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WHY DO CRIMINALS DESIST?

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The Michigan-based Center for Strength-Based Strategies has acted as a clearinghouse of strength-based approaches for the justice field. The October 2011 issue of *The IACFP Newsletter* caught our eye as it posed the question, “Why Do Criminals Offend?” In an attempt to provide some strength-based contrast, this subsequent feature turns tables to ask, “Why Do Criminals Go Straight?” It is important to note there is an emerging group in our field who has moved their interests and examination from offense-related factors to desistance-focused issues. One is grounded in a deficit-based, problem-solving paradigm while the other inquiry takes a form that is strength-based and solution-focused. While both seek to reduce or eliminate risk, how one goes about this is truly the “difference that makes a difference.” Much is at stake, not the least to be the future of criminal justice research, policy and programming.



MIKE CLARK

Several interesting points are offered from those concerned with what it takes to “go straight” and how we can assist that process:

Policy can impede practice. It’s extremely difficult to motivate offenders by concentrating on eliminating or reducing risk factors. People don’t seek “less risk”

– they seek tangible goods and real-life benefits of desisting from crime. Risk-reduction is attractive to policy makers and the general public, yet it proves cumbersome at the micro-practice level. A sole-focus on only reducing risk-factors is unlikely to promote a full-range of elements needed to go straight. Treatment would be better served to ask “What do offenders want?” rather than ascertaining what they “need” – coming to these conclusions without offender input. We are mindful of the adage, “Stay close to the client’s views of the problems and possible routes to solutions, since it is he or she who will be asked to do the necessary changing.” In a thorough review of desistance theory, Ward and Maruna (2007) caution that simply seeking to increase the well-being of a prisoner or a probationer without regard for his or her level of risk may well result in a happy but dangerous individual. Yet these strength-based authors are just as quick to add that attempting to manage an individual’s risk without concern for increasing opportunities and well-being—that take into account their personal preferences—could lead to punitive practices and a defiant or disengaged person.

The offender – and the environment they inhabit – are the true engines to change. Over the past decade, a large volume of clinical research has determined the “zip code” of behavior change resides within and around the

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INTERNATIONAL ASSOCIATION FOR CORRECTIONAL & FORENSIC PSYCHOLOGY

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WHY DO CRIMINALS DESIST? *(Continued from page 1)*

offender—not emanating from our treatment models (Duncan, Miller, Wampold, & Hubble, 2010). Models are important. They are the crucible-container, that is, they hold what we do, giving form and organization to what we deliver. They are influential if we believe in them—and more importantly—if we can get the offender to believe in them as well. Yet new meta-analyses find we over-emphasize the importance of our models while de-emphasizing or ignoring the offender’s contribution to change. Numerous studies find it’s the offender that “Works” and their contribution is large enough for a national call to have been made to rephrase “What Works?” to “Who Works?”

Treatment models have no power “on the shelf” – that is, they have no power in-and-of themselves that the offender does not imbue with power. Yet treatment models are not the problem—the problem is valuing our views over the views of those we work with. We need to access the offender and better gather and employ their views to find out what it might take for them to “go straight.” We had 5 decades of looking at crime from our point of view. A different and possibly a more helpful perspective would be to look at motivation to change from the offenders’ point of view. Consider an assignment to help a group of

electricians in organizing and improving their work at a large industrial job site. Common sense would dictate that one start with interviewing the electricians and valuing what they report and what ideas they proffer. Would not the same sensibilities prevail if we were speaking about how to help offenders improve?

Desistance and “going straight” generally occurs away from the criminal justice professional. Stephen Farrall, a UK criminologist has turned in one of the largest studies of probation services to date. Notable about Farrall’s (2002) study was a large sample size and the fact that rather than the customary one-sided perspective from the agency and/or officer’s viewpoint, the probationer’s perspectives were also sought and included in this study. How troubling for our field that the inclusion of probationer’s/parolee’s perspectives could be thought of as “innovative.” Farrall (2002) made the case that probationers or parolees only spend approximately half of 1% of their life with their supervising officers or treatment providers. With so low a figure, it’s not difficult to see that the “venue of change” does not reside in what the courts or professional extend to the offender. Farrall (2002) concluded that when people under court supervision were able to desist from crime and “go straight” it had much more to do with their own actions and their own circumstances rather than a result of the officer’s actions. Desistance-focused approaches are better-suited to help staff engage offenders and appreciate the importance of what goes on outside of their buildings.

Relationships are the door – motivation is the key. Engagement and positive relationships improve the odds. Over a thousand outcome studies have noted the importance of establishing a working alliance (Duncan, et al., 2010). A good relationship doesn’t ensure positive outcomes but success is near-impossible without it. Change is dependant on trust; otherwise no skills or lessons will be absorbed. While this repeated finding is not “news” to our field, it’s frustrating to find the amount of programming that can be implemented without a thought to alliance-building. Many believe responsivity, almost an afterthought or seemingly relegated to the back seat of the Risk, Need, and Responsivity (RNR) principles, will eventually catapult to the front for its influence towards positive outcomes.

The interest and spread of Motivational Interviewing across the corrections world (facilities, parole, probation)

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IN CASE PEOPLE ASK

The International Association for Correctional & Forensic Psychology provides a forum for exchanging ideas, technology, and best practices among correctional mental health professionals and others in the international criminal and juvenile justice communities.

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WHY DO CRIMINALS DESIST? *(Continued from page 4)*

raise hope that a sensibility has returned to our field (Clark, 2005). Many professionals realize that in order for programs to work and objectives to be reached, there has to be “buy in.” It would seem that our fields’ ability to rise above mediocrity would be found in the question and subsequent ideas posed by Ward and Maruna (2007), “To what extent can we empower versus compel?” (p. 141). To what extent can we encourage and enable (a) active acceptance, and (b) willing participation? There is a greater likelihood that increasing legitimate opportunities has more merit for changing offending behavior than increasing threat. People will change just as much for what they want to head towards as for what they want to avoid. Criminal justice has become so focused on lowering risk and increasing safety that it overlooks a basic truth, offenders want a better life—not merely a less harmful one.

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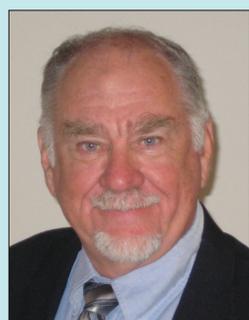
ELEPHANTS IN THE ROOM

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“It ain’t what we don’t know that hurts; it’s what we believe to be true that ain’t so.”

—Will Rogers

Well, here we are at the beginning of another year of federal, state, and county corrections administrators, prison and jail officials, and correctional front line staff, wondering what they’ll be facing as a year of continuing budget cuts and resource reductions unfolds. Those planning



RICHARD ALTHOUSE

corrections-focused conferences and conventions are wondering what topics and speakers will attract the most corrections professionals, and will contribute most to their fields of interest. On the one hand, given that the economics of the rush to incarcerate has facilitated increased interest in the rush to

release, reentry programming, risk assessments to help decide who to release that pose minimal risk to public safety, and community assistance and monitoring programs, are likely hot topics. On the other, I’m wondering if anyone will talk much about how to think about and what to do with the elephants in the room. Elephants, as we know, can be very large and hard to move around if they don’t want to be. So what are these elephants? Here are a few.

Elephant # 1: Incarceration is an effective and necessary crime management tool. Alternatively, tough on crime is the same as smart on crime.

Any reasonably informed corrections professional knows that for years, criminology research has shown that state and federal legislation has resulted in the United States having the world’s highest incarceration and recidivism rates despite average crime rates when compared with those of other industrialized countries, that the threat

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ELEPHANTS IN THE ROOM *(Continued from page 4)*

of incarceration does not function as an efficient deterrent to crime, that the correlation between our incarceration rates and significant crime reduction is likely more spurious than not, and that the increased costs of this outcome has resulted in significant and increasing economic burdens at the county, state, and federal levels, funneling taxpayer dollars from other social, educational, and health programs. There is compelling evidence that, by percentage, minorities have been incarcerated at a higher rate than Caucasians and may receive longer or more harsh sentences (e.g., capital punishment) than Caucasians receive for the same crime. We know that there is an increased percentage of mentally ill individuals in correctional settings, and that our largest mental health institutions are not hospitals, but prisons. Yet this information has had little influence in re-shaping our crime management policies and practices. Why?

Elephant # 2: We must continue to fight the War on Drugs.

Just as with Prohibition I, we know that we are fighting an increasingly expensive and dangerous war on drugs that our own legislation precipitated but that cannot be won, and that the fight has facilitated significant jail and prison overcrowding with non-violent, drug addicted, and mentally ill individuals without sufficient resources to treat them, not to mention the murders of thousands upon thousands of individuals both here and in other countries involved in the drug trade out of economic interest fueled by the war itself. Despite expert opinion that the war is not winnable and that it has accomplished little other than making matters worse, we continue the fight. Why?

Elephant # 3: Programs that frighten, punish, or are militaristic in nature are effective and do not need evidence-based support.

We also know that over the years, a number of programs

have been implemented in the interests of rehabilitation that had little in the way of evidence-based support, had little, if any, real rehabilitative effect, and may have made some individuals more inclined to criminal behavior than not.

Elephant # 4: Crime control policies and practices do not need research for support.

One would expect that the crime control policies and practices legislated in the interests of effective crime management over the years have been influenced, if not shaped, by relevant criminological research. However, Noaks and Wincup (2004) offer a depressing conclusion: "...that criminological research has little direct, immediate impact on crime control policy or practice." (p. 33). Why? One must then wonder, if legislated crime control policies and practice are not guided by research, what (or who?) does guide and shape them, and why?

A little history from Mike Gray's book: *Drug Crazy* (1998) will illustrate why we need to seek the answers to those questions in an effort to understand our current state of criminal justice and correctional affairs. Early in the 1930s, marijuana was not considered an illicit substance. It was generally considered a weed that grew much like dandelions. However, in a process that paralleled the targeting of Chinese for their opium habits, political antipathy towards Mexican workers who smoked marijuana along the border states resulted in politicians and lawmakers painting marijuana as a dangerous substance, a poison weed creating a menace to society posed by marijuana-induced "sex crazed savages." Marijuana received a good deal of publicity, and individuals began experimenting with it. Eventually it received a lot of negative publicity as Mexicans were blamed for, among other things, distributing marijuana cigarettes to school children. It was not long before public sentiment against marijuana and

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those who sold and used it had been politically fanned into a burning issue, with legislators being pressured to act to curtail its availability, and they did by putting together H.R. 6385: "The Taxation of Marijuana." Despite expert opinion provided by the U.S. Public Health Service, and a lack of supportive evidence to politicians' claims noted by the American Medical Association, the U.S. Bureau of Prisons, and the U.S. Children's Bureau, politicians and others alleged, among other things, that marijuana was addictive, the same as hashish, caused insanity, caused crime, and had created a crisis among school children (Gray, 1998, pp. 75- 80). As Mike Gray states in his book, despite a lack of any supportive research evidence to support their claims, in 1937 "a handful of congressmen forwarded a bill that would one day help fill the nation's prisons to the roof beams." Despite a later plethora of non-supportive evidence, as a result of this and related legislation over the decades to come, marijuana the weed became marijuana the illicit multimillion dollar cash crop that has indeed helped fill our prisons to the roof beams, and thousands have died along the way, not because of marijuana, not because of criminological evidence, but because of the legislated policies evolving from a bill

introduced some 60 years ago by a "handful of congressmen" who deliberately ignored available evidence about marijuana because it did not suit their political interests. It is my opinion that much of our current criminal justice and corrections problems today stem from the political rather than evidenced-based solutions of yesterday, and if we are to substantially alter the course of our increasingly costly and inefficient criminal justice and correctional systems to be smart, rather than tough, on crime, we need to dialogue about the elephants in the room, and advocate for a closer relationship between criminological research and correctional policies and practice.

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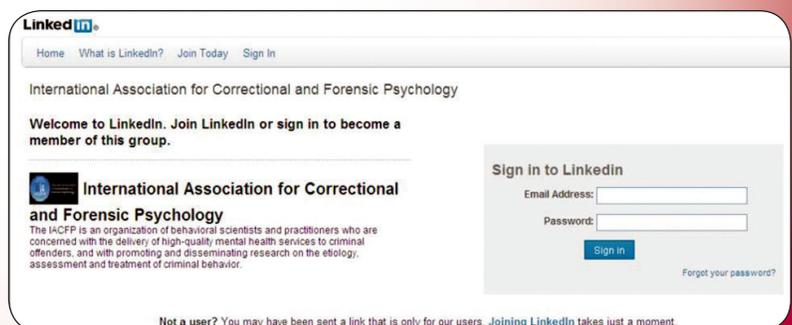
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Sage is interested in connecting with people outside of our Association and will focus on encouraging them to join. All Association members need to join LinkedIn to connect and post. The IACFP blog feeds into this page, as does the *Criminal Justice and Behavior (CJB)* Table of Contents. ▼

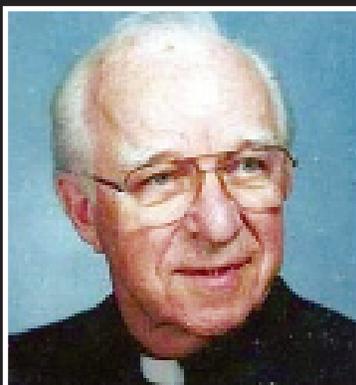


FATHER JOSEPH T. GANNON: A REMARKABLE MAN

Sadly, Father Joseph T. Gannon, father of our Executive Director, Dr. John Gannon, passed away on July 19, 2011. He was 96. Father Gannon's life was truly extraordinary and our summary here will only highlight his brilliant, talented, courageous, and contributive life.

Father Gannon grew up in Farmington, Minnesota, the second of nine children born to William and Julia Gannon.

After graduating from Farmington High School, he joined the Civilian Conservation Corps in 1936. He married his partner and best friend Arlene Vieths and had six children. His first job was with the Minnesota-based People's Natural Gas Company. After the gas company, he purchased and operated the Maid Rite Restaurant in Lake Mills and Osage, Iowa and operated the Sugar Creek Drive-In in Osage. He managed Rice Lake Golf Club in Lake Mills and the Osage Golf Club in Osage. In 1956, he moved his family back to Minnesota where he started the Minnesota franchise of the Hol 'N One Doughnut Company, including customers with Target and Ben Franklin stores. He worked in the doughnut business for 14 years until his wife's death in May 1970. An active member of his community, he was President of the Lake Mills Chamber of Commerce, Chairman of the Red Cross, charter member of Osage Lions Club, President of the Upper Midwest Hospitality Restaurant Association - Minnesota, Director of the Minnesota Restaurant Association and also a Director for the Iowa Restaurant Association. He was a 60-year member of the Lions Club, a Knight in the Knights of Columbus, and Past President of Toastmasters, Minneapolis. Upon the death of his wife, Father Gannon had followed a calling to join the priesthood at the age of 56. He studied at the Beda Pontifical Seminary in Rome and was ordained in 1975 by His Holiness Pope Paul VI in Vatican City, Rome.



FATHER JOSEPH T. GANNON

In seminary, he bristled at some of the rules (a curfew at age 56?). While in Rome, Father Gannon had the honor of meeting and assisting Mother Teresa. He returned to Minnesota where he served at Saint Leo's Parish, Highland Village, Saint Paul Maternity of Mary, Saint Paul and Saint Peter's in Forest Lake, Minnesota, and Immaculate Heart of Mary-Saint Paul, before his retirement in 1984.

One of his daughters jokingly spoke of her husband who asked, "When I go to confession, do I say, bless me Father-in-law?" Even after retirement, Father Gannon remained busy while living at the Leo C. Byrne residence in St. Paul. In addition to time spent with family and friends, he enjoyed golfing and travelling to many countries around the world. Father Gannon spent a large amount of time on cruise ships as the chaplain. He met many wonderful people and enjoyed great experiences. Father Joe/Dad/Grandpa, loved to cook (spaghetti carbonara), tell stories, was an amazing joke teller, harmonica and piano player, and tap dancer. We will miss his quick wit and infectious smile. At one point, Father Gannon and several of his children appeared on the television game show "Family Feud." They aced the audition, but lost by a hair. Father Gannon had recently penned his autobiography, *Seven Times a Father: A Family Man's Journey to the Catholic Priesthood*, with a picture of him on the cover in his collar, surrounded by his children. Father Gannon was preceeded in death by his wife of 34 years, Arlene Gannon. Survived by his six children: Tom, Dennis, Dr. John (Evelyn), Patricia Faxvog (Tom), Steve, and Mark (Tina), 13 grandchildren, 15 great-grandchildren and other close family members and friends.

Portions of this summary were taken from the Minneapolis, Minnesota *StarTribune* obituary page and an article by Maura Lerner, a *StarTribune* reporter.

EFFECTIVE REINTEGRATION OF YOUNG OFFENDERS INTO THE COMMUNITY: RESEARCH EXPERIENCES IN SINGAPORE, HONG KONG, AND MACAU

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T. WING LO

This article is a summary of a presentation by Dr. Lo at the International Corrections and Prisons Association (ICPA) conference in Singapore, September 11-16, 2011. Doctor Lo presented what he sees as effective young offender intervention, based on his research in Singapore, Hong Kong, and Macau. He identified six essential factors related to reintegration. The first factor is that community reintegration is not a one-time event. Rather, it is a complex process, characterized by ambivalence and vacillation. The process is prompted by life events, and the meaning that one attaches to these events will prompt the offender to embark on different paths, deviant or law-abiding. Following a major life event (e.g., switch in jobs, unemployment, marriage, death of a loved one), the offender would drift between deviancy and conformity. Even if the offender opted for conformity, he/she might drift back to deviancy in the life event that followed. It is important that one should be realistic while working with young offenders, and be prepared for lapses and relapses.

The second factor is that the reintegration process is inherently subjective. Even when confronted with the same life event, different people view it differently and make different decisions. For example, in the event of a relationship breakup, the offender who attached a positive meaning to it might opt for conformity. In other words, if the youth is happy about the breakup, he/she is less likely to act out. On the contrary, if the youth saw the breakup in a negative light, he/she is more likely to turn to deviance. Community reintegration is a process that is highly idiosyncratic to offenders, and there is no unanimously agreed recipe for effective reintegration. Interviews with young offenders found that they had different reasons for leaving or staying in a gang. Some chose to stay because of the drive for power, friendship, and living in the same neighborhood. Some chose to leave because of group dynamics, unhappy interpersonal relationships, better

entertainment outside the gang, feeling bored, or having “disagreements” with other gang members.

The third factor is that successful reintegration can be nurtured through some adults “believing in” the youth. The adults could be the youth’s family members, teachers, counselors, or employers. A violent young offender said that he was able to be reintegrated into society upon release because of two reasons. First, he had a chance to study again. Second, and most importantly, the supervision officer from the reformatory training center took time to dine with him and listened to what he said. Thus he did not want to forgo the opportunities he had been given. Showing faith in young offenders is crucial to successful reintegration. It is important for adults to realize that they have to take the time to listen, and explore the implications and causes of juvenile delinquency. Rather than reprimanding the youth, the supervision officer took the initiative to break through the fear, suspicion, and hostility that blocked positive communication between the youth and society. Despite the despair and cynicism faced by the youth in institutions, such an experience is valuable. Thus, the key to successful reintegration is the worker, not just the types of building, set of activities, and structured programs.

The fourth factor pertains to identity change. Identity change is more than just acquiring new skills and knowledge inside rehabilitation centers. It involves re-biography and re-storying, leading to a fundamental change in self-concept. Simply being taught the wrongfulness of a crime is insufficient to prevent the youths from re-offending. Interview excerpts from young offenders show that although they had learned the wrongfulness of crime, and had been taught skills to resist from offending, the superficial implantation of knowledge and moral values are insufficient to change their self-concept. The key is therefore not the tackling of problems, but the enhancement of the self. This intervention goal works on most offenders, except professional or career criminals, sex offenders, psychopaths, and those who offend in the heat of passion.

The fifth factor pertains to the creation of social capital.

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EFFECTIVE REINTEGRATION *(Continued from page 8)*

Social capital refers to a reliable social network of reciprocity. A sports instructor who trained young offenders in a juvenile home built rapport with them, and invited them to join his running club when they were released. One of the most achieved runners took up the offer and joined the club upon release, and even returned to the juvenile home to serve as a volunteer to train other inmates. The importance of social capital is also evident in the interviews with other young offenders. They said they had learned a lesson and were selective in meeting new friends, but the lack of a social network forced them to stay in a gang. Young offenders also mentioned that having a caring social worker in the community for them to turn to in times of trouble is an advantage.

The sixth factor pertains to the redemption or constructive reparation of one's wrongdoings. One coping method is volunteer service that helps young offenders to compensate for the damages they have done. Condemnation would push them to externalize their own problems, lower their self-efficacy and concept, and diminish their sense of

power over life and external locus of control. Redemption, on the other hand, empowers the youth. Through the help of someone who has faith in the youths, the empowered youths would seek to accomplish what they "always meant to do," and would also want to "give something back" to society as a display of gratitude. Our interview data show that young offenders were willing to do volunteer services as a way of preserving good deeds because they knew crime is wrong to society.

To conclude, continued support from the community is needed to prevent youths from re-offending. For most young offenders, the goal of reintegration should be to strengthen their self-concept, which requires more than just imparting knowledge and skills. It entails fundamentally changing their self-identity. This can be done through the support of someone who truly believes in the youths, and the offenders should be encouraged to engage in constructive reparation to compensate for their previous wrongdoings as a kind of redemption.

GIVING JUVENILES WITH LIFE SENTENCES A SECOND CHANCE

Senate Bill 9 was introduced in the California Legislature that would allow juveniles to ask the court to re-examine their life sentences after they have served 15 years. The argument is that, at certain ages, children don't have the full capacity to understand their crimes and simply locking them up is not the answer. You may follow the bill's progress at: fairsentencingforyouth.org or [senate bill 9 california](http://senatebill9california.com). Three of our IACFP members entered into a dialogue after questions from the public were raised about the bill and directed to the Association. At this writing, the bill had not passed. What follows is a summary of the dialogue from our members.

From Dr. John Gannon, IACFP Executive Director

The neuroscience is clear. Brain maturation continues well through adolescence and thus impulse control, planning, and critical thinking skills are not yet fully developed.

The fact that no other countries besides the U.S. have life in prison as a sentence for juveniles is not dispositive,

that is, they could all be wrong and we could be right, but it should certainly give us pause. I'm not a great fan of looking to see how other countries do things in general, just try parking in Europe for example, but when it comes to criminal justice, most of the countries in Northern Europe seem to have not only more humane but more effective and less expensive policies.

In America, the sentencing of juveniles is driven much more by the drama of the crime than by the functional ability of the individual. This is both legally and socially suspect. To cave into public outrage, even though that outrage is based in truth, is still to ignore other truths, particularly scientific truths about the human development.

While people of various ages can be physically able to "commit a crime," e.g., a 4-year-old could fire a gun and kill someone, the law requires some measure of mens rea in order to be legally "competent" to commit a crime. It is always a question whether someone with a brain that is not

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SECOND CHANCE *(Continued from page 9)*

fully developed, whether through accident, lesion, disease or youth, can be competent to commit a crime in that legal (not physical) sense. Consequently, while it is possible that some older teens could be fully able to legally commit a serious crime, it remains very doubtful, from what I've read, that younger adolescents have the ability.

Unfortunately, for the argument of those who would salvage these youth, in my experience, the personality characteristics of youthful offenders seems often to follow them into adulthood. So, while they might technically not be legally responsible for the commission of some terrible crime because of an undeveloped brain, they are often disposed toward others in such a way as to present a danger to others when they mature. In the end, I'm in favor of sensible, periodic reevaluation.

From Ida Dickie, IACFP Member, Ethics Hotline Member, and Director of the Graduate Forensic Psychology Program, Spaulding University, Louisville, Kentucky

I work as a forensic psychologist treating and assessing individuals who are at a high risk for violent behavior and I am also the Director of the Graduate Forensic Psychology Program, Spaulding University. I want to concur with John's point that mental health professionals in corrections, such as the ones who will be doing these evaluations, need to be a lot better trained in graduate school and on the job, than many of them are now, and we need to continue to advance the cause of education in this domain. Unfortunately, a lot of the direction as to how to manage this difficult group of juveniles and court evaluations ignores the body of research that discusses how to identify who is likely to continue behaving in a violent way and what to target to reduce this likelihood. This body of research is titled: "What Works?" and includes the principles of Risk, Need, and Responsivity.

These principles can lead to utilizing assessment and treatment recommendation information, gathered from appropriately trained professionals, in a way that can enhance the likelihood that the courts will make decisions that can actually facilitate the emotional and behavioral modification of violent behavior in serious juvenile offenders. This broad legal theory is called "therapeutic jurisprudence" and is quite exciting to read about. While

it is true that the high-risk group of juveniles will carry some of the biological, psychological, and social factors that interact to explain their violent behavior into adulthood, after 15 years a juvenile who committed a crime at 15, 16 or 17 will be a different human being in regards to impulse control, attitudes, and values, as well as their ability to problem solve; many of the same factors that contributed to the violent crime in the first place. That being said, I also agree with John that there will be a group of juveniles who will be resistant to change across their lifespan. But it is appropriate to identify those individuals through proper assessment at the front end of the sentencing process to guide what sanction they receive. Currently, there is a discussion occurring about whether pre-sentence reports should be available prior to the guilty pleas to guide sentencing decisions.

It is my opinion, based on working with individuals who have committed horrific crimes at young ages that, with the appropriate level of intensity of treatment and adjunctive support systems, the risk for violence can be managed. I would expect that not all the juveniles sentenced to life in prison fall into the high-risk group and that even if they do, they are not part of that group that is least likely to change. So, it may be a positive move to review their records after 15 years, if they have been sentenced to life in prison. Glad to be included in the discussion.

From Dean Auferdeheide, IACFP President

Good points, John and Ida. I'm a neuropsychologist by training and agree that, whereas a minor's intellectual maturity is developed at about 16, their psychosocial development doesn't fully mature until they are at least 22. Accordingly, in 2010, the U.S. Supreme Court ruled in *Graham vs. Florida* that it is unconstitutional to sentence a minor to life imprisonment without parole for non-homicide offenses. Such a sentence, the court ruled, is a violation of the Eighth Amendment which prohibits cruel and unusual punishment. Ida, are there any longitudinal studies that identify psychopathic tendencies of adolescents, besides normal adolescent risk-taking, i.e., lack of empathy, callousness, lack of conscience/remorse/guilt, etc., and then were later assessed as an adult?

A COPERNICAN CORRECTION FOR COMMUNITY SUPERVISION?¹

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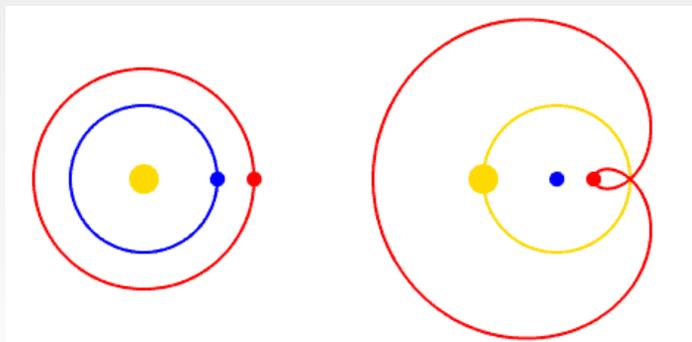


FERGUS MCNEILL

Just before his death in 1543, the Polish astronomer Nicolaus Copernicus published his celebrated book, *De revolutionibus orbium coelestium* (On the revolutions of the celestial spheres). A Wikipedia reference indicates that Copernicus's book:

...is often regarded as the starting point of modern astronomy and the defining epiphany that began the scientific revolution. His heliocentric model, with the Sun at the center of the universe, demonstrated that the observed motions of celestial objects can be explained without putting Earth at rest in the center of the universe. His work stimulated further scientific investigations, becoming a landmark in the history of science that is often referred to as the "Copernican Revolution." (en.wikipedia/wiki/nicolaus_copernican, accessed May 31, 2011)

The diagram below (also borrowed from Wikipedia) captures very elegantly the key differences between Copernicus's heliocentric and Ptolemy's geocentric models of the solar system; here, the Earth is blue, the Sun is yellow and Mars is red. You'll notice that in order for the Ptolemaic view (on the right-hand side of the diagram) to work, the orbit of Mars needs to include an extra loop, to account for Mars appearing to change direction as it crosses the night sky and (supposedly) orbits earth.



Increasingly, I've been wondering whether it is time for a similar sort of Copernican revolution for the field

of offender rehabilitation. Since the revival of academic and policy interest in rehabilitation in the 1980s, we have been preoccupied with one central and important question: "What Works?" The story of the attempts to answer and address that question and to re-design rehabilitation programs in the light of our discoveries is, by now, a very familiar one. A number of influential meta-analyses (i.e., studies that use statistical techniques to aggregate the findings from smaller scale experimental programs and interventions) have produced powerful evidence that programs which conform to certain principles can reduce recidivism. However, attempts to engineer these principles into probation practice in some jurisdictions (most notably England and Wales) have met with more limited success. Those evaluating the large scale innovations tend to point to implementation problems, though some critics have questioned the underlying principles on which the reforms were based.

But what if in some senses, the question was wrong? Or at least, what if the focus that it implied on interventions and how best to design them was only one part of the story of developing research-minded policy and practice? More recently, a different form of evidence—and a different form of research/practice engagement—has emerged. In essence, "desistance research" begins from the observation that almost all people who have developed persistent offending careers nonetheless eventually desist from crime. Desistance studies therefore aim to examine the social and personal processes by which they achieve desistance; this evidence seeks to explain not why people get into crime but how they get out of it, and what can be done to assist them in this process. Although this evidence does not point to any one program or practice methodology, its implications for practice are nonetheless far-reaching.

There are three main perspectives in desistance research which focus respectively on age and maturation, on life transitions and the social bonds associated with them, and on narrative changes in personal and social identity (Maruna, 2001). Increasingly, desistance theorists have drawn these strands together, arguing that the process

(Continued on page 12)

A COPERNICAN CORRECTION *(Continued from page 11)*

of desistance is produced in the interplay between these three sets of factors (Farrall & Bowling, 1999). Because early desistance research was mainly concerned with understanding “natural” or spontaneous processes of development and change, relatively little attention has been paid until recently to how one might “force the plant”; that is, how criminal justice services might accelerate the “natural” process of growing out of crime. However, those studies that have been done in the last 20 or 30 years tend to stress six central themes (for more detail see McNeill & Weaver, 2010):

1. Since desistance is an inherently individualized and subjective process, approaches to supervision must accommodate and exploit issues of identity and diversity. These are therefore important limitations for one-size-fits-all approaches to rehabilitation.

2. The development and maintenance not just of motivation but also of hope becomes a key task for correctional staff.

3. Desistance can only be understood within the context of human relationships; not just relationships between workers and offenders (though these matter a great deal) but also between offenders and those who matter to them.

4. Although we tend to focus on offenders’ risk factors and needs, they also have strengths and resources that they can use to overcome obstacles to desistance—both personal strengths and resources and strengths and resources in their social networks. Supervision needs to support and develop these capacities.

5. Since desistance is about discovering agency, interventions need to encourage and respect self-determination; this means working with people not on them.

6. Interventions based only on human capital (or developing people’s capacities and skills) will not be enough. The correctional system needs to work on social capital issues with communities and offenders.

More recently, it has been suggested that even desistance itself is not the ultimate objective. People do not simply desist, they desist into something. Desistance is perhaps best understood as part of the individual’s ongoing journey towards successful integration within society—towards living good lives as good citizens (Maruna, 2001; Ward & Maruna, 2007). Of course, the history of moral and political philosophy teaches us that it is far from simple to negotiate and understand what the good life is and what

the good citizen does.

Over the course of the last decade or so, I’ve been trying to engage with policy and practice colleagues in trying to work out exactly what difference this body of evidence should make. I have come across four main reactions to desistance research that I have come across—and I have some sympathy with all of them.

- **Vindication:** “Good old fashioned social work has been vindicated at last—we always said relationships, families and social contexts were what mattered.”

The vindicated are on to something; it has taken research a while to catch up with some aspects of “practice wisdom” and to help to identify why and how probation came so close to throwing the baby (effective relationships that attended sensitively to personal and social problems) out with the bathwater (“unstructured counseling,” whatever that was). But if “What Works?” has taught us anything, it is that relational skills and good intentions are not enough, even if they are vital components of supporting change.

- **Vexation:** “Oh, sh*t, we’re going to have to redesign all our systems, processes and practices again—where do we buy the desistance program?”

The vexed are, frankly, right to be vexed; they keep investing in the latest innovation only for some smart Alec to show up saying their methods are outmoded and they need a new correctional toy (which usually the very same smart Alec happens to be marketing). But they won’t be able to buy the desistance program (at least not from any reputable desistance scholar), since the evidence about desistance is that it is highly individualized and subjective and so requires highly adapted forms of support.

- **Guilt:** “We thought we were part of the solution; turns out we’ve been part of the problem. How do we change that?”

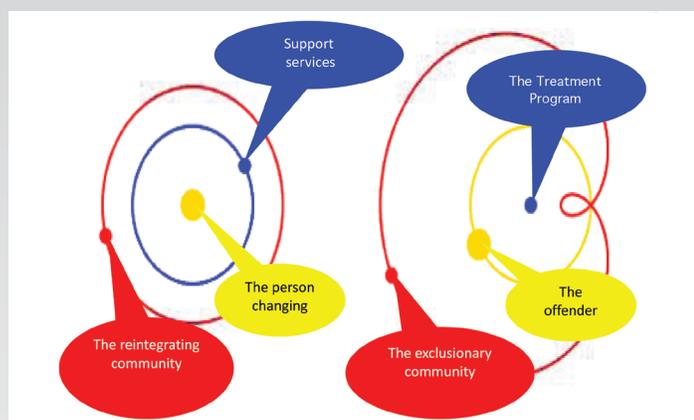
I sympathize with the guilty—I am, after all, one of them: the evidence that the wrong kinds of intervention (even well-meaning ones) can prolong criminal careers is becoming more and more compelling (McAra & McVie, 2008). But guilt isn’t always the most productive of emotions.

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A COPERNICAN CORRECTION *(Continued from page 12)*

• **Reconfiguration:** “Change actually belongs to ex-offenders and reintegration is about communities so how do we place them at the center of what we do, as opposed to putting ourselves and our interventions at the center?”

Reconfiguration, I think, is the reaction that offers the best prospects of progressive development of community supervision—and it is reconfiguration that I most associate with Copernicus. It may be an exaggeration to say that offender rehabilitation requires a “Copernican Revolution”—after all the most effective (“What Works?”-based) interventions are by definition those that support desistance—but perhaps we can speak of a “Copernican Correction.” The key dimensions of this correction are outlined in the following revised version of the diagram we started out with above:



The “old” treatment-centric worldview is represented on the right; the “offender” revolves around the program and the exclusionary community lurks somewhere in the background, occasionally interfering with the offender as his or her life revolves around the program. A desistance-based perspective is represented on the left. Here, we think first about the process that the person doing the changing is experiencing; what it means for them and to them; how its personal, social, and cultural contexts impel or impede it. The support services revolve around the individual, but they also look outward at the community, and ask how the relationships between individuals and communities can be rebuilt so that desistance and reintegration can be achieved. In other words, a desistance perspective drives us to ask what reintegration (or integration) in communities actually means and what might permit and obstruct it practically, psychological, politically.

These are not the only questions that matter, but they are questions that matter in their own way, as much as

that more familiar refrain, “What Works?” Perhaps most importantly, these are questions that neither researchers nor practitioners (nor researchers and practitioners together) can answer; rather, they are questions that researchers and practitioners must examine in genuine partnership with the people doing the changing and the communities hosting or hampering it.

All of this may not be as revolutionary as placing the sun at the center of the solar system, but in its own way it is as unsettling as the realization that the apparently solid ground on which we are standing is actually moving and that we are not at the center of the known universe. Rather, we are all spinning through space, hanging somehow to the surface of a tiny planet, always on a journey of our own, and always dependent on each other to find some way to travel together. That’s basically what community supervision needs to be about—not “correcting offenders” so that we can reinsert them into “solid society,” but rather supporting service users and communities in working out how to travel together towards better lives.

NOTE

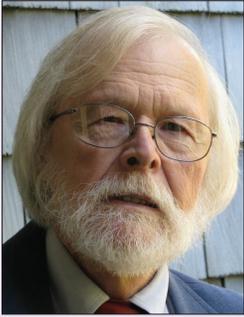
¹A slightly different and earlier version of this article will be published in the *Howard Journal of Criminal Justice* in early 2012. We are grateful to the publishers for permission to use the material here. The article is also a summary of a presentation made by Dr. McNeill at the International Corrections and Prisons Association (ICPA) conference in Singapore, September 11-16, 2011. Singapore podcast: iriss.org.uk/resources/supporting-desistance

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COMMENTS ON THE O'KEEFE, ET AL., "ONE YEAR LONGITUDINAL STUDY OF THE PSYCHOLOGICAL EFFECTS OF ADMINISTRATIVE SEGREGATION"

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ROBERT WALSH

I recently became aware of the above captioned study, referred to as the: "Colorado Solitary Confinement Study" (CSCS) and was initially impressed with the ambitious-looking undertaking, which consisted of over 160 pages, a fairly large sample size, and numerous psychological measures with many tables and graphs depicting the authors' interpretation of results. Surprisingly, and in contradiction to well over 150+ years of reports and documentation of the very detrimental effects of solitary confinement on the mental health of prisoners, the CSCS authors reported that their data did not yield significant evidence supporting that conclusion. The starting place, of course, in trying to understand how such a result could occur, is to look more closely at the methodology used in this study. We should begin by examining the experimental and statistical designs on which the analysis of their data were based, as well as the reliability, validity, and normative data of the measures of various concepts and constructs which they employed. An excellent critique of the CSCS has recently been completed by Grassian and Kupers (2011) and this writer will try to avoid redundancy with their work, except possibly to add to some of their points.

Experimental Design Problems

The CSCS authors chose to employ an "experimental design" within a longitudinal study, repeated measures framework. Participants were drawn from two pools or "populations;" confinement level (general prison population or "GP," administrative segregation or "AS," and prison psychiatric hospital or "SCCF"), and mental health status (mentally ill or "MI," and non-mentally ill or "NMI"). This resulted in five different study groups: MI-AS, MI-GP, MI-SCCF, NMI-AS and NMI-GP, with a repeated measurement on each of the measures of the

dependent variable 5 - 6 times (depending on the study group) over the 12 months of the project. Measures of the dependent variable consisted of a large number of test scores believed to represent eight "constructs" which the researchers used as measures of mental health. The experimental design employed, although not explicitly identified by the authors as such, appears to be essentially a split plot factorial design, which we can designate as a type SPF- $pr.q$ where p and r are the "between blocks treatment" of confinement type and mental health status, and q represents the repeated measure of testing scores obtained over the various scoring intervals, or the "within blocks treatment." The design is confounded by using unequally balanced treatments (group five, the SCCF group obviously has no NMI counterpart), and of course unequal sample size in each of the five between block levels. Proper procedures for dealing with sample size per treatment block and the unbalanced aspect of this type of design are discussed in Kirk (1995), but do not appear to have been utilized by the authors.¹

Although configured like a SPF experimental design, the design actually used in the CSCS appears to be at best a "quasi-experimental design," and the quasi-independent variable is confounded by lack of random assignment to the various treatment conditions. Because of this, it is not possible to validly conclude that the independent variable had any effect on the dependent variable, i.e., the relationship observed, be it positive, negative or minimal. It is highly likely that so called "nuisance" variables (including, but not limited to, prior mental health, medical and prison history) could account for the results in either direction, suppressing or attenuating the scores obtained on the measures used to define the constructs.

Statistical Analyses Problems

Compounding the problem with the design of this study was the selection by the researchers of a parametric statistical design when a non-parametric or even better,

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PSYCHOLOGICAL EFFECTS *(Continued from page 14)*

a descriptive rather than inferential statistic should have been employed. This study, and all analysis of variance (ANOVA) designs, require at the basic minimum, random assignment of all subjects to the various treatment conditions, and this was not done, by the authors' own admission (O'Keefe, Klebe, Stucker, & Leggett, 2010, p. 32). Failure to do this undermines the usefulness of parametric statistical analysis, particularly because there were numerous violations of other underlying "assumptions" (i.e., requirements) of these statistical models and methods.²

Let me be clear. Failure to randomly select the sample from the population under consideration itself does not necessarily preclude use of parametric analyses, but failure to randomly assign these participants to the treatment conditions does (Edgington, 1966). This is of critical importance because data obtained from these test statistics are basically unusable and uninterpretable, whether the analysis be by a parametric, non-parametric or a distribution-free test statistic (Bradley, 1968). Selection of an appropriate experimental and statistical design determines the degree to which a research study has internal and external validity (Campbell & Stanley, 1963; Heiman, 1995), which will be discussed below.

In the case of external validity, which deals with the generalizability of research results to other populations, settings and treatment variables, even the researchers admitted and recognized their findings were limited in applicability to similar AS situations (O'Keefe, et al., 2010, p. 79). Unfortunately, in all likelihood their research "findings" are actually not generalizable to anything but the identical situation in which they were obtained, at best. Why? Because even their internal validity is questionable due to the poor experimental control of nuisance variables which are typically handled by either randomization or by matching the participants in each of the groups on these potential sources of bias. Another problem in utilizing the extensive data in this study is that most of the test scores used had no normative data on prisoners, and many of the test construct measures of reliability and validity had very low correlation coefficients. Thus, e.g., in their approximately 50 pages of tables and descriptive data results, many of the correlations were well below .70, meaning that more than one-half the source of the test score was accounted for by error variance, i.e., factors unrelated to the measure and uncontrolled by the researcher. The amount of variance producing the test result can readily be

calculated by the "coefficient of determination", which is simply the r value squared (Hayes, 1963; Zar, 1984). This gives a researcher the proportional reduction in variance accounting for their test result, representing the actual strength of the linear relationship in their data. In the case of an $r = .70$, r squared = .49, meaning that 49% of the obtained test result was due to the construct/variable being studied, while over half, 51% is due to error variance.

Other Methodological Problems

It may help to better understand the problems with this study by realizing that the many sophisticated statistical analyses available as packaged computer programs will always "crunch the numbers" without judgment as to appropriateness of the data entered. Program packages, such as the Statistical Package for the Social Sciences (SPSS), allows a user to pick from a full range of descriptive and inferential test statistics; univariate, multivariate, parametric, non-parametric and distribution-free, but it is up to the researcher to understand and properly select the correct statistical measures to be used. The relevance, validity, and utility of output is only as good as the data entered.

The assignment of research participants on the main dependent variable defined dichotomously as mentally ill/non-mentally ill using the poorly described 5-point rating scale by the authors of the CSCS was very problematic and subjective. I was not able to ascertain the actual qualifications of those "trained clinicians" making these judgments from the discussion of the method employed, nor the actual criteria they used beyond a general list of the more serious Axis I diagnostic categories which they said made up most of their 3- 5-point rating that placed participants in their MI grouping. Without specification of the criteria used to define degree of severity of the diagnoses except for vague reference to a "qualifier code," it is unclear how the cutoffs were actually determined. Were full diagnostic evaluations made by experienced clinicians when the prisoners entered the reception center? How often were they updated? Were prisoners in a stable remission included in the 3- 5-point group? Also, how did the eight mental health constructs used to measure the mental health status of the participants correlate with the 5-point scale ratings that were used to originally define the groups assigned to the different treatment factors? Were they measuring the same things?

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PSYCHOLOGICAL EFFECTS *(Continued from page 15)*

The one-way univariate ANOVA model used to analyze the data in this study was a repeated measures design that requires various statistical assumptions be met. The most serious that appear to have been violated here by using the univariate analysis, is the requirement of homogeneity of the components of the variance-covariance dispersion matrix when repeated measures are obtained on the same participant. The effect of unequal correlations (in the between testing intervals) has been shown to produce a positive bias in the conventional univariate F test, resulting in the actual significance level required for rejection of the null hypothesis to be higher (Box, 1954). The practice has been to try to compensate by using Giesser's and Greenhouse's (1958) conservative F test procedure, which usually results in a negative bias, creating an upper and lower boundary for the true confidence level. A problem with this does arise when the conventional test indicates a significant F , but the conservative test fails to do so. The solution, as described by Lana and Lubin (1963), is to employ a multivariate analysis of variance (MANOVA) and avoid mis-applying the univariate F test in the first place, especially when so many violations of the univariate application are present.³ These include, but are not limited to, the absence of random assignment to treatment conditions, failure to adequately control for examiner/researcher effects, failure to adequately control for participant variables and failure to control for characteristic repeated measures design problems such as carry-over and latency effects (e.g., dormancy and interaction with previous tests between intervals). Variability due to between-participants effects is poorly controlled under these circumstances and does not minimize measurement error.

The fact that most of the test instruments used to represent the researcher's constructs in this study did not have appropriate prisoner norms available to allow valid interpretation of the scores obtained, is a major shortfall as well. It is well established that prisoners as a whole are different in many respects from non-prisoners in a number of important variables, including, but not limited to, educational level, race and ethnic representation, social economic status, occupation, and medical and mental health history, and these need to be taken into account in any good experimental design. It is not enough to compare test results, even with transformations to standardized scores, to published norms not adequately representative of the study sample. In this case the authors compared

their obtained scores primarily with normative data from "general adult populations," overlooking even gender differences in many cases, between the participants and the normative comparison group. It is not surprising that the vast majority of the 1134 scores summarized that showed significant differences from compared norms, are actually spurious because the norm values were from entirely different populations than the test samples, and thus are the simple product of uncontrolled error variance. Norms are always specific and restrictive to the population from which they were derived, and lose their meaning when that is violated.

Related to the need for rigorous adherence to requirements of the test statistic employed, in order to obtain solid results, is the selection of significance levels. While a $p < .05$ is still widely used in psychological research, it has, over the years, been frequently criticized as too lax and resulting in the proliferation of many "significant" results that really were the product of chance alone.⁴ Looking at this narrowly, and not going into the concept of confidence intervals as an alternative, a much stronger case for establishing a research finding as valid would be to accept only findings whose probability of occurring by chance is at least $p < .01$. Certainly when a finding purporting to overthrow or contradict over 150+ years of research is put forth, the criterion for determining its statistical significance must be set to a substantial standard. As the number of variables and measures in a research study increases substantially, the number of statistically significant results that are actually due to chance alone will likewise increase, all the more reason for setting the bar higher. This argument is further reinforced by the effect of violations of the assumptions underlying the appropriate use of statistical tests, as briefly discussed earlier and in footnote number 2.

In all fairness to the authors, it is noted that they did recognize and discuss some limitations in their data and the high likelihood that "measurement error" accounted for some of their unexpected findings. But even here they only scratched the surface, especially in dismissing plausible alternative explanations for their most surprising results. Thus, they dismiss the possibility of the occurrence of attribution bias in obtaining a finding that significant improvement in all but the GP NMI group occurred between testing sessions 1 and 2, and they felt

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PSYCHOLOGICAL EFFECTS *(Continued from page 16)*

it was unlikely that a Hawthorne effect or demand characteristics of the study substantially influenced the result. The fact that they were confident in their test reliability and validity results in spite of the absence of prisoner norms suggests possible attribution bias, because, as noted previously, these correlations are severely compromised and comparisons with non-prisoner norms render them basically meaningless. Demand characteristics were also more than likely in play here. Grassian and Kupers (2011) described the field researcher in the Colorado study as an attractive young woman, with no effort to counterbalance or control for interaction effects between the researcher and study participants. Thus, while not a demand characteristic in the more traditional sense of participants trying to meet perceived researcher expectations, but in the very understandable sense that male prisoners in long-term segregation confinement will quite naturally try to present themselves in an overly favorable light to such a person, if for no other reason than to help ensure they will be called out of their cell to talk to her again. Not only is this study not generalizable to other correctional systems whose conditions of solitary confinement are different from the one studied, its not generalizable, period.

Ramifications

There is much error variance in social science research compared to the physical sciences, and some researchers accept lower values of r in some reliability and validity results. These represent value judgments, but problems occur when the “results” are in direct conflict with the last 150+ years of research (ranging from descriptive reports and case studies to some true experimental designs). I believe researchers have an obligation to utilize extreme caution and conservative interpretation of their results, since they can have profound effects on human suffering, especially in current times and with issues such as these, when state budgets show huge deficits, and vital human services and safety cuts in the community are occurring. Understandably, it becomes even harder to care about what happens to prisoners when such an extensive and impressive-looking piece of research, funded by a government grant, readily lends itself to use as scientific “evidence” that there is really no significant harm to people, mentally ill or not, from long periods of lock-up in these sensory deprivation units. Try arguing for critically necessary mental health service spending on prisoners, especially those in administrative

segregation, when a study purporting to show no harm from such treatment, and bristling with literally dozens of impressive-looking tables and statistical scores, is used by a corrections department to persuade a court to dismiss litigation challenging the denial of necessary health care to prisoners, or is used by legislators to justify prison mental health services cuts! It is one question when the research is solid and based on properly used statistical techniques, another when the research is highly questionable and wrapped in a sophisticated-looking statistical package that is bound to impress non-researchers and certain to be misinterpreted and misused. The damage can be extremely far reaching. I worked as a psychologist for 25 years in a large, close-custody prison with a very large segregation unit, and I witnessed first-hand the effects prisoner confinement in segregation had on people, on both sides of the bars and steel doors. While individual differences certainly played a role in a person’s ability to survive and adapt to often horrific living conditions, a large percentage of long-term segregation prisoners suffered greatly. The former Chief of Psychiatry for the Colorado Department of Corrections (CDOC), Dr. Mark Diamond, recently wrote, in reference to the plight of CDOC’s mentally ill prisoners, “For them, ‘ad seg’ is hell. Their mental health conditions deteriorate. They act out in ways that speak to the sensory deprivation of being denied human contact. They imagine suicide—and homicide. They get no better; they get worse.” (Diamond, 2011). There are always consequences for our behavior, and as researchers and mental health professionals, I firmly believe we do have a responsibility to ensure that the work we publish is presented as objectively as possible, and that every reasonable safeguard is taken to prevent detrimental misuse, unintended or otherwise.

NOTES

¹Note that the “dependent variable” of mental health status is defined differently for participants assigned to various treatment conditions than for the many individual measures defining the eight constructs measured by the repeated measures component. So, even if it could be argued that the design really was a SPF- $p.rq$ -type, the same criticisms of the methodology apply. The design nomenclature is from Kirk’s (1995) classification system.

²These include, at a minimum, requirements that the

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PSYCHOLOGICAL EFFECTS *(Continued from page 17)*

various groups and observations come from populations that are normally distributed, the observations are random samples from these populations, the variances of the populations are equal (homogeneous), and in the case of ANOVA, the F ratio has an independent numerator and denominator. On page 100, Kirk (1995) has noted, citing Rogan and Keselman (1977), "That the larger the degree of variance heterogeneity, the greater the effect on significance level." Even moderate violations of homogeneity, especially when sample sizes are unequal (as in the CSCS), can have marked effects on the significance test results, and researchers should not ignore violations of this ANOVA assumption. Alternatives to the ANOVA F test should be used.

³It can readily be shown that the multivariate model, properly applied, is immune to this problem. A detailed, technical discussion of this can be found in Morrison (1990) as well as the *SPSS/PC+ Advanced Statistics V2.0 Manual* (1988), but is beyond the scope of this paper.

⁴An excellent review of this issue can be found in Morrison and Henkel (1970) which examined widespread misuse and misinterpretation surrounding the use of traditional significance testing, a still timely topic that has repeatedly reared its head in the *American Psychologist* (as well as other journals) over the last 40+ years.

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COLLECTIVE INTENTIONALITY—UNIVERSITY OF MANCHESTER—AUGUST 28-31, 2012

Collective Intentionality VIII – as the name suggests! – is the eighth in a series of large-scale international events on joint and/or cooperative action, reasoning, decision, intention, attention, and associated mental and agential phenomena, topics that impact on issues in ethics and social ontology and which cross boundaries between philosophy, economics, politics, and psychology. Previous events in the series have been hosted by the Universities of Basel (2010), Berkeley (2008), Helsinki (2006), Siena (2004), Rotterdam (2002), Leipzig (2000), and Munich (1998). This will be the first in the series hosted in the UK, and we are proud to announce that the University of Manchester has been selected to host the event.

Confirmed Invited Speakers Include:

- * Professor Michael Tomasello (Psychology, Max Planck Institute, Leipzig)
- * Professor Stephen Butterfill (Philosophy, Warwick)
- * Professor Guenther Knoblich (Psychology, SOMBY, Donders, Radboud, Nijmegen)
- * Professor Raimo Tuomela (Philosophy, Helsinki)
- * Professor Michael Bratman (Philosophy, Stanford)
- * Doctor Alex Oliver (Philosophy, Cambridge)
- * Professor Kirk Ludwig (Philosophy, Indiana)
- * Doctor Thomas Smith (Philosophy, Manchester)
- * Professor Hans Bernhard Schmid (Philosophy, Basel)
- * Professor Peter Goldie (Philosophy, Manchester)
- * Professor Margaret Gilbert (Philosophy, UC Irvine)

Structure

The event will feature a keynote lecture by Professor Tomasello, plenary talks by (among others) Professors Bratman and Gilbert, and four, three-speaker symposiums: on (a) the cognitive psychology of joint action, (b) cooperative action and reasoning, (c) the logic and metaphysics of plurals and collectivity, and the (d) phenomenology of empathy and

fellow-feeling. In addition, there will be parallel sessions of submitted papers by delegates.

Call For Papers

We invite papers for presentation in 20 minutes. Philosophers, psychologists, economists, and political theorists with research interests in this area are warmly encouraged to submit. Please send drafts, prepared for blind-review to collintviii@manchester.ac.uk by July 1, 2012.

Registration and Fees:

Registration is not yet open and the conference fee not finalized. We expect that the fee will be low (between £60-80). This will include coffee and lunches, but exclude accommodation and the conference dinner. Please send any inquiries to collintviii@manchester.ac.uk.

Local Organizing Committee:

Thomas Smith, Peter Goldie, Joel Smith (Philosophy, Manchester), Paul Ibbotson (Max Planck Child Study Center, Psychology, Manchester), Stephen Butterfill (Philosophy, Warwick).

International Advisory Board:

Christiano Castelfranchi (ISTC-CNR, Rome), Luca Tumoloni (ISTC-CNR, Rome), Frank Hindriks (Groningen), Kirk Ludwig (Indiana), Georg Meggle (Leipzig), Anthonie W.M. Meijers (Delft and Eindhoven), Seumas Miller (Australian National University), Hans Bernhard Schmid (Basel), David Schweikard (Munster), Deborah Tollefsen (Memphis), Raimo Tuomela (Helsinki).

We gratefully acknowledge the support of Mind and Language, *The European Journal of Philosophy*, the Manchester Philosophy DA, and the Manchester School of Social Sciences. Conference website: socialsciences.manchester.ac.uk/disciplines/philosophy/events/ci/

DOCTOR ALTHOUSE RECOGNIZED BY SAGE

Our Immediate Past President, Dr. Richard Althouse, received a congratulatory letter recently from SAGE Publishers announcing that his July 2010 article (really the 3rd Edition of the IACFP's Standards) in *Criminal Justice and Behavior (CJB)* titled, "Standards for Psychology Services in Jails, Prisons, Correctional Facilities and Agencies: International Association for Correctional and Forensic Psychology (formerly, American Association for Correctional Psychology)" was the most downloaded article in 2010 (of all articles published in 2009 and 2010). Doctor Althouse's contributions to *CJB* and our field deserve recognition and our congratulations.

HOW MUCH DO INTENTIONS TELL US ABOUT BEHAVIOR?

*Erik G. Helzer, B.A., Oregon State University, and a Fifth-Year Ph.D. Student in Social and Personality Psychology at Cornell University
egh42@cornell.edu*

In the 1960s two social psychologists conducted an experiment to investigate helping behavior. They traveled to a monastery and assessed the young priests on various aspects of their religious belief. Later, these same priests were asked to conclude their participation in a building on the other side of the monastery's campus.



ERIK HELZER

Half of the priests were asked to proceed there at once, since they were already running behind schedule. The other half were allowed to take their time. On their walk, all participants encountered a man who was bent over, clearly in pain, and moaning. The question the researchers wanted answered, and the question I pose to you, is, who stopped to help the man in need?

In the 1970s, another research team asked one group of cooperative students and another group of uncooperative students (so-designated by supervisors of their dormitories) to come to the lab to play a game called the Prisoner's Dilemma. In this game, participants are paired with one another (though they never meet) and can choose to play in one of two ways: utilizing a strategy that offers a medium size payout to both players or utilizing a strategy that offers a maximum payoff to one's self, but no money for one's partner. To make things interesting, the researchers introduced the game as "The Community Game" to one-half of participants and "The Wall Street Game" to another half of participants. Much like the first scenario, the question was, who would be most likely to look after their partner's best interests?

If you're like most people, you probably think—or even hope—that the answer to this question is relatively straightforward: the "good" people helped and the "bad" people turned a blind eye to the well-being of others. So, the most devout among the priests stopped to help, while those of weaker faith walked right past; and the sociable students looked out for the interests of their partners while the "sociopathic" group defected with little thought for their partners' outcome.

Unfortunately, this belief would not lead you to the right answer in these two cases, nor many of the cases that behavioral scientists like myself tend to study. In the first example, the only predictor of helping behavior was whether people were in a hurry—those rushed by the experimenters helped only 10% of the time, compared to the 62% of people who were under no time constraints. The strength of these priests' religious belief predicted nothing. In the second example, only the name of the game predicted whether participants would defect. Those in the "Community Game" chose the selfish option only 32% of the time, while those in the "Wall Street Game" were selfish a full 70% of the time. Knowing whether or not someone was generally cooperative told you nothing about how they would behave in this situation.

Social psychologists are concerned with what we call the "power of the situation" – the strength that social, cultural, and environmental influences have in shaping behavior. This is a rather unpopular message to many people, because people would rather believe that the causes for a person's behavior reside inside the person herself. In fact, a great deal of social judgment displays signs of an "agency bias" – a bias toward over-emphasizing the extent to which a person's behavior was carried out intentionally or willfully. In understanding others, people turn a blind eye to the external constraints that limit the power of a person's agency and channel their behavior, sometimes toward unintended or negative consequences.

In the line of work that you do, this tendency might be particularly pronounced. When people observe extreme behaviors (like crimes), they are hard pressed to see how the behavior could arise from anything but an actor's own agentic states (e.g., their [misguided] intentions, goals, and desires). After all, many of us live under similar cultural and situational constraints and don't end up committing crimes, so any differences in behavior must be due to the traits of the person, right? Not necessarily. First, small differences in a person's life trajectory can produce large effects in the behaviors they perform. Sec-

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INTENTIONS

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ond, where do a person's intentions come from in the first place? The agentic states a person manifests today are very often the product of years of continuing socio-developmental pressures, most of which were unchosen by the person living with them. The message is that behavior arises from a number of causes, most of which have nothing to do with a person's stated intentions or goals. If you don't believe me, think of all the times you've desired to lose a few pounds or submit a report by a certain deadline only to find that your "due date" for these accomplishment passes you by, leaving your goal unfulfilled. If behavior were really a product of mere intention, you and I and the people that you help would have a much simpler road ahead of us.

I am developing a career around the idea that we over-estimate agency—that we are too willing to situate the causes for a person's behavior inside their heads and to dismiss the idea that behavior comes from a much richer web of causes, some of which are intentional, but most of which are not. Does this mean that people are not responsible for their actions? Absolutely not. Understanding, and correcting for, the agency bias in our perceptions of other people does not exonerate those in question from responsibility. We are all accountable for the deeds we do, even if those behaviors are not the product of pure, unadulterated intention— if you push me down the stairs because you accidentally slipped on a wet floor, I still expect you to apologize and feel some degree of remorse for your part—chosen or not—in the act that broke my arm. But, the tendency to see intentionality everywhere very often leads us to unreasonable condemnation of people for the acts they engage in. And in these cases, taking a step back to challenge our intuitive assumptions about where behavior comes from will lead us to greater understanding, greater compassion, and greater hope for change.

PRESIDENT AUFDERHEIDE RESPONDS TO QUESTIONS ABOUT THE ARIZONA SHOOTER



**DEAN
AUFDERHEIDE**

The IACFP President, Dr. Dean Aufderheide, was asked a series of questions from the Cronkite News Service related to Jared Loughner, the Tucson, Arizona shooter who, on January 8, 2011, killed six and wounded 14, among them, U.S. Representative Gabrielle Giffords. The questions focused on the involuntary administration of medication to defendants, the concept of deliberate indifference, and competency to stand trial.

Doctor Aufderheide responded to the involuntary administration of medication and deliberate indifference questions by stating that in his professional opinion, the critical issue is the basis for which the involuntary treatment with psychotropic medications is administered. The issue that is being debated is whether or not the involuntary administration of medication is because Loughner is dangerous to himself and/or others, or if it is for the purpose of restoring him to competency to stand trial.

It's being debated so fiercely because the basis for the administration of involuntary medication will determine the legitimacy of the requirement for involuntary medication. If it's not to protect against imminent dangerousness to self and/or others, then the basis would be to restore competency to stand trial. Both have a significant liberty interest, but the latter is concerned with the liberty interest as it relates to a fair trial.

In the landmark case of *Washington vs. Harper*, the U.S. Supreme Court ruled that convicted prisoners may be forcibly medicated if the prison officials determined that it was necessary to prevent imminent harm to self or others without a court order. In other prison systems, a judicial order for involuntary medication may be obtained. If qualified prison health care professionals evaluate and determine a prisoner meets the dangerousness criteria and does not provide the necessary treatment to protect the prisoner from harm to self or others, they may be in violation of the U.S. Constitution (in the federal ruling of *Estelle vs. Gamble* (1976) the U.S.

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THE ARIZONA SHOOTER *(Continued from page 21)*

Supreme Court ruled that it is a violation of the Eighth Amendment, constituting cruel and unusual punishment, to deny access to necessary medical and mental health care and be deliberately indifferent to their medical and mental health needs. Eighteen years later, in *Farmer vs. Brennan* (1994), the Supreme Court defined the concept of “deliberate indifference.” Deliberate indifference is the conscious or reckless disregard of the consequences of one’s acts or omissions and occurs when a professional knows of and disregards an excessive risk to an inmate’s health or safety.

It is my understanding that the federal judge determined the defendant was incompetent to stand trial based on independent forensic evaluations by a psychologist and psychiatrist that concluded that he lacked a clear understanding of the legal proceedings and exhibited an irrational distrust of his attorneys. But, Loughner is a pre-trial detainee and has not been convicted of a crime at present. Supposedly, the legal precedent that would apply, therefore, would be *U.S. vs. Sell*, where the U.S. Supreme Court delineated the criteria whereby a pre-trial detainee, who is presumed innocent until proven guilty, could be forced to take medications to restore competency to stand trial. It is my understanding that the present controversy is whether or not there is sufficient clinical justification to meet the requirements of the *Washington vs. Harper* criteria for involuntary medication, or whether the requirements for forcible medication should be based on the *U.S. vs. Sell* criteria. Any licensed correctional and forensic psychologist that would provide an opinion without reviewing all pertinent clinical and legal records as well as personally complete a thorough evaluation of the defendant should change careers and get a job writing meaningless maxims for fortune cookies. Doctor Aufderheide responded to the following additional questions about competency to stand trial:

What is competency?

Generally, competency refers to capability, as in the ability of a person to manage activities of daily living or a fundamental knowledge, ability, or expertise in a specific subject area or skill set. In this case, it refers to the defendant’s capacity to function meaningfully and knowingly in the legal proceeding. The idea is that if someone cannot understand the nature and purpose of criminal proceedings, the proceedings should not continue. In this case,

it applied to the pre-trial hearing.

What does it mean to be competent or not?

Basically, it means a defendant is able to understand the charges against him so that they can meaningfully participate in the criminal justice system. In other words, if a person is unable to properly defend themselves in court due to mental or physical disorder, they may have their court date postponed on grounds of incompetency to stand trial.

What will the court be looking for?

State legislatures have different statutes that govern competency, but basically most adhere to the U.S. Supreme Court’s *Dusky vs. United States* (1960) standard, which defined competency as, “a sufficient present ability to consult with one’s attorney with a reasonable degree of rational understanding, and . . . a rational, as well as factual understanding of the legal proceedings against him.”

What do you expect each side to argue? (defense and prosecution).

The defense will probably argue that since he has been determined incompetent to stand trial, the defendant is incapable of adequately defending himself against the criminal charges. Since punishment may be conceived as only morally acceptable if people understand why they are being punished, the fairness of our adversarial judicial system would require that the defendant be restored to competency in order to defend himself against the charges brought against him. Accordingly, they will probably want to adhere to the legal and professional guidelines for involuntary medication administration for the purposes of competency restoration. The prosecutor will probably want to continue its defense of the use of involuntary administration of medication for the purpose I referenced earlier.

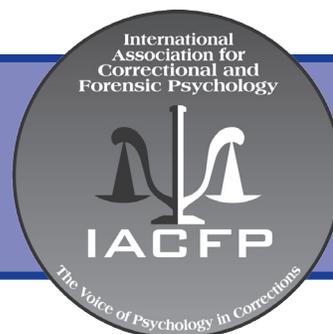
Determining the competency of a defendant has caused a lot of controversy throughout history. The standard of competency dates back to English common law that if a person is insane that they cannot properly defend themselves in court. One of the problems with the *Dusky vs. U.S.* Supreme Court decision was that it did not specify what kind of conditions could make a person incompetent to stand trial. As a result, there may be a conceptual confusion in the assessment of competency to stand trial if there is a failure to properly apply the data of the clinical evaluation to the pertinent legal criteria.

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