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TREATING THE "UNTREATABLE"

Chronic Criminals at Herstedvester

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*The Johns Hopkins Press
Baltimore*

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Manufactured in the United States of America

Library of Congress Catalog Card Number 68-12901

TREATING THE "UNTREATABLE"



The Isaac Ray Award Lectures

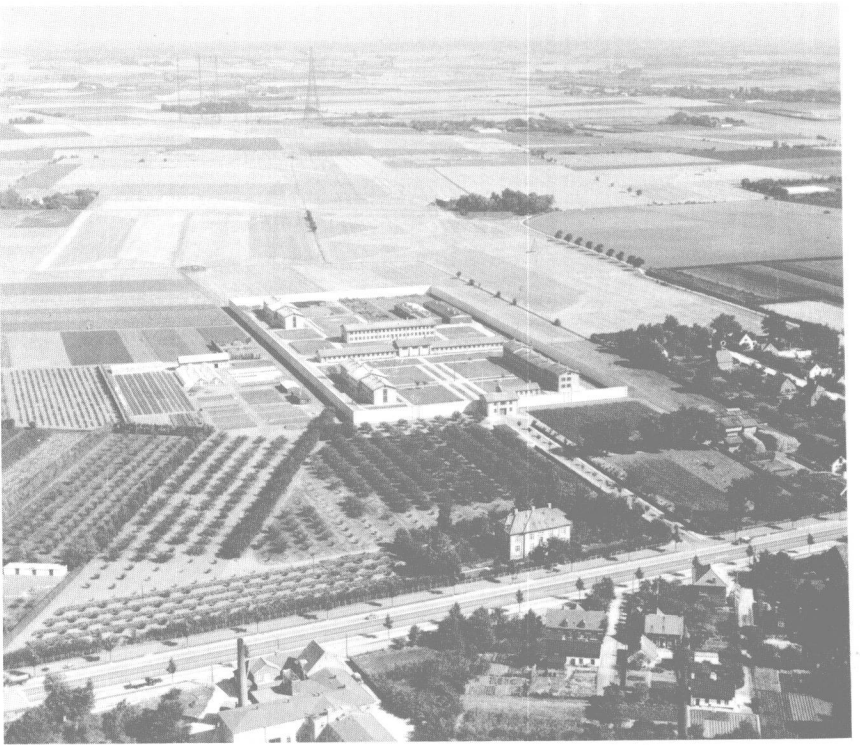
Sheldon Glueck, *Law and Psychiatry*

John Biggs, Jr., *The Guilty Mind: Psychiatry and the Law of Homicide*

Justine Wise Polier, *The Rule of Law and the Role of Psychiatry*



The symbol of the twisted tree is based on a sketch by Dr. Stürup of a tree he saw in England in the 1940's. The crutch suggests the support that the Herstedvester Detention Centre tries to give to the twisted personalities of its inmates so that they can become strong and valuable members of society.



The Herstedvester Detention Centre at Albertslund, Denmark.

PREFACE

We like to believe that most of our actions are voluntary and we try to distinguish sharply between what is done voluntarily and that which we do by coercion or under pressure. However, anyone working with criminals detained behind high walls for the protection of society soon comes to realize that the difference between what is done voluntarily and what is done under pressure is not very clear.

For many years I have wanted to write a description of what has been done in the Herstedvester Detention Centre since I became its superintendent in 1942; several times I have started but for lack of time have been unable to finish. When the American Psychiatric Association honored me by giving me the Isaac Ray Award for 1966, I was put under heavy pressure to produce the Isaac Ray Award Lectures which are the basis of this book.

Further pressure has been exerted by Professor Norval Morris, my former chief in the United Nations Asia and Far East Institute in Tokyo, and others of my colleagues in this Institute. Especially influential was Morris' successor, V. N. Pillai, who, as one involved in practical prison work, convinced me that it was worth while to present a careful description of what we have done even if the result became a very egocentric account without comparison to other treatment experiments.

My teachers in psychology, neurophysiology, and psychiatry all stressed precision and control. I am very thankful for the care with which they taught me this, even though it inhibited my writing an account of the treatment program in Herstedvester.

I can be precise only in phenomenological description; I cannot present results of controlled experiments. Our sociopsychiatric approach to treatment is based on postulates which I can reformulate only to a limited degree as hypotheses. This presentation does not emphasize special psychiatric elements or use technical psychiatric terms because I want the book to be readable for all people interested in treating criminals.

Our basic humanitarian obligation to create a psychological climate in which life is bearable and constructive for our inmates has placed a serious restraint on attempts to evaluate scientifically which ele-

ments in our program have had the most therapeutic value. The immediate well-being of the inmates and probably their whole future depend on how well the institution functions.

Case histories have been carefully kept. Each one consists of a detailed life-story and accounts of all important interviews, including a description of the situation in which the interview was carried out and a detailed summary of what was discussed.

It is common in our time to stress that it is not sufficient to be good, considerate, and humane if the goal toward which one works is not useful. This may be true but it does not excuse the way in which we have handled most of our seriously criminal fellow citizens who present a danger to society. I hope to illustrate that humane treatment is possible within the limits of security.

Thanks to a few farsighted theoreticians and practitioners in Denmark, we have had an opportunity to carry out our work in a small closed institution.¹ Over the years it has held from 150 to 200 inmates at a time except for a short period just after World War II when the number exploded up to 330.

We have shortened the detention time from an average of over four years to between two and two and one-half years; and as we have at the same time maintained a relapse rate of about 50 per cent for each detention period, we may have been useful. Of one hundred new inmates, fifty will be brought back to us after the first parole and twenty-five after the second parole. Thus at the end of ten years only ten of those one hundred men will be in criminal detention.

We usually call a criminal who has been sentenced at least three times within a short period a "chronic criminal." If the intervals between sentences have been longer we call him an "intermittent criminal." These two types form the core of our inmate population.

Studies of the life-stories of these people usually reveal interpersonal problems of long standing. Although these problems have not been apparent before, they develop in relation to, or as a result of, the crimes and what follows in the way of blows to the self-respect of the criminals. These recidivists, as well as the psychologically deviant first-timers who are also deficient in personality for normal social life, are not welcome in society and are often hunted by the average citizen and his representatives in the legal machinery. They are also unwelcome in our mental hospitals and institutions for mental defectives. They are usually not trusted and they themselves feel

¹ For a history of Herstedvester, see Appendix A.

that they belong to a class of people who are different from the normal. They think that they have no chance of leading a normal social life and many people support them in this belief. It is no wonder that such men feel that their every action is conditioned by their criminal tendencies.

After many years of experience, I stress that it is possible to make a criminal believe that he can overcome the difficulties which lie ahead and lead a crime-free life. Not only may he come to believe this, but of our group—the least loved of all criminals—only about 10 per cent are institutionalized because of criminal activities ten years after they first arrived in detention. Within limits, society will finally trust and accept such a man and he in turn will have to accept these limitations. He has to realize that there are some people who should not be told everything about his past but that some, especially his future wife, ought to know his full history in order to understand and help him if inconsiderate people hurt him badly.

The more we stress that the behavior of a chronic criminal or psychopath can never be changed the more difficult it becomes for a man stamped with such a label to believe that he is not a hopeless case. Without hope he will not be motivated again to go through the ordeal of attempting to rehabilitate himself. My main hypothesis is that the chronic criminal is his own most important therapist; it is our job to help him carry out his difficult task.

For our small group we have found it possible to develop a way of life in which security considerations have never been jeopardized; we have given due regard to security as well as to development of a local milieu which may not be ideal but which is acceptable to most of our inmates. By our behavior—not only our words—we express that society does not wish to victimize the inmate further or to give him the opportunity to augment his hate for society; instead, we want to give him a chance to revise his attitude toward authority.

Our approach to the treatment of chronic criminals and criminals whose personality structures and poor adjustments to life endanger their future is based on an optimism which has proved valid. Everything that happens to the inmate in the institution may be of importance and must be integrated. Although the words we use and our mode of expression are important, the energy and the engagement which the staff puts into this type of work seems in many cases to be the greatest inducement for the inmates to change. Despite the inmates' own and other people's expressed opinions to the contrary, we have shown that about 90 per cent of our supposedly hopeless

people are capable of giving up a life of crime. The individualized, integrating growth therapy which we have developed can shorten the criminal periods in a man's life; we fervently hope that others will pursue this work and improve upon it.

Chapter I of this book describes the basic principles of treatment in Herstedvester. To a large degree the description is as it was given in the first Isaac Ray Award Lecture.

Chapter II gives a more detailed description of what we actually do, and is extensively illustrated by case histories. I have avoided giving data which would make it easy to identify the individuals, but in order to present a real and truthful picture I may not have altered some of the stories beyond the possibility of recognition by people who have lived with them. Therefore this book will not be printed in Danish, and I hope that reviewers will handle the case material with discretion. I also hope that these life-stories will stimulate institutions in other countries to make experiments like ours for the benefit of society as well as individual criminals who do not like to admit, even to themselves, that they are suffering.

In Chapter III I have attempted to look at life in Herstedvester in different ways—from the inmates' and the staff's points of view and even from my own personal point of view. This section may demonstrate, especially to persons working in institutions for criminals, the differences and similarities of our institution to their own. I hope that it will convince many that the mammoth "universities of crime" that are now to be seen nearly all over the world are outmoded and should no longer be built.

In Chapter IV an attempt is made to illustrate some of our results by using life charts and case histories.

The third Isaac Ray Award Lecture was devoted to the treatment of a special kind of criminal—the sexual criminal. In Denmark there is a law which enables a Danish citizen to apply for castration when he is suffering severely from his sexual drives or is in danger of committing sexual crimes. This lecture describing the castration law and its satisfying results will be published (Munksgaard, Copenhagen, 1968).

ACKNOWLEDGMENTS

The treatment described here was made possible by the open-mindedness of the Danish authorities.

Many staff members have participated in the daily work described and have helped me collect material for this book; its existence proves the importance of this collaboration.

While I was writing the book, both in Copenhagen and in Chicago, my wife and many friends patiently listened to me, read the manuscript or parts of it, and made suggestions and offered criticisms.

My Danish secretaries, Birgit Dibbern and Esther Zeuthen-Nielsen, must be especially thanked.

At the University of Copenhagen there are still no professional courses in forensic psychiatry, no penological research, no special high-level education in penology or in the treatment of criminals; therefore the parts of this project which were carried out in Denmark were done in my own spare time. As a visiting scholar at the Center for Studies in Criminal Justice of the University of Chicago Law School, I was able to concentrate on the Isaac Ray Award Lectures and to expand them into book form. To the director, Norval Morris, and the associate director, Hans W. Mattick, I am deeply indebted for an enormous amount of time spent in polishing the content and language of the manuscript. I also received invaluable secretarial help from Anna Reuter, who, with great energy, has helped me to clarify what I wanted to communicate and to express it in a way which I hope is understandable to Americans interested in better treatment of criminals.

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PRINCIPLES OF TREATMENT

INTRODUCTION

The work we have done over the past twenty-five years in Herstedvester has been the product of teamwork between the inmates, the staff, and various outsiders interested in our work.

During World War II, I was appointed superintendent of this special institution for emotionally disturbed, chronic criminals. Such criminals are not welcome in prisons because they are troublesome and recalcitrant; nor are they welcome in hospitals because they are neither clearly psychotic nor mentally defective. I came to this job with no practical or theoretical knowledge of work of this kind, but I had a background of general psychiatry, a special interest in social psychiatry, and some experience in handling so-called difficult children.

This was during a period when psychiatry in Denmark was beginning to take an optimistic view of what could be accomplished. The old diagnostic phase was fading away, malaria treatment had opened the way for new types of therapy, and dynamic views of personality reactions were growing.

It may be appropriate to mention that Isaac Ray himself lived in a time when there was optimism about what was then called "moral treatment." In the introduction of his *Treatise*, published in London in 1839, Spillan had affirmed how much had been achieved by this method as compared with what he called the "hopeless practices" used earlier. Isaac Ray spoke bravely and forcefully on the legal aspects of psychiatry. In Scandinavia, perhaps more than in the United States, his ideas on criminal responsibility have been accepted and applied.

I believe that we at Herstedvester have developed what was suggested by one of Dr. Ray's precursors, Dr. Benjamin Rush of Phila-