

I have gone into more detail in discussing VQ because I feel that it holds promise for the youth with which we have to deal. The program is capable of accepting San Diego youth, and is willing to do so. Because I was favorably

impressed with the program and because it was available to us as a treatment option, I encouraged Judge G. Dennis Adams to visit the program. He did so, as did consultant Robert A. Roos, and both were likewise encouraged by what they saw. Adams placed one youth in VQ on a trial basis, and as of this writing he is doing well. Had it not been for this program, he would have been sent to the California Youth Authority.

I recommend that his progress be monitored, and that steps be taken to look further into ways in which VQ can be used as a treatment option for larger numbers of San Diego youth.

ANALYSIS AND CONCLUSION

The purpose of this project is to provide the San Diego Juvenile Court with information needed to make some decisions with regard to future placement of severely delinquent youth. All of the programs visited have merit, and were selected for that reason; however not all are equally useful from the particular perspective employed in view of our goals. They are discussed in that spirit; one can see the value of a program while pointing out that it may not suit our purposes.

There were other programs which were not visited for one reason or another which would have been worth the trip. It was not possible to visit the Circle S because of the legal difficulties it is experiencing. The Family Advocacy Council in Maine is reputed to be a very fine innovative family therapy program which is enjoying notable success with hard-to-place juveniles. Outward Bound has taken court-referred juveniles and has been successful with them.

The programs examined do represent a substantial range of the most effective treatment programs in this country. They are of widely different types and reflect the diversity one finds in the child care field. This diversity exists because there is no one right way of doing things. All the programs studied in this project are sincere efforts to do something which everyone acknowledges to be extremely difficult, for which everyone would like an easy answer, and for which such an answer is not forthcoming.

Because there are no easy answers, and because the existing alternatives are inadequate, it is recommended that the court move in the direction of developing a network of relatively small, private programs which can be placed in competition with each other for public funds. These programs should be innovative in nature, and should be able to guarantee the safety of the public and the youths. In short, they should be safe, creative alternatives to incarceration.

If this is done, over time it will become clear which programs are effective with the youths the court sends them. Initially, it is recommended that the court begin to explore a relationship with the VisionQuest program. The Provo Canyon School may also be in a position to accept San Diego youths, and this should be explored as well. The relationship with the Devereaux

Foundation is worthwhile, and it is recommended that this relationship be continued.

Looking at the business of treating the kind of offender with which we are concerned, certain common issues emerge in the course of examining these programs. They may serve as guidelines for the future in the choice of programs, or as things to implement should the court take steps to create a new program of its own.

The first theme which emerges is that of innovation and unorthodoxy. Some obviously effective programs are employing treatment methods which are hard to classify and which arouse controversy because they are unusual. The defunct Circle S was put out of business because the treatment methods employed were labeled as bizarre and even abusive. Provo Canyon School was besieged by the ACLU over its methods of treatment. Elan has been set upon by attorneys and at least one state agency over its methods. VisionQuest has been repeatedly attacked by certain government agencies and some members of the local press.

In analyzing the significance of the charges that are leveled against these programs, it is important to keep in mind that these are all private programs which are in competition with public agencies for funds and influence. Much of the harassment may be territorial in nature, unrelated to the issue of effectiveness in child care. Where public agencies become involved in a battle for "turf," they betray their public trust.

Where private attorneys are involved, it is important to distinguish between a genuine concern for one's client and a sort of "Crusader Rabbit" fanaticism. After all, the distinguishing feature of juvenile justice is its dedication to the welfare of the youth. Attorneys need to examine their motivations very carefully when representing delinquents. It is too easy to hide one's confusion behind a cloak of advocacy; the responsibility of a good defense attorney extends beyond "getting my guy off" when a juvenile is involved.

The moral of all this is simply that innovation is necessary, but that it brings with it a certain amount of controversy, and it would be well to be prepared for that.

In order to deal with this, it is recommended that a board of citizens be involved with the court in devising and implementing alternative programs. Involvement of the community can bring the necessary openness to this process which can deflate unjustified criticism before it derails a good program. On the other hand, citizen vigilance will prevent real abuses of children's rights from becoming a problem, and will help to weed out the good programs from the bad. Some risk is involved in the process of seeking alternatives, after all — but given the cost of not searching, the risk seems well worth the potential gains.

A second issue which emerges is that of how a program should blend the authority, discipline and structure that a youth needs in his life, with the nurturing he also requires. All the programs fall somewhere on a continuum

in this respect. In my judgment, for example, New Pride is too far in the direction of being purely supportive and nurturing, and lacks sufficient discipline. Others, such as the Southwest Martial Arts Association, rely very heavily on discipline and do not provide a great deal of nurturance. It appears that both elements are absolutely necessary, and this particular issue must be addressed in any discussion of future programs.

This raises the third issue, which is to what degree the youth should be directly confronted with the reality of their situation and the need for change. Confrontation breeds controversy. Whenever an adult raises his voice and criticizes a youth, people will get excited about it, because they identify with the child and feel sorry for him or her. I am convinced that confrontation is necessary with most of the youths the juvenile court is ready to place in CYA, because they are relatively hard-core and have proven themselves to be resistant to treatment. As these are the youths with which we are concerned, I am inclined to believe that confrontive programs are appropriate. The critical question is *how* the confrontation is handled; how well it is controlled by the staff, how it is resolved, and how it is used to introduce self-awareness and lead to character development in a total program. So, there may be confrontation, but there must be nurturing and support as well.

A fourth issue is that of family therapy. There is little point in spending large amounts of money to make a child mentally healthy, and then return him or her to a sick family. I was told repeatedly in the course of this trip that many delinquents come from families which have been disturbed for several generations. Unless this chain is broken, there is reduced hope for the individual child, let alone the rest of the family and the future generations it is to breed. When the existence of a disturbed child tells us that there is a family in need of help and re-education, it is a wasted opportunity if we treat only the child. It would be wise to address efforts at treating the family while the child is away. VisionQuest does this effectively, and so do other programs. This is something to be considered very seriously in any program developed here in San Diego.

This relates to a fifth issue — that of aftercare, or re-entry. There needs to be some gradual reintroduction of the child into mainstream society, his family, the school system, a job, or whatever life he returns to. Too many otherwise fine programs make no provision for this, because it is very difficult to do. After all, what can a school in Utah or Maine do to make it easy for a youth to return to a normal life in San Diego? Greater coordination of local agencies with out-of-state placements might accomplish this; it would require special efforts by the juvenile court to accomplish this. New Pride has apparently managed to accomplish this with local group homes in the Denver area; it would be more difficult across state lines, but it should be explored. If a local program is developed, this kind of coordination would be easier to achieve.

A sixth issue is that of mythology or mystique. It appears that juveniles are attracted and motivated by mystical elements in a program. Elan has its eight-point philosophy; VisionQuest has its Plains Indian folklore; others,

such as the Southwest Martial Arts Association, provide a charismatic leader of the "Superman" variety. These things are meaningful to all of us, but especially when we are young. It is recommended that elements such as this be included in whatever programs are implemented here.

This raises the seventh issue, that of leadership. Synanon and Centerpoint suffered from leadership failures. Synanon is a shining example of what to avoid: a dictatorial power structure in which all power resides in a single person surrounded by a rubber-stamp board of directors. This situation, which is common and probably effective as an organization gets off the ground, leads to serious problems as it grows. Power may begin to corrupt or derange the autocratic leader. There may be a period of total disorganization when he or she vanishes from the scene. Inefficiency may set in as the job of leadership becomes too great for one person to handle. Those on lower echelons may become discouraged and disillusioned. On the other hand, Centerpoint ran into temporary difficulties when it gave too much power to the youths, which also demoralized the staff. Both of these extremes should be avoided. The adults must make the rules of the program, although the youths may administer them, as in Elan. Among the adults, power should not be concentrated in the hands of one person. Elan, Provo Canyon, and Delancey Street have leadership shared equally by two or three people whose skills complement each other's. This may be the ideal situation.

The eighth issue is that of staff morale. The "burnout" phenomenon does not seem to be inevitable, although employees in this field often seem to regard it as such. Burnout may be the result of inadequate support by one's fellow workers, as competition eats up goodwill, and of a feeling of ineffectiveness. This latter feeling is probably realistic in many cases. Many programs are not successful, and hopes for them are high. Burned-out people have seen their ideals frustrated by reality. Elan, VisionQuest, Provo Canyon, Devereaux, ISPI workers, and others, do not report the burnout problem. They appear energetic and positive. It may be that burned-out staff are the mark of a failing program. There is no reason to continue supporting a failing program, so where burnout occurs the court might consider moving away from that program. Where it is a public program, this is more difficult, but may be necessary if the court's goals are to be accomplished.

The ninth issue is that of security. People debate over how secure a program should be. The CAT Center, ISPI, and Centerpoint are secure. VisionQuest, Devereaux, and Provo Canyon are open. All open programs have runaways from time to time, but all secure programs have occasional escapes. The question is whether we want to support secure programs or not. A rural program may not need such security. In an urban area the danger to the public may justify secure surroundings for serious offenders. On the other hand, it might be more sensible to conclude that if a child is so dangerous that he simply must be locked up to protect society, then he should be committed to CYA. If he is not quite that far gone and we feel he is worth trying to do something constructive with, it may be preferable to place him in a nonsecure

program where he can test the limits of his freedom and learn how to control himself within a set of rules — in short, to learn to use his freedom responsibly. For this reason, it is recommended that the court consider programs of the open variety rather than closed, secure programs. The latter are much more expensive, and do not appear worthwhile except for the extremely dangerous offender, who should be in CYA.

This brings up the tenth issue, that of the proper composition of offenders for a program. Experienced program directors at Devereaux, VisionQuest, Centerpoint, Provo Canyon and CAT Center were unanimous in saying that a program composed entirely of character-disordered, sociopathic youth is almost certainly doomed to failure from the outset unless it is secure, heavily staffed, and able to pick and choose who it will admit and when they will be admitted. They all felt that a nonsecure program must reflect a wider range of youth. There should be a mixture of street delinquents and psychologically disturbed youth, for example, in the same program with a smaller number of character-disordered youth. This mixture will vary widely from time to time, and it is delicate. It must be monitored closely by program administrators; otherwise, control breaks down and the strain on the staff becomes so great that they lose their morale. There must therefore be discretion with all programs involved in this county's future network, so that they can refuse certain youth. Imposing a no-decline policy could destroy good programs; they need control over the mix of juveniles in their populations at all times.

The eleventh issue is that of replication. It is recommended that the court encourage the existence of many innovative programs in this area. Some of the existing programs, such as VisionQuest, may be in a position to locate operations here in the near future. If a climate favorable to innovative programs is created, local people may begin to replicate some or all of the elements of successful programs from outside. Over time, a true partnership between the public and private sectors could thrive here in San Diego. This would make San Diego a model community in the treatment and prevention of juvenile delinquency. It will require work and careful coordination by the court, but it could be accomplished.

This raises the twelfth issue; that is funding. This is a matter so complicated that it can be dealt with only briefly here. The county should look into the availability of P.L. 94-142 funds for character-disordered youth. This point was raised by several program directors, who insist that this special education money can be used for such individuals. It is also recommended that the citizen board mentioned earlier be used in the collection of public and private funds from sources other than local government. Local governments are severely burdened presently and cannot be expected to shoulder the burden of preventing and treating delinquency on their own. Citizen support and private effort, especially directed at the corporate sector and major foundations, may lead to new sources of revenue. Innovation in this specific area may pay large dividends.

These twelve issues are only a few of the areas of concern in the child care

field. We could go on discussing them indefinitely. Amid all this discussion of problems and issues, it is well to remember that ultimately there are no real answers — no absolutes. A functioning program is like a living organism, and depends on many things for its existence. However, this should not discourage innovators. There is no substitute for the willingness to try to solve a problem, even at the risk of failure. There is no doubt that the need to move ahead exists; to stay where we are will have great social and economic costs. It may be that the best single thing to do at this point is revive the spirit of innovation, the willingness to try in the child care field. This, after all, is what we are trying to develop in our delinquents. Why should we neglect it in the institutions charged with their care?

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CHAPTER IV

International Variations in the Treatment of Serious Juvenile Delinquency

By EVAN MCKENZIE and ROBERT A. ROOS

SUMMARY

This article consists of abstracts of questionnaires received from 48 international authorities in the field of juvenile delinquency, each of whom responded to eleven questions concerning the treatment of serious delinquents in his or her country. Thirty-seven countries are represented, including states in the Americas, Western and Eastern Europe, the Middle East, Asia, Africa, and Australia and New Zealand.

INTRODUCTION

Articles with grandiose titles customarily begin with lengthy disclaimers, the purpose of which is to absolve the author of responsibility for writing something that lives up to the promise of the title. This one is no exception to that rule.

This work has a limited purpose, which is to present some basic data regarding the treatment of serious juvenile offenders worldwide. It is not intended to provide encyclopedic information regarding the legal frameworks and treatment institutions involved with the juvenile court systems of all these countries. Efforts along those lines, in the form of extensive case studies, have been undertaken by scholars native to the countries they study. (See, for example, *Juvenile Justice: An International Survey* United Nations Social Defence Research Institute, Rome, Italy, February 1976.) It is also not intended to reduce the enormous variety of juvenile law and procedure to a few simple general statements. At this point the study of comparative legal institutions has not reached the level of sophistication at which that would be a worthwhile undertaking.

Our primary purpose is simply to inform juvenile court judges of how things are done elsewhere. The cost of finding this out firsthand is prohibitively high; flying all over the world is obviously beyond any judge's travel budget, and gathering the materials and data we have obtained would be too much trouble for any busy judge. Self-education on this subject, then, is not likely to take place.

Other researchers may find our work useful in that it may stimulate ideas for further study. Policy-makers may likewise find some kernels of promise in the approaches used in other countries.

The value of this sort of material to judges, is related to the widespread consensus that our approach to juvenile justice can benefit from improvement. Many people have become disillusioned with the entire process. Judges deal with the enormous disparity between the high ideals of juvenile court and its often disappointing performance in certain predictable ways.

For example, there are places where a position on the juvenile court bench is regarded as a training ground for bigger and better things; a place where the daily frustrations are something to be endured while "doing one's time" in kiddy court.

Some judges who remain on the juvenile court bench for many years deal with their sense of frustration by retreating into a protective shell of cynicism. They may lose faith in the rehabilitative goal of the court and along with it goes the enjoyment the job should bring.

Still others protect themselves from feelings of failure and disillusionment by adopting an extreme ideological stance toward the youths who pass through their courts. Some become extremely liberal and treat even the most hardened violent offender as if he were simply a wayward youth. Others see their role as that of crime-stopper, and try to sweep the streets. Judges who have taken this easy out will respond to criticism with well-rationalized ideological speeches which lump all offenders together, as if they were all alike.

All these protective devices insulate the judge from having to deal with the extremely difficult task of individualized treatment for each offender. This carries with it the necessity for the judge to believe that rehabilitation is possible, to know enough about the available treatment options to make a reasonable placement, and to be willing to accept responsibility for the results of the placement.

It may be that looking at how other countries conceptualize delinquency and deal with it may lend a new perspective to our thinking. It may allow judges to stand back and see our assumptions in a new light, and perhaps rethink some of them. It may revitalize debate over some issues. It may also be paradoxically encouraging for us to see how many countries are having the same problems we are.

METHOD

This article consists of summaries and analysis of responses received from 48 judges, scholars, attorneys, and other professionals in 36 countries in answer to a questionnaire concerned with the treatment of serious juvenile delinquents in these countries.

The questionnaire consists of eleven questions. All were open-ended; that is, there were no multiple choice questions, and all required the respondent to

write out his or her own answer. We encouraged them to attach additional pages, to extend their responses beyond the questions we asked and even rewrite the questionnaire, if they felt other matters were important. Many did that.

Several hundred of these questionnaires were mailed. We secured lists of likely participants from our contacts with the United Nations, through inquiries to American universities, and by securing lists of law-related departments at foreign universities. We have had personal contact with many of the participants at the United Nations Meeting of Experts on Juvenile Justice, held in 1979 at the University of Nevada, Reno, and at the 1980 United Nations Crime Congress, held in Caracas, Venezuela. A number of respondents sent us copies of penal codes, administrative regulations, journal articles, and other printed material. All told, it takes up one entire bookshelf. It is far too voluminous to include in anything less than a separate book. Consequently, this article will confine itself to the questionnaires.

The questionnaire generated a good deal of data, since all questions were open-ended. The initial questions asked respondents whether the term "hard-core delinquent," or some similar term, was in use in their country, and how serious a problem hard-core delinquency was for them, including statistical data regarding the demographic characteristics of that population of offenders. They were then asked what, in their country, were believed to be the causes of serious delinquency. The responses to these questions were interesting, but the focus of this article is on the remainder of the questions, all of which dealt with dispositional alternatives for the serious, or hard-core, juvenile delinquent.

The respondents were asked whether juvenile delinquents were treated differently if they were believed to be mentally ill. They were asked how, in general terms, serious delinquents were dealt with; were they treated, rehabilitated, re-educated, incarcerated, or dealt with in some other way. Next, the "creaming-off" phenomenon was described, and the respondents were asked whether it occurs in their country. This practice was described in detail in our article "The Mentally-Disordered Juvenile Offender: An Inquiry Into the Treatment of the Kids Nobody Wants." (See Chapter 3) Last, the respondents were asked what, in their opinion, would be the ideal method for dealing with the problem of serious delinquency. The responses to these dispositional questions will form the basis for this article.

As noted earlier, hundreds of questionnaires were mailed out and many follow-up letters sent over a two-year period from 1979 to 1981. In some cases lengthy letters responding to all or many of the questions in essay form — represent all of the continents, and many of the leading figures in this field from around the world. For our purposes here, the respondents are grouped by geographical area, and their responses analyzed accordingly. The geographic areas are The Americas, Western Europe, Australia and New Zealand, Eastern Europe, the Middle East, Africa, and Asia.

The Americas

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| 1. Luis Ortiz Quiroga
Attorney | Chile |
| 2. Ana Luisa Prieto
Juvenile Court Judge | Chile |
| 3. V. Lorne Stewart
Juvenile Court Judge | Canada |
| 4. Jose Arthur Rios
Head, Department of Sociology
Catholic University | Brazil |
| 5. Justice Pedro David
Chairman, Department of Sociology
University of New Mexico | Argentina |
| 6. Maria Euginia V. de Baudrit
Professor of Law
University of Costa Rica | Costa Rica |

Luis Quiroga explains that in Chile minors under 16 are exempt from all criminal responsibility, and may only be dealt with in ways which do not deprive them of liberty, such as placement in foster homes. Those over 18 are fully responsible and are adults under the criminal law. Those over 16 but below 18 are also responsible under the general criminal law if they are found to have "discernment" — the capacity to understand the wrongfulness of their behavior — and are treated in the same manner as those over 18. Those without discernment are treated in the same manner as those under 16. The decision concerning the presence or absence of discernment is therefore very important, and the judge makes this determination with the help of psychiatric reports.

These reports would also be used to determine whether the offender is mentally ill to the point of insanity, which would likewise exempt him from the criminal justice system and lead to confinement in a mental health institution. For a minor, such a determination would make a great difference as he would usually continue to live exactly as he did before the crime, due to lack of space in asylums.

If a delinquent is found to have discernment and to be free of mental illness to the point of insanity, he is subject to the following treatment: restriction of liberty (displacement, banishment, removal from one's home town subject to supervision, and exile) deprivation of liberty (prison), and in certain specific cases the death penalty may be applied.

Although the aim of all this is rehabilitation, Quiroga describes this as "merely a pious aim", as

... in our country there are no adequate rehabilitation centers for those accused and/or convicted, with the sole exception of two institutions that receive juvenile delinquents and oblige them to work daily. But their capacity is quite insufficient to receive all prisoners of this class.

Therefore, most are deprived of their liberty, in common prisons, in special sections within them, so that, as far as possible, they do not have contact with more experienced and recidivist criminals.

Quiroga feels that a comprehensive education program reaching into all areas of the young delinquent's life, is the best method to combat delinquency, but feels that Chile's institutional infrastructure is inadequate to the task.

Ana Luisa Prieto confirms Quiroga's bleak picture of Chile's juvenile justice system dispositional alternatives, stating that in general the mental health institutions which will treat juveniles will not take them if they are seriously delinquent. The "creaming-off" phenomenon, she says, occurs in a similar fashion. She says that there is no good system of treatment, rehabilitation, or re-education for serious delinquents.

Jose Arthur Rios of Brazil says that in Brazilian law there is no such thing as a juvenile delinquent. People below 18 are not considered delinquents or criminals. When they are caught after committing crimes, they are brought to special Juvenile Courts, where they may be released to their homes, or "admonished", or sent to "special establishments managed by the National Foundation of Minors' Welfare." Those between 18 and 21 are called "young adults", and can be sent to special prisons. Recidivists are subject to more severe sentences. He adds that only recently, due to rapid urbanization, is Brazil becoming "a crime conscious society", as only since about 1976 or 1977 has the population begun to really feel the impact of crime on their daily lives.

Judge V. Lorne Stewart of Canada states that Canada has special custodial institutions for juvenile offenders who are mentally ill, where they can be sent after special clinical study. Where it is advisable, non-custodial treatment is tried. For serious offenders who are not insane, there is still involvement of the psychiatric profession in arriving at a treatment plan. He feels that the proper approach to treatment overall would be to set up a coordinating body representing all relevant disciplines, with power to act through the government, which could effect a cohesive approach to the problem. He called our attention to the Japanese use of volunteer probation officers — mostly retired people — working with professionals to "make two generations happy."

Justice Pedro David of Argentina (who is also a Professor at the University of New Mexico) says that in his country mentally ill delinquents are "treated differently in the sense that they are committed to mental institutions. However, these institutions are as punishing as the common penitentiary." Seriously delinquent youth "are supposed to be 'treated'. In fact, treatment is far from effective." He believes that the "creaming-off" phenomenon exists in Argentina, and feels that an integrative, interdisciplinary approach with various components is the best approach to the problem.

Maria Eugenia V. de Baudrit of Costa Rica, who spent 12 years as a Juvenile Court Judge in San Jose, explains that juvenile offenders up to 17 years of age are covered by special procedures and treatment laws as "infractors," but are not called delinquents. Juveniles over 17 years of age are called "minor delinquents," and are covered by the penal code with the same

procedure, and within the same system, as adults. She adds that the highest percentage of criminality in Costa Rica is found in the 17 to 22 year age group.

Minors under 17 are examined by an interdisciplinary staff which includes psychiatric representation, whether or not they appear to be mentally ill. The goal with these "infractors" is rehabilitation, or "reintegration." There is an effort made to treat those with serious mental disorders, but facilities are limited, and the public psychiatric facilities are not disposed to take criminal offenders unless with a direct court order. It requires great institutional adjustment and is generally done only for short periods of perhaps one or two months. Those without such disorders are placed with their fathers or "in special institutions."

Minors over 17 are dealt with under the penal code, and are subject to incarceration. They are, however, subject to a determination that they are insane and therefore incapable of criminality. This is not an option for those under 17, for whom the psychiatric evaluation is directed at treatment purposes.

Western Europe

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| 1. Jorg F. Rehberg
Dean, Faculty of Law and Politics
University of Zurich | Switzerland |
| 2. Christian-Nils Robert
Professor of Law
University of Geneva | Switzerland |
| 3. Heather Bugler
Criminal Policy Department
Home Office | England |
| 4. H.J. Kerner
Professor of Law
University of Hamburg | West Germany |
| 5. Armand Mergen
Professor of Law
Johannes Gutenberg University | West Germany |
| 6. J. Selosse
Ministry of Justice | France |
| 7. Georges Uzan
Vice President
Tribunal de Grande Instance de Paris | France |
| 8. C.D. Spinellis
Lecturer, Faculty of Law
University of Athens | Greece |
| 9. Dr. Josine Junger-Tas
Head, Department of Prison, Probation, and Delinquency Research
Ministry of Justice | The Netherlands |

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| 10. Solveig Christensen
Ministry of Social Affairs | Denmark |
| 11. Colette Somerhausen
Director
Center for the Study of Juvenile Delinquency | Belgium |
| 12. Jerzy Sarnecki
National Council for Crime Prevention | Sweden |

Jorg Rehberg of Switzerland explains that in his country all juvenile delinquents must undergo an examination of their personality. In serious cases, that is done by a child psychiatrist. Serious delinquents may be treated by way of punishment, treatment, or re-education, depending upon their personality. There are special treatment programs for mentally ill delinquents, and the "creaming-off" phenomenon is not seen in his country. He feels that the solution to this type of delinquency is to be found in creating specialized institutions for the serious offender.

Christian-Nils Robert, also of Switzerland, agrees for the most part with Rehberg. Both note that for them serious delinquency is not a serious problem, and the existing institutions seem able to cope with it. The mentally ill offender is seen as subject to treatment. Under the Swiss penal code, juvenile offenders are to be educated rather than punished. He does note that there is a lack of mental health institutions specifically for juveniles, so that "some juvenile offenders are put in psychiatric hospitals for adults, where they move around with people who are much more affected than them." His suggestion for dealing with serious delinquency is to try to keep young offenders from entering the criminal justice system, primarily by dealing with them through mental health, educational, or social assistance institutions.

Heather Bugler of England explains that the English system is in flux currently, with a new set of proposals on the subject of juvenile justice set to come into effect during 1982/1983. Presently the courts have power to make hospital or guardianship orders for mentally abnormal juvenile offenders, except for those under 14, for whom there are some restrictions. For those over 14, any supervision order may contain a requirement that the juvenile submit to treatment for his mental condition, but this requires consent by the juvenile. There is provision for psychiatric treatment within the prison and Borstal (training school) systems, and limited psychiatric facilities in youth treatment center and some community homes.

There are several custodial options available for the serious delinquent. For any person under 18 found guilty of murder there is indefinite confinement "during Her Majesty's Pleasure" wherever directed. Likewise, for juveniles guilty of offenses for which adults could receive 14 years imprisonment or more, there is detention for long periods of time. For those aged 17 to 21, imprisonment is available for up to 3 years, but not for those below 17, except as indicated above. Borstal training for periods of 6 months to two years (depending upon executive decision) are available for lesser offenders. There

are also "detention centers" for boys aged 14 to 17, and several detention centers for boys aged 17 to 21.

The new proposals coming into effect in 1982/1983 appear to grant greater discretion to the courts to determine the length of custody in any of the above institutions. The government currently feels that alternatives to incarceration should be used more frequently, including "junior attendance centers," supervision orders of up to three years (which are like our probation), fines, and provisions for the parents to be held responsible for the juvenile offenders' fines. In between custodial and non-custodial care lie the Care Orders, under which parental power is given to a local authority, who may care for the child and restrict his freedom if desired, until he reaches age 18. This order is reviewed every six months. The local authority can place the child with foster parents, place him in a residential treatment program, or leave him with his own parents.

H.J. Kerner, of West Germany, says that in fact most serious delinquents are just incarcerated, although a few institutions provide rehabilitative programs or medical/psychological treatment. A mentally-ill offender may be subject to civil commitment to a mental hospital, if the prosecution chooses not to indict him, or to a criminal trial at the end of which the court may use a hospital commitment order "especially designed for so-called dangerous mentally-ill persons." He explains that treatment in state hospitals is considered not to be satisfactory, a new law which will take effect in 1985 will create new institutions, called "Sociotherapeutic Correctional Centers."

Armand Mergen, also of West Germany, talks in glowing terms of the German system, contending that the rehabilitative aims of the system are generally realized through individualized diagnosis and treatment, and perhaps incarceration for the untreatable offender. He also mentions the "Social-therapeutic" institutions, and explains that in the past psychiatric clinics were reluctant to accept juvenile delinquents who were mentally ill. He maintains that German penal institutions have psychiatric departments, which he feels adequately address the problem.

J. Selosse of France tells us that France has special institutions for "psychopathic" youth, as well as standard psychiatric placements. In general, the serious delinquent may be incarcerated or treated depending upon whether he is considered responsible or not responsible, in the eyes of the law. He explains that there are difficulties in placing dangerous delinquents in treatment programs, which are scarce and overcrowded. Furthermore, health professionals are reluctant to risk disruption of their program where the likelihood of successful treatment is slight.

Georges Uzan, also of France, feels that serious delinquency poses a serious problem to his society. He feels that the educational system is often "rejective" toward them. As for the justice system, he agrees that mental problems may influence the choice of dispositional alternative, but explains that there is a conflict over whether juvenile delinquents should be punished or rehabilitated. Over time, disillusionment has taken hold, particularly among police

and judges. The judges, he feels, often take on an attitude of "resignation." He is of the opinion that prison is chosen as an alternative for some juveniles not because of their crime, but "because of the absence of an adequate structure to receive them."

C.D. Spinellis of Greece explains that under Greek law delinquents between 7 and 17 years of age are called "minor criminals" and those from 13 to 17 designated as "adolescents." The law provides for mitigated punishment or even for adolescent treatment for those between 17 and 21. The code provides for educative measures for all minor criminals, which may include commitment to a state, municipal, community or private training school or to a reformative or correctional institution. In exceptional cases, minors between 7 and 17 may be incarcerated in a special section of an adult prison. The use of special therapeutic measures for the mentally ill or handicapped is not as frequent as it should be, because it is dependent upon the probation officer recognizing the problem, which they often do not, and because the special institutions do not always have space. Where the probation officer recognizes the existence of mental illness, he refers the juvenile to a Child Guidance Clinic for examination by a psychiatrist. This can lead to a special commitment to an institution for mentally ill children or to the State Mental Hospital, which as of the date of the response had no special section for children. This leads to contact with adult mentally disturbed criminals.

Josine Junger-Tas of the Netherlands says that serious delinquents are treated, ". . . although the definition of treatment in this case is unclear; let us say that there is incarceration with more or less explicit efforts to treat according to different theoretical models." For the mentally ill offender there are two possibilities: "special treatment" with psychiatric and psychological help, and "detention at the government's pleasure," which is an indeterminate sentence which implies detention in a psychiatric youth clinic. Most of these institutions are private and can refuse offenders, so ". . . the most serious ones end up in one of our state institutions (of which we have 8 in all against \pm 250 private ones) called 'terminal institutions.'"

Solveig Christensen of Denmark explains that there is no special system of Juvenile Courts in that country. Crimes committed by those below the age of 15 are not punishable, but "measures of care may be taken on the part of the wauthorities to supervise the offender or place him in special institutions. For offenders between 18 and 20, most cases are closed by suspended sentences with the offender placed on probation. It is noted that psychiatric institution-

sig Christensen of Denmark explains that there is no special system of Juvenile Courts in that country. Crimes committed by those below the age of 15 are not punishable, but "measures of care may be taken on the part of the w, outside the prison system are reluctant to accept offenders for security reasons, "but individual problems get solved more or less satisfactorily."

Colette Somerhausen of Belgium says that for those under 18 the commission of a serious offense can result in a commitment to a special juvenile institution. The presence of mental disorder can result in a private psychiatric

placement in a special youth clinic. When the juvenile reaches adulthood, the judge may place the juvenile "at the government's disposal," which can lead to incarceration for up to 25 years.

For those aged 16 to 18, a waiver to adult court is possible, and in case of severe mental illness the offender may be supervised by the psychiatric department of an adult prison. It is noted that "We don't believe that treatment or reeducation gives good results in prison." Many of the psychiatric institutions refuse to deal with serious offenders, who are shuffled from place to place.

Jerry Sarnecki of Sweden says that in his country a person younger than 15 years of age cannot be punished, however serious a crime he has committed. Instead, different kinds of social and psychiatric measures are taken. Those offenders from 15 to 18 years of age can be sent to prison, but this is very unusual. Until recently, there was a special penalty known as juvenile prison for serious crimes committed by those under 15. However, this was abolished. Mentally ill offenders are treated in a different way, up to and including closed psychiatric care.

Australia/New Zealand

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| 1. Lynn Foreman
Deputy Chairman
Criminology Department
University of Melbourne | Australia |
| 2. Dr. John A. Seymour
Senior Criminologist
Australian Institute of Criminology | Australia |
| 3. Ian S. Cox
Director-General
Department of Community Welfare
South Australia | Australia |
| 4. Ian Dean
Justice Division
Attorney-General's Department | Australia |
| 5. Heather Manning
Psychiatrist Superintendent
Children's Court Clinic
Victoria | Australia |
| 6. Dr. J. Kraus
Senior Research Consultant
Department of Youth and Community Services
New South Wales | Australia |
| 7. John Jensen
Director of Research
Department of Social Welfare | New Zealand |

8. Ron Lovell New Zealand
 Joint Committee on Young Offenders

Lynn Foreman relates that the Australian juvenile justice system is currently under close examination with the possibility of major changes in some states a distinct possibility. In Victoria, the insanity defense is only available in indictable cases, which means that except in rare cases it is not seen in juvenile court. However, mental illness "might be taken into account" before sentencing in Children's Courts. In general, background presentence reports are used in sentencing delinquents, and a range of dispositions from "adjournment" to committal to a Youth Training Centre is available. However, Foreman notes that "I doubt whether in reality the disposition of the Court is anything but punitive." Few institutional rehabilitation programs "seem to have any positive impact."

Psychiatric treatment may be offered to certain juvenile offenders guilty of serious crimes. This is done in an institutional setting. Most of these institutions are run by the state, so there is no "creaming off."

Foreman would prefer that Children's Court waive all jurisdiction for recidivist offenders between 14 and 17, so that their cases would be heard in adult court. Foreman feels that efforts at redirection should occur only at an early point in the juvenile's development, and that thereafter the protection of society should become a more significant concern.

John Seymour emphasizes the role of the Welfare authorities in the treatment of serious offenders, especially if they are dealt with by the Children's Court. If they are waived to adult court, the chance of imprisonment is increased. For juveniles committed to mental institutions, he said that there are "no special provisions and I suspect that facilities are poor."

Ian Cox of South Australia notes that in his territory there has been "an upsurge in interest towards the more punitive methods of punishment." In his view, the psychiatric services available within the Youth Training Centres are for the mildly retarded and mentally ill. Youths under 16 requiring more serious attention would be sent to a psychiatric hospital, or if over 16 could be transferred for care to a prison. This latter option has been used only once in the last 8 years. Cox says that most serious offenders are placed back in the community under some sort of supervision, including attendance at community treatment project centres specializing in educational rehabilitation or social group work, with activities related to the families of the youths. He estimates that 90% of all youth offenders are treated in the community.

Ian Deane confirmed that the law in Australian states is in a state of flux with respect to juveniles. He noted the recent change in South Australia whereby habitual or serious offenders can be committed to adult court for trial on application of the Attorney General. Other jurisdictions give this discretion to the Children's Court. In none of the states may Children's Court deal with a case of homicide. Despite Australia's concern with treatment, and its move toward community treatment, there has recently been increasing disenchantment with the "soft" or "benevolent" approach to juvenile offend-

ers. He noted that nonetheless psychiatrists are invariably called in to examine juveniles who commit serious crimes, and that "psychologists and other counsellors" have a heavy input into the juvenile correctional system.

Heather Manning explains that the Australian Youth Training Centres are usually run by social workers or psychologists, so great emphasis is placed on full psychosocial assessment, medical and/or psychiatric treatment where appropriate, school and/or work, improvement of social skills, family and group therapy and counselling, and re-socialization. These facilities will deal with neurotic or personality-disordered youth, who can be treated by a consulting psychiatrist. However, specialized child and adolescent psychiatric facilities do not like to take "acting-out, seriously disturbed teenage offenders." Even adult mental hospitals do not like to accept psychopathic individuals, and return them to the correctional system as soon as possible.

Dr. J. Kraus felt that the "creaming off" phenomenon described by Manning does not occur in Australia, and in answer to the inquiry regarding his view of the ideal method for dealing with the problem of serious delinquency, replied "I wish I knew!"

John Jensen of New Zealand explains that the most serious offenders below age 17 would be sent to training centers, where the emphasis is on education and rehabilitation. Those over 17 are more likely to be sentenced to borstal training, which are more incarceration-oriented. Those below 17 who are serious, recidivist offenders are placed under the guardianship of the Department of Social Welfare. This department may then make the placement decision, which could be a foster home, psychiatric treatment or a training center. Comparatively few are placed in psychiatric treatment as more than "difficulties of personal and social adjustment" are required for a diagnosis of mental illness. He says that "Only a very small proportion of juvenile offenders are placed in long-stay institutions, and none of these institutions have incarceration as their primary function. Furthermore, only a small proportion of juvenile offenders are perceived as being mentally disordered, although many are regarded as experiencing problems of adjustment." He notes the interesting problem of lack of employment and career opportunities for young Maories and Polynesians.

Ron Lovell of New Zealand says that "No institutional facility exists solely for young offenders who are seriously mentally disturbed." Offenders who are of such a nature will be sent to a general psychiatric hospital for treatment.

The Department of Social Welfare operates a number of institutions for juvenile offenders. Since "a protracted, or serious, offending career" is necessary before the New Zealand justice system will order incarceration, many of the young people who enter the Department's facilities do have some form of psychological and/or emotional problems.

Eastern Europe

1. Professor Alenka Selih
 Institute of Criminology
 Pravna Fakulteta

Yugoslavia

2. Dr. Jozsef Vigh
Professor of Criminology

Hungary

Alenka Selih of Yugoslavia indicates that the Yugoslav penal law for delinquents is based upon the idea of reeducation and this holds true even for hard-core delinquents. Mentally ill offenders, if they are considered dangerous, are sent to specialized medical institutions for treatment. Those with personality problems of lesser degree are sent to educational institutions with special staff. Currently, non-institutional services are being expanded. Selih expects that the number of institutionalized juveniles will not increase greatly in the future, but that those who are institutionalized will be in need of much more specialized treatment, because they will have a greater incidence of severe personality problems. Selih notes that only 820 juveniles were sent to all kinds of institutions by the courts in Yugoslavia in 1976, the most recent year for which data were available as of his writing.

Jozsef Vigh of Hungary notes that in 1978 six percent of the total of juveniles convicted, of which there were 5512, were sentenced to terms of over 1 year. He notes that the gypsy population, while it constitutes only three percent of the total population of Hungary, is responsible for 15-16% of the total crime. Among juveniles, 34.7% of the robberies and a large but undetermined percentage of the murders were committed by youth of gypsy ethnicity.

A number of changes were enacted in the 1978 Hungarian Criminal Code. Recidivist juveniles who commit serious crimes are normally sentenced to correctional homes or straight imprisonment in special prisons for young offenders, where there is some effort to re-educate the youth. There is also an obligatory after-care system which is aimed at keeping the youth employed and out of trouble.

Mental disorder would ordinarily be relevant insofar as it tends to exclude the juvenile from criminal responsibility, and could lead to compulsory medical/psychiatric treatment. However, the old code contained a provision which required that moderately disordered youths be placed in an institute for mentally defective children regardless of the seriousness of their crimes. This provision "caused serious difficulties to the authorities," and under the new code this type of offender may be put on probation, sent to a correctional home, or sent to prison.

Middle East

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| 1. Dr. Ahmed Khalifa
Chairman — Executive Board
National Center for Social and Criminological Research | Egypt |
| 2. Dr. M. Amir
Director, Faculty of Law
Institute of Criminology
The Hebrew University of Jerusalem | Israel |

3. Dr. Yacob Hayat
Faculty of Law and Sharia
University of Kuwait

Kuwait

Ahmed Khalifa tells us that in Egypt judges have discretionary power to place serious delinquents below 15 years of age in special juvenile institutions for rehabilitation and education. If the juvenile is between 15 and 18, the judge may either place him in those institutions or order his imprisonment. There are also special institutions for those who are mentally ill, and Khalifa says that there is no reluctance on their part to take the serious offenders. He feels that serious delinquency — that is, juveniles committing serious or repetitive criminal acts — is not a major problem in Egypt, and that only about 1.4% to 1.9% of all delinquents are of this description.

M. Amir of Israel feels that such delinquency is a serious problem for his country because of the lack of facilities available for them. He says there is only one closed institution with about 42 inmates, and a Juvenile Prison with another 45-50. For girls, there are 2 institutions with about 38-45 wards, most of whom are prostitutes with drug problems. Because of this lack of facilities, the mentally disordered juvenile will probably be simply locked up. Only 10-15 cases are hospitalized. As Amir puts it, "Rehabilitation is a token effort." He emphasizes that 85-90% of these serious offenders are of "Oriental," or Moslem, origin, and also of low social class, and he feels that cultural conflict is a major contributing factor in the Israeli delinquency problem.

Yacob Hayati says that in Kuwait delinquency is not yet a serious problem, but is becoming more serious because of the influence of "bad movies and violent TV serials and the dissolution of the family." Recidivist offenders are ordinarily treated and rehabilitated, but youths from 14 to 18 who commit crimes punishable by the death penalty may be imprisoned for up to 15 years. There are psychiatric hospitals for those who are legally insane and therefore not responsible for their acts.

Africa

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| 1. Shem Ong'ondo
Faculty of Law
University of Nairobi | Kenya |
| 2. Kwame Frimpong
Faculty of Law
University of Ghana | Ghana |
| 3. Dr. E.H. Ofori-Amankwah
Faculty of Law
Ahmadu Bello University | Nigeria |
| 4. Eric Paul Kibuka
Professor and Head of Sociology Department
Makerere University | Uganda |

5. Dr. Marcus Jones Sierra Leone
 Faculty of Economics and Social Studies
 University of Sierra Leona

Shem Ong'ondo of Kenya indicates that unemployment is a major problem even for university graduates, so that for those without such education, especially in the 15-18 age group, unemployment is a major factor in the crime rate. He also points to rapid urbanization with its concomitant migration and family breakdown. He sees serious delinquency as a "very serious problem."

Facilities for serious offenders, include probation, children's homes, special schools, Borstal institutions, and mental institutions for the legally insane. However, the mental institutions are rapidly becoming overcrowded.

Kwame Frimpong of Ghana feels that delinquency is not a serious problem in his country. There are three main dispositional alternatives in Ghana. First, the juvenile may be placed in the custody of the parent or guardian with the requirement that this person provide some security for the youth's good behavior. This is for less-serious offenders. Second, the judge may place the youth on probation, usually for six months. He is then under the supervision of a probation officer. This is for offenders whose crimes are "serious but not alarming." Third, there is the use of borstal institutions or an Industrial School. This is for those who require long-term treatment. Youths found to be incorrigible during this third type of treatment are removed and imprisoned. However, no juvenile under the age of fifteen can be imprisoned. The mentally ill offender is only separated from others when his mental condition is very serious, in which case he is transferred to a mental institution. Frimpong would like to see a better system for screening out the mentally disordered than is currently in practice.

E.H. Ofori-Amankwah of Nigeria also feels that serious delinquency is a minor problem for his country, with most offenses being petty. Offenders under 16 are sent to Approved Schools, or treatment centers if there is serious mental illness. No child above 16 can be sent to an Approved School, and those from 16 to 21 are likely candidates for Borstal Institutions. The very serious offender of over 17 can be incarcerated, but this is a last resort. Clear cases of mental abnormality are "very few indeed," because families tend to care for their mentally ill relatives "to protect the family image." Those who find their way into the criminal justice system will not be treated in prisons, because all such facilities are in mental hospitals. Since they are all state sponsored, there is no "creaming-off" problem.

E.P. Kibuka of Uganda prefaced his response with a warning that as of December, 1979 "... for the past 8 or 9 years the enforcement of law, the administration of justice and the penal institutions have been operating in a fashion which is very difficult to describe." This was due to the bizarre behavior of the many police agencies, especially the "ruthless and murderous" Public Safety Unit. Records were either not kept or kept in such a way that nobody had access to them. The entire system was in a state of massive review and reorganization under the new government as of his writing.

Kibuka says that serious delinquency is a very serious problem which is compounded by the general instability which followed the "liberation war." Most serious offenders are simply incarcerated, and the mentally ill are treated no differently unless certified as mentally deranged. Facilities to deal with them are very limited. In the entire country there is only one Boys Approved School, one Boys Reformatory (or Borstal) School, and one Young Persons Prison. He would like to see a change toward greater equality in the social distribution of power, and modernization of the criminal justice system.

Marcus Jones of Sierra Leone feels that serious delinquency "is becoming a menace and increasing in its intensity." Incarceration is the most normal consequence, although there are mental institutions for the mentally-ill offender. He points to economic considerations and family breakdown as major contributing factors.

Asia

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| 1. Wei Juming
All-China Youth Federation | People's Republic of China |
| 2. Professor Xia Shuzhang
Secretary General
Academic Committee
Zhongshan University | People's Republic of China |
| 3. Koichi Kikuta
Professor of Law
Meiji University | Japan |
| 4. Dr. Rance Pui-Leung Lee
Director, Social Research Centre
Senior Lecturer in Sociology
The Chinese University of Hong Kong | Hong Kong |
| 5. Apirat Petchsiri
Faculty of Law
Chulalongkorn University | Thailand |
| 6. Professor Lee Kwang-Kyu
Department of Anthropology
College of Social Sciences
Seoul National University | Korea |
| 7. Professor Hsien Rin, M.D.
Department of Psychiatry
School of Medicine
Taiwan National University | Taiwan |
| 8. Dr. Jhy-mou Shih
Professor of Law
Dean of Graduate School of Law
National Chengchi University | Taiwan |

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| 9. | Professor Molly Cheang
Faculty of Law
University of Singapore | Singapore |
| 10. | John Doraisamy
Lecturer, Faculty of Education
University of Malaya | Malaysia |
| 11. | Boerma Boerhan
H.M. Asril
Universitas Andalas | Indonesia |
| 12. | N.K. Sohoni
S.D. Gokhale
International Council on Social Welfare | India |

Wei Juming of China explains that before the Cultural Revolution "the spiritual outlook and morality of young people was good," and that the juvenile crime rate was fairly low.

However, the ten years of calamity (1966-1976) caused by Lin Biao and the Gang of Four left China's national economy badly devastated, its fine standards of social behavior jeopardized, and the minds of many young people poisoned, with a resultant increase of juvenile delinquents . . . the new generation was caught in the ten-year turmoil right at a stage of physical and intellectual growth as well as of life outlook formation. Their normal study, work and life were sabotaged. They were instigated by Lin Biao, Jiang Qing counter-revolutionary cliques to go after anarchism, beating, smashing and looting. Schools and factories were closed down, youngsters were engaged in so-called "rebellion." Some were turned into "illiterate hooligans" engrossed with a reversed concept of honor and dishonor as well as right and wrong. A small number of them took the path of committing crimes.

Juming explains that the principal methods for dealing with and reforming juvenile delinquents in China are as follows. The first attempt at re-education occurs in "assistance and guidance groups" and "groups of well-wishers." These are composed of members of the neighborhood committee, people's police, parents and retired cadres, veteran workers and teachers. These groups "give juvenile delinquents ideological education, help them with their studies and technical training, and assist them in leading a normal life." Statistics from 55 Chinese cities show that 41,323 of these groups have been set up and over 200,000 people have engaged in this work. He feels that most of the delinquents dealt with in this manner have "mended their ways."

The second method is "Work and Study Schools," which are operated by educational departments. The youths are admitted as students, not criminals, although they have committed crimes. Again they are given ideological education, and the terms may last six months to one year. The training is oriented toward construction and technical training.

The third method is the "Reformatories," which are for those between 13 and 18 who have committed serious crimes and with whom all else has failed. This involves a work-study program with special teachers and administrators.

Some offenders — less than 19% of the total of all delinquents — are "punished in accordance with law." The basic age of responsibility is 16, and 14-16 year olds are only held responsible for the most serious offenses. There are provisions for mitigated penalties for those 14-18. In some cases, parents are legally obligated to subject the youth to discipline.

He notes that "There are few young psychotics in China, let alone those who commit crimes due to their uncontrollable psychotic problems. In Beijing there are more than 3 million youth, and yet in 1979 only 36 were treated in Anding Mental Hospital for violent or self-destructive behavior. There is no criminal liability for this kind of behavior, but the family is legally obligated to care for the person.

Juming notes that the Chinese approach combines the use of government-operated institutions with re-education "by the masses from different sectors of society." This is a fundamentally different approach than that used in most Western nations, where the reliance is almost exclusively upon professionals in the child care field.

Xia Shuzhang, also of China, notes that the rate of delinquency is much higher in cities than in the villages, and notes as well the much higher rate of male than female involvement. He also stresses the corrupting influence of the turmoil which accompanied the Cultural Revolution, and says that previously, during the 1950's and 1960's, there had been "a great decrease in juvenile delinquency."

Koichi Kikuta of Japan says that ideally it would be desirable to treat serious delinquents in mental hospitals, but he says this is very difficult, so that long-term detention is sometimes the method used, in accordance with terms decided by the Juvenile Court. People are sometimes committed under the Mental Hygiene Law for insanity after committing serious crimes, but he says that it is very rare for the court to decide that the person is not legally responsible for his acts. Remarkably, the incidence of murder, burglary, and rape has been diminishing steadily since 1955, among the juvenile population. Most offenders are fond of committing larceny, totalling 57.3% of total juvenile arrests for 1978, as opposed to 9.2% for violent offenses.

Rance Lee and Miss Agnes Ng of Hong Kong report that the rate of serious delinquency is increasing rapidly, and is regarded as a serious problem. They explain that their system involves probation, training schools, detention centers, and sometimes prison for serious offenders, and that recently the government and voluntary agencies have been organizing special leisure activities for youth, especially during the summer. There are few facilities for treating the mentally-ill in Hong Kong, and they are not sufficient. In practice, unless an offender's mental illness is extremely serious, there is no special treatment for him or her. The definition of mental illness is "rather narrow and rigid," which accounts for the fact that the mentally-ill do not constitute a major factor in juvenile delinquent populations.

Apirat Petchsiri of Thailand says that there is a variety of correctional institutions for serious juvenile offenders, in which they are incarcerated.

There are mental institutions for seriously disturbed offenders, and especially for those who are legally not responsible for their acts by virtue of their illness, but facilities are scarce and "the process of 'creaming off' is employed to secure the better utilization of scarce resources."

Lee Kwang-Kyu of Korea sees delinquency as a serious problem, especially because it receives so much attention from the mass media. Serious offenders are incarcerated in juvenile jails. As he puts it "Mental illness is not treated seriously in our country." He attributes much violent crime to the effect of alcohol upon young men.

Hsien Rin of Taiwan says that there are first and second degree sentences for the most serious crimes committed by juveniles, but "we never heard of a case which was dealt with at this level." However, he knows of one case which ended in a sentence of eight years incarceration. Efforts at reformation are usually three year commitments or less, and there is no procedure for examination of juveniles by psychiatrists. The mentally disordered offender may be placed back with parents or other relatives, and psychiatrists are not asked to participate officially with the court. If the family cannot afford medical treatment for the youth, if they refuse, or if there is no relative who can handle the problem, the youth will be incarcerated. He notes that there is no psychiatric care program even for adult offenders who are mentally ill and commit serious crimes.

Dr. Jhy-mou Shih, also of Taiwan, says the exact opposite. He maintains that "The delinquents who are believed to be mentally ill will be sent to a proper institution to undergo medical treatment, whereas the others will be sent to a reformatory or put on probation."

Molly Cheang, of Singapore, says that probation, reformatory training and imprisonment are all available as dispositional alternatives, with the end goal of rehabilitation. There are also clinics of a psychological or psychiatric nature to which mentally ill offenders can be referred. There is, she says, no problem with these institutions refusing to accept the serious offender. She noted that "Increased trends are noticeable in respect of offences associated with the use of violence (robbery, murder), the use of weapons (possession of weapons, gang clash/fight) and drug abuse (drug offence)." Overall, 58% of all juvenile offenses are committed against property.

John Doraisamy of Malaysia sees a steady increase in serious delinquency, due to "(a) An increasingly irrelevant school system; (b) Easy and frequent divorces among Muslims; (c) Rapid urbanization and poor housing conditions; (d) Desperation to obtain money for buying drugs." Serious delinquents are ". . . re-educated officially, but this type of 're-education' is still in its infancy." There are institutions which will take the mentally-disordered offender, but "'Creaming off' and putting the serious offenders 'out of circulation' seems to be done too mechanically."

Boerma Boerhan and H.M. Asril of Indonesia feel that crime is on the rise in their country due to indecent literature, TV, and films "mostly from abroad," bad examples set by leading members of society, a tendency toward

immorality and lack of religious sentiment, and weakness on the part of judges and other authority figures. However, as yet they do not see young people committing the most serious crimes, which are so far the province of adults. As they put it, "Serious delinquents are usually punished. Rehabilitation and re-education are given in the penitentiaries." There are mental institutions which will accept criminal offenders, but ". . . we are not so quick in qualifying a delinquent as a mentally ill person," in part because of the lack of sophisticated diagnostic tools, and in part because of lack of space in the institutions.

N.K. Sohoni and S.D. Gohkale of India say that juvenile delinquency is emerging as a serious problem in Indian cities, and especially in the "neo-urban areas." This is seen as the product of rapid industrialization and urbanization, which cause breakdown of the family system and societal values. Poverty, they believe, is another contributing factor.

They indicate that although individualized treatment is the ideal aspired to, studies reveal that this is not taking place due to the high volume of cases. There is no significant use of mental health facilities in delinquency treatment.

Even existing services are under-utilized on account of insufficient appreciation of this vital treatment mode. On the whole, it is observed that only extreme and overt cases of inappropriate behaviour or nervous breakdown, and mental retardation are considered worthy of psychiatric and psychological help. The law makes no separate provision for apprehension and commitment of mentally retarded children, who are therefore indiscriminately absorbed into the system. The real problem for such children arises upon their completion of detention. On account of their handicap, they become exposed to exploitation by anti-social groups.

However, when an offender finds his way to a mental institution he will not be rejected, as "no officially designated institution has the right to refuse admission to cases assigned to them."

CONCLUSION

As noted in the introduction to this work, it is not our intention to be either encyclopedic or globally general. Our intent has been to inform, to stimulate, and to encourage, and we hope that end has been achieved.

The astute reader may have noted the influence of the colonial experience in Westernizing terminology and penal philosophy in Third World countries. One fertile area for inquiry might be the extent to which these Western concepts (such as mental illness) which are held by the political and professional elites of these states, are in conflict with indigenous ways of life and thought of the masses. There also appear to be wide disparities, even within the same general area, with respect to the severity of delinquency. This is noted particularly in Africa. Variations in explanations for delinquent behavior are seen as well, particularly in Asia, where Western scapegoats such as poverty and family breakdown are rivalled by lack of religious fervor and exposure to violent sensual motion pictures as explanatory factors.

It is also interesting to note the extremes. In Scandinavia, and particularly in Sweden, the treatment/rehabilitation ideal is embraced to such a degree that the concept of punishing juvenile delinquents is nonexistent in professional terminology. In other states, punishment is the norm, and rehabilitation is regarded as a luxury to which one can not, or should not, realistically aspire. The reasons for this may be philosophical or economic or some combination of the two.

There are also wide variations in the availability of, and confidence in, mental health treatment as a method of dealing with delinquency. We in the United States are accustomed to making fine distinctions among the various classifications of mental illness, and to discussing the appropriate treatments for each. Elsewhere the problem is finding a space in any institution where there will be even some minimal concern with the delinquent's personality.

We in the West may be able to learn in some respects from Third World nations, where reliance is placed on the family and the community to a greater degree. It may be that the state is unable to shoulder the burden of acting *in loco parentis* without more direct participation by the institutions primarily responsible for raising children and transmitting values to them.

It would be fruitful to continue to explore the area of international comparative research. Judges and other professionals, as well as scholars, will benefit from more case studies, such as those produced by the United Nations, as well as from efforts at generalization. Perhaps we may all benefit from realizing the degree to which all nations face similar problems in balancing the right of society to be protected against the right of a child to have a reasonable chance at living a normal life. In grappling with the deeply troubling moral questions of juvenile court, no one is alone.

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