

Hair Analysis for the Detection of Drug Use in
Pretrial, Probation, and Parole Populations *James D. Baer*
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Tools for the Trade: Neuro-Linguistic
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This Issue in Brief ^{ACQUISITIONS}

Hair Analysis for the Detection of Drug Use in Pretrial, Probation, and Parole Populations.—Comparing the results of radioimmunoassay (RIA) hair analysis for drug use with urinalysis results and self-reports of drug use among aftercare clients in the Central District of California, authors James D. Baer, Werner A. Baumgartner, Virginia A. Hill, and William H. Bland propose that hair analysis offers the criminal justice system a complementary technique for identifying illegal drug use. The study results are timely in light of the recent decision of a U.S. district court judge who accepted a positive RIA hair analysis result as valid forensic proof that a probationer had violated the conditions of probation (EDNY Dkt. No. 87-CR-824-3).

Tools for the Trade: Neuro-Linguistic Programming and the Art of Communication.—Whether viewed as a rehabilitative modality or a sanction, probation remains a person-to-person profession in that probation officers still deal with individuals. According to author Richard Gray, some recent developments in psychology may provide tools for investigation, assessment, helping, and, sometimes, healing. His article describes neuro-linguistic programming and how probation officers may use the technique to develop rapport and communicate effectively and consciously with clients.

Social-Psychological Effects of the Status of Probationer.—Authors Charles Bahn and James R. Davis report on a non-random sample of 43 probationers who were tested and interviewed in order to assess the social-psychological effects of probation in four areas: emotions; family, peer, and work relations; self-concept; and stigma. The authors administered an open-ended questionnaire, a scalogram, and a self-concept inventory and found, among other things, that probationers had the support of family, friends, and even some employers. The authors conclude that probation is

more than a "slap on the wrist" but that it does not overwhelm all aspects of a probationer's life.

Electronic Monitoring in Federal Pretrial Release.—Author Timothy P. Cadigan focuses on current use of electronic monitoring in Federal pretrial release programs, first discussing, in general, how to establish such programs and what to consider in doing so. Then, based on demographic data about Federal defendants on electronic monitoring, the article assesses whether

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The Habilitation/Developmental Perspective: Missing Link in Corrections

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The Emerging Role of Theory

THOUGH A pall had been cast over rehabilitation by Martinson and others beginning in 1975, two developments occurred in 1978-81 that partly refocused correctional programming. First, the importance of intervening with multiple offenders was increasingly recognized. This reflected studies by Wolfgang and others which showed that relatively few individuals accounted for half of all recorded offenses; in this regard, interest especially centered on individuals with histories of violence or other serious offenses (Hamparian et al., 1978; Martinson, 1974; Monohan, 1976; Strasberg, 1978; U.S. Department of Justice, 1975; van den Haag, 1975; West and Farrington, 1977; Wilson, 1975; Wolfgang et al., 1972).

Secondly, the idea of using delinquency causation theories as a basis for developing programs, e.g., for selecting key components and areas of focus, was increasingly discussed. This idea was emphasized by Elliott, Empey, and Glaser, among others, and by both the National Research Council and the Office of Juvenile Justice and Delinquency Prevention (OJJDP). It was strongly recommended in a series of OJJDP reports designed to provide "the framework necessary for sound prevention planning and programming." Prevention, broadly defined, ranged from avoidance of first-time delinquency to avoidance or reduction of continued delinquency and chronic offending (Elliott, 1979; Empey, 1978; Glaser, 1975; Hawkins et al., 1980; Johnson et al., 1981; Martin et al., 1981; Palmer, 1978; Sechrest et al., 1979; Weis & Hawkins, 1979).

These developments led directly to major program initiatives by OJJDP. Two of the best known (described below) involved large-scale, intensive studies of theory-based programs designed to reduce delinquency among serious, multiple offenders, some of whom had histories of violence. The program models that were studied—simultaneously in several states—involved inten-

sive, community-located contacts and drew directly from causation theories known as "differential association," "cultural deviance," "strain" or blocked opportunity, and "control" or social bonding. Collectively, these implied a need for increased educational and vocational skills, job opportunities, and a substituting of conventional or "mainstream" values and goals for antisocial interactions and relationships (Cloward & Ohlin, 1960; Cohen, 1955; Hirschi, 1960; Merton, 1957; Miller, 1958; Shaw & McKay, 1972; Sutherland & Cressey, 1970).

These theories and models strongly emphasized sociological factors and downplayed the psychological or intrapsychic. This downplaying and sometimes pointed rejection reflected, among other things, (a) the disrepute into which so-called medical model approaches had fallen and (b) the still vivid images of brainwashing and anguish seen in the movie *Clockwork Orange* and elicited by Mitford's widely read discussions regarding abuse of "treatment" in institutions (Mitford, 1973a, 1973b). During 1978-81 the dominant view was that insofar as "sickness" or major dysfunction existed at all, it resided, not especially in offenders, but almost exclusively and most importantly in contemporary society and in unequal access to conventional rewards. Given this view and absent other significant causal factors, it appeared that offenders mainly needed more or better skills and opportunities as well as better peer and family relationships, not self-exploration and resolution of presumed, long-term personal problems. In essence, offenders mostly needed "a stake in conformity" and a way to achieve success.

The New Pride and Violent Juvenile Offender Programs

To test this view, OJJDP funded two long-term studies: the New Pride and Violent Juvenile Offender programs. These were not intensive supervision programs in the sense of mainly emphasizing increased surveillance and control. Instead, they were treatment-centered approaches, and they largely focused on activities designed to achieve increased social and educational/vocational

*Opinions expressed in this article are those of the author and do not necessarily reflect the California Youth Authority's official position.

skills, better access to legitimate opportunities, etc.

The New Pride Study

The New Pride study required that, during the 2 years prior to entry, each program participant had had at least three convictions for felonies or serious misdemeanors (their actual average was seven), any or all of which could have been violent. It was conducted during 1980-84, and it examined 10 newly established community-based programs in medium-to-large cities, such as Camden, Fresno, Kansas City, Pensacola, Providence, Chicago, and San Francisco (Gruenewald et al., 1985; National Institute of Justice, 1985).

Each program was modeled after Denver's New Pride project, which had operated since 1973, and it explicitly incorporated the concepts mentioned above. It began with a 6-month intensive phase that involved daily or near-daily contact with each youth, 92 percent of whom were males; this was followed by 6 months of decreasing involvement. Each program focused primarily and very heavily on a combination of alternative schooling, vocational training, and job placement. All in all, these programs emphasized skill-building and self-reliance (thus, "New Pride") far more than surveillance and external control, or, for that matter, any form of counseling. Nevertheless, together with individual and/or family counseling—as deemed necessary—their overall activities were designed to address and overcome presumed causal factors in each individual's delinquency. In this connection, peer-group influence was also addressed, and each youth received initial educational/vocational testing.

Despite considerable program integrity in most of the seven sites that operated at least 3 years and provided comprehensive outcome data, and despite sophisticated statistical analysis, the following was found: Essentially no significant ($p < .05$) recidivism-differences, e.g., with respect to new petitions or readjudications, existed between New Pride youths and their fairly well matched, site-by-site comparisons, after an average of 2.6 years followup from program entry.

The Violent Juvenile Offender Study

In its second major initiative, officially titled The Violent Juvenile Offender (VJO) Research and Development Program, OJJDP focused on males who had committed a violent offense and who had at least one prior adjudication for a serious felony. In each of four sites—Boston, Memphis, Newark, and Detroit—program participants (E's) were first placed, for an average of 6

months, into "small, secure facilities." After that, they were "reintegrated to the community through transitional facilities," viz., a community-based residence. This was followed by "intensive supervision," e.g., frequent contacts in small caseloads, "upon return to their neighborhoods." Control youths (C's) were placed in "standard juvenile correctional programs"; i.e., they were institutionalized for an average of 8 months, then put on standard parole in regular-sized caseloads. Mean age at release from secure confinement was 17.1 for E's and 17.5 for C's. For E's, average time in the community-based residence and on intensive supervision was 2.2 and 1.3 months, respectively; for C's, the comparable phases were 0.5 and 1.0 months (Fagan et al., 1986, 1988).

Based on a blend of delinquency causation views—specifically, Elliott et al.'s "integrated theory"—these intensive programs tried to emphasize "the development of social bonds and 'unlearning' delinquent behavior while developing social competence and skills." To achieve this, most sites focused on: (a) job training, and especially job placement, (b) education, and/or, to a lesser extent, (c) assistance with family and peer issues. A continuous case management approach was used, based on initial diagnosis and treatment planning for each youth. The programs mainly operated from 1982 through 1985.

On approximately 2-year followup after release from secure confinement, E's outperformed C's ($p < .05$) on rearrest-rate in one site, C's outperformed E's in another, and no significant differences were found in the rest—and when all four sites were combined.¹

Developmental Challenges, Issues, and Difficulties

To help interpret the findings from New Pride and VJO a major issue should first be noted, one which has existed for over three decades: Many or most policy makers, and numerous practitioners and academicians, find it hard to recognize or accept the extent and interrelatedness of most serious, multiple offenders' difficulties. This perception or stance applies not just to life- and social-skills deficits but especially to personal problems/conflicts and to offenders' ambivalence about changing their lives. As a result, planners often substantially underestimate not only the strength and extent of programming, support, and sometimes pressure that is needed to help such individuals confront, unravel, and overcome those difficulties/deficits, but the amount of time they need to readjust and stabilize their lives; even

several months is seldom enough. This error is independent of the fact, which most policy makers and others *do* accurately recognize, that most such offenders simultaneously have various strengths and skills—some actual, others potential.²

Thus, e.g., the often considerable strength of offenders' "will power" is indeed generally recognized by correctional planners, as is the key role of motivation. However, what is often overlooked or minimized is the difficulty of harnessing and *redirecting* those powers/forces, e.g., of detaching the individuals from activities, interests, desires, and loyalties that sometimes lead to illegal behavior, and of then redirecting those offenders, i.e., their "will power" and motivation, to less troubled paths. In short, the first thing often overlooked is the fact that the individuals' current interests, commitments, feelings, self-image, ambivalence, psychological defenses, and/or unexpressed fears often actively block or divert the socially-more-acceptable use of actual or potential strengths, skills, and even legitimate opportunities.³ In these respects they hinder the individuals' social-psychological development.

For such reasons, and given the interrelatedness of these difficulties/deficits, it is perhaps overly optimistic to expect fairly short-term programs to help most such individuals sort-out and settle these matters once and for all, even if the programs are intensive. Though this interplay of complex forces exists in all socioeconomic (SES) groupings and for both minorities and non-minorities, *the social, economic, and historical disadvantages* of lower SES and/or minority groups further complicate the latter's developmental tasks. For instance, when recognized as such (by offenders) during adolescence or early adulthood, these disadvantages may further impact an already troubled self-image. More specifically, the individuals' perception of these disadvantages, and the impact of this perception on self-labeling and self-image, may, e.g., increase or consolidate their feelings of bitterness and alienation and thereby make long-term change, including reduced delinquency, more difficult.

Whatever their SES and minority/non-minority status, offenders who have numerous or serious difficulties are not ipso facto "sick" and, e.g., instances of deep-seated pathology. Nevertheless, though a medical model view—specifically, a "diseased-entity" concept—essentially misses the mark on the one hand, and although strengths and skills exist, on the other, it remains important to not underestimate the extent and breadth

of these individuals' need.⁴ In this regard, most serious, multiple, or high-risk offenders, like many middle-risks themselves, may be usefully viewed as addressing or having to deal with a combination of the following challenges, issues, and difficulties (or, collectively, *factors* and sub-factors):

A. *Skill/Capacity Deficits*. Various—often major—developmental challenges, frequently including life- and social-skills deficits, e.g., educational and vocational.

B. *External Pressures/Disadvantages*. Major environmental pressures and/or major social disadvantages, also including comparatively limited or reduced family, community, and other supports or social assistance.

C. *Internal Difficulties*. Long-standing or situational feelings, attitudes, and defenses; ambivalence regarding change; particular motivations/desires/personal-and-interpersonal commitments.

The weight and frequent *interrelatedness* of this combination increases these offenders' vulnerability to failure and helps make intervention difficult. Given this situation, if some factors, e.g., factor C, are only minimally addressed by a correctional program, overall progress may be tenuous. As a result, many offenders' attention and activities—in effect, the foci of their "will power" and motivation—may, e.g., remain prosocial or delinquency free for only a limited time. This could occur even if substantial change and improvement has taken place in other factors.

More specifically, if, e.g., problem-related factor C items such as negative feelings about self or destructive attitudes toward others are minimally addressed/resolved during a program, the delinquency or crime-related interests and activities of many serious, troubled offenders may soon reassert themselves. This can happen even if those interests and activities have been controlled, avoided, or reduced for several months during and after the program. With some offenders, the return to earlier adjustment patterns can, e.g., be triggered or supported by continued interpersonal fears or repeated setbacks relating to a still low or confused self-image, by continued ambivalence about change, and by ongoing or growing conflicts with specific individuals or categories of individuals. With other offenders it may be supported by an undiminished sense of superiority and/or deserved privilege, or by a continued disdain for standard lifestyles. In each case, the earlier interests, activities, and/or loyalties are even more likely to reappear if offenders become particularly

vulnerable, unhappy, or enraged, e.g., to a pre-program degree, because of frequent frustrations, anxieties, or stresses in their daily lives, including their jobs or relationships. Under these circumstances, and especially if few counterbalancing satisfactions exist, problems and issues which are unaddressed or minimally resolved, e.g., the preexisting fears and conflicts mentioned above, will have an increased influence on their behavior.

Interpreting New Pride's and VJO's Findings

Given such factors and interactions, we hypothesize that problem-related—specifically, delinquency or crime-related—interests, loyalties, and adjustment patterns often reasserted themselves in connection with most of the 11-to-14 New Pride and Violent Juvenile Offender programs, despite the following facts: First, those programs were thoughtfully conceived blends of components that reflected a multi-causal approach and which intensively focused on factors A and B above. Secondly, those components did impact A and/or B; and that is what they were essentially designed to do, in order to reduce delinquency. For instance, New Pride and VJO improved vocational and/or educational skills, regularly increased job opportunities, and often provided job placements; sometimes they reduced negative peer and family pressures as well. In these respects they often increased “social competence,” improved “social bonds,” and generally promoted community (re)integration (Fagen et al., 1986; Fagen et al., 1988; Gruenewald et al., 1985). These were no small accomplishments, and the preponderance of program resources as well as time were usually devoted to them.

However, those programs may not have sufficiently focused on or effectively dealt with potentially critical aspects of factor C, e.g., feelings, attitudes, or motivations that involved long-standing or growing fears, ambivalence about change, and interpersonal conflicts. With many individuals, these feelings, etc., which may often have contributed to pre-program delinquency, may, during the program itself, have therefore remained or become strong enough to act as follows:

- (a) substantially *undermine* accomplishments involving factors A and B, thereby contributing, e.g., to recurring work-adjustment problems despite increased job skills, or to episodic interpersonal aggression or violence despite increased social competence in general; and/or,

- (b) prevent actual progress from being *consolidated* in terms of new priorities, shifted loyalties, and a modified lifestyle that could theoretically provide more satisfaction than frustration in their daily lives, during and after the program.⁵

Even if such events substantially contributed to the general lack of E/C recidivism-differences in New Pride and VJO, future programs of this type may outperform traditional approaches. This might happen if, e.g., they focus on individuals who, while not “lightweights,” are somewhat less serious or less personally troubled than those in the above studies. It might even happen if, with most such individuals, i.e., the less serious or troubled, those programs do not expend considerably or proportionately more resources on factor C. However, this factor should be neither avoided nor given token attention only.

At any rate, to account for the above recidivism findings we hypothesize that many or most offenders in those premiere studies of the 1980's had significant personal/interpersonal problems or conflicts that related to delinquency and which had to be addressed more closely and perhaps more directly than they were. This means that those individuals, at program-entry, were, e.g., not *only* vocationally or educationally deficient, socioeconomically disadvantaged, and/or negatively pressured by peers and family—important or vital though these were, especially if jointly present.

In addition, it implies that during the programs even substantial progress in those and perhaps other factor A and B areas was not enough to *indirectly* resolve the offenders' personal difficulties, some of which were presumably self-activating and possibly even growing.⁶ For instance, it suggests that the programs were unable to resolve or adequately reduce those problems by means of either a “rising-tide-lifts-all-boats” or even a “trickle-down” process. It further implies that, with many or most youths, the programs neither greatly nor fundamentally reduced those problems as opposed to slightly or moderately relieving, temporarily diverting, or tenuously containing them.

With individuals whose problems were somewhat less, indirect impacts, when combined with the programs' normal focus on factor C, might have been larger and/or more permanent. (None of these considerations require that New Pride and VJO *fully* overcame the factor A and B deficits/disadvantages. For instance, though offenders may have made marked educational improvements, they may still have finished their program far behind, especially if they had been

even further behind in the first place. This, in fact, occurred in New Pride.)

The Habilitation/Developmental Perspective

Together, factors A → C provide a habilitation, or personal and social growth/development, framework. Basically, this structure adds factor C to the A and B dimensions emphasized by Elliott et al. (1979) and by Weis and Hawkins (1979) in their "integrated theory" or "social development" approach. The latter approach combined "control," "cultural deviance," and "social learning" theories; together with special emphasis on "strain" theory, i.e., blocked opportunity, it was the explicit conceptual basis for the Violent Juvenile Offender experiment. Factors A and B received main emphasis and by far the most resources in New Pride as well (Akers, 1977; Bandura, 1973; Fagen et al., 1986, 1988; Gruenewald et al., 1985). In the habilitation/developmental (H/D) perspective, factor C is considered a very serious and often crucial dimension, not just an appendage, a *moderately* important set of forces, or, for that matter, one that seriously applies to only a modest portion, e.g., 30 percent or less, of most "non-lightweight" samples. This is independent of those samples' particular modal or even predominant socioeconomic status or ethnicity.⁷ In effect, the internal difficulties represented by factor C have been a major missing link in recent correctional thinking; at least, they have not been taken very seriously.

The H/D perspective is also relevant to other-than-serious offenders, whether or not in intensive supervision contexts or with respect to long-term change. In this framework, developmental challenges and issues could be addressed irrespective of whether facility crowding, cost-containment, etc., are simultaneously present as broader correctional issues.

Though an explicit habilitation/developmental framework may be easier to visualize and accept with *youths*, it applies to adults as well and could play useful roles in program development during the 1990's. Also bearing on its utility is the fact that the term "habilitation," in particular, remains relatively free of certain stereotypes associated with "rehabilitation." For instance, compared to habilitation, the latter is more likely to connote a fairly thorough overhauling or reconstituting of once-developed but then "fallen," "failed," "partly broken," or even "sick" individuals—generally adults; and one problem, here, is that fallen or failed individuals are often considered less worthy, sometimes even unworthy, of serious assistance. Moreover, it is often errone-

ously assumed that such individuals, especially the "partly broken" or "sick," may now have few internal strengths on which to draw. To be sure, "rehabilitation," given the above connotations, does channel attention to offenders' often substantial needs; and many such individuals are potentially quite vulnerable or have recently "hit bottom." At any rate, a habilitation/developmental framework may be particularly useful in the 1990's, not only because of such connotations and not just due to its intrinsic relevance, but because rehabilitation's "name" is not completely "cleared" (rehabilitated) following its quasi-banishment from American corrections during 1975-1985 and despite its re-legitimization in recent years.

The present framework does not suggest that offenders are never manipulative, hurtful, blameworthy, or highly resistive and that none of their predicaments and illegal actions may be considered personal failures even in part. This applies whether or not these individuals are seriously troubled or disturbed, often vulnerable and anxious, and/or high recidivism-risks as judged by formal classification instruments. Nor does H/D suggest offenders may never require substantial external controls while various developmental issues and related anxieties as well as resistance are being addressed.

However, the habilitation/developmental framework, particularly with its emphasis on factor C, implies that corrections should carefully examine the subject of engaging and redirecting motivations. Though engaging/redirecting may be a very individualized task with any given youth or adult, correctional and other social science research could perhaps identify general principles, essential preconditions, and important specific motivational strategies that could provide guidelines for practitioners. In any event, if individuals' strengths and skills are to be used constructively and if reintegration into the community is to occur and last, motivation—not just, e.g., external controls—must somehow lead and sustain them, certainly through frustrations, anxieties, and resulting internal and external pressures to re-establish earlier adjustment patterns. To be sure, external supports and thoughtful controls can assist in this regard and can in turn revitalize motivation.

Developmental-Adaptation Theory

The H/D perspective fits within a framework called the developmental/adaptation theory (Palmer, 1969, 1978). This theory describes major steps in the establishment of person-society links and postulates forces that promote those links. It

distinguishes broad "eras"—e.g., Infancy and Early Childhood, Later Childhood, Adolescence, and Early Adulthood—each of which involves actual and perceived opportunities, expectations, activities, challenges, and themes.⁸

Adolescence involves two "stages" or major periods:

Stage A - Reorientation, Assimilation of Social Values

Stage B - Self-Responsibility, Personalization of Attitudes and Values

In Stage A, youths are concerned with acquiring a set of standards or participating in activities they recognize as different than those of later childhood. They seek new people to emulate or new activities to master, largely in order to gain a sense of personal status, esteem, or acceptability. This process involves a beginning "redefinition of self" relative to newly recognized sources of potential status, power, and/or pleasure. It also involves a generally conscious repudiation of or nonconformity toward prior standards and roles. It often involves a tendency to think of others (and oneself) as being either categorically worthy/good or else unworthy/bad, largely on grounds of whether they live up to certain all-encompassing standards of behavior or else in terms of the particular beliefs, attitudes, and motives they seem to have.

In contemporary society Stage A typically or modally involves five main "phases":

1. Confusion, Anxiety
2. Withdrawal, Retrogression
3. Restitution of Esteem/Status
4. Location of Standards/Directions
5. Testing-Out/Working-Through of New Standards

During these phases (collectively, a "response-adaptation sequence"), personal compensations and social adjustments often occur which are particularly relevant to the formation and/or reinforcement of structures and response patterns frequently seen among several groups of delinquents, e.g., the "Passive Conformist," "Power Oriented," and "Conflicted" (Palmer, 1974). Parts of this sequence are sometimes repeated during Stage A, each time involving somewhat different content, e.g., new identification figures or shifting social expectations. This is reflected in the emotional "ups and downs," the behavior shifts, the inconsistencies, the experimentation, and the temporary "regressions" observed in delinquent

and non-delinquent adolescents.

Stage B generally involves three main phases:

1. Emergence/Delineation of Desired Self or of Sense of Actual Self
2. Differentiations Within New Self
3. Merging/Distributing of Self into New Roles or Commitments

During this stage, youths feel they have identified many, possibly most, of the major social or personal choices they may well make, and usually want to make, in the near and intermediate future. They also feel they have identified the principal, personal implications of the differing choices in question. They generally, though not always consciously, expect to build their lives around some of the attitudes, traits, or values they have assimilated subsequent to childhood and have personalized or integrated in the form of a moderately self-consistent self-image, or at least a set of priorities. This does not mean they no longer experience occasional confusion, uncertainty, or even strong anxiety.

After Stage B comes Early Adulthood. Here, individuals take on at least one of the more or less positively sanctioned, adult or young adult roles available in the society, and their activities and self-image become centered on role involvements of this nature. In the typical developmental pattern Stage B (above) takes 2-4 years; however, some delinquents and non-delinquents remain in this stage much longer before passing through its three phases and entering early adulthood. Moreover, and sometimes in contrast to the latter rate of speed, many Stage B youths move into adult-type activities and/or roles, e.g., job-holder, parent, or spouse, without passing through all three of those phases—in particular, without experiencing clear feelings of growth or personal/interpersonal improvement and accomplishment, or at least without having considerable emotional satisfaction along the way.

For instance, these individuals may have precipitously moved along given vocational paths or into the above roles while being mostly unsure about doing so. They may have been thrust into those roles or along such paths somewhat involuntarily or at least more than reluctantly, e.g., by external circumstances or pressures or because they either had or saw no alternatives at the time or had little confidence that they could "do better."

Not infrequently, other individuals acquire such roles, jobs, and prospective vocations without ever having resolved or greatly reduced the still earlier

confusions-anxieties and perhaps even the withdrawal-retrogression of Stage A and without having then developed and tested-out a set of post-childhood standards and values.⁹

Under these circumstances, both groups of individuals' first few job-and-role involvements of early, chronological adulthood can be tenuous and somewhat easily disrupted. This, in turn, can raise the chances of a return to earlier adjustment patterns, possibly including delinquency. At any rate, the above-described events reflect, in some cases, Stage B youths' ambivalence about the *particular* involvements in question, not so much whether to invest in *any* adult behavior. However, in other cases it largely reflects the fact that individuals, their chronological age notwithstanding, are still largely focused on Stage A issues and involvements. Even if the latter individuals have developed several components of a compensatory self-image (one they may or may not really like), this image may leave little room for serious investment in adult responsibilities and roles; and this situation may place these youths in direct conflict with some programs' principal goals.

Factors bearing on movement or development from one phase/stage/era to the next are outlined in appendix A. Stages of Later Childhood are also mentioned, since difficulties in this period often contribute to "status offending" and early delinquency.

Selected Program Implications

Many programs do not adequately help serious multiple offenders reduce or resolve personal difficulties that simultaneously bear on growth and delinquency. As suggested, this may sometimes occur largely because planners and staff have underestimated or downplayed major psychological issues in the first place. However, it may especially happen if—while such issues are being underestimated, etc.—those individuals have placed heavy emphasis on seeing the youths do the following: make major and, from the youths' standpoint, uncomfortably rapid commitments to post-adolescent involvements or responsibilities, or perhaps to heavily structured or lengthy adult-preparatory activities and training alone, i.e., without literally becoming involved in adult lifestyles per se.

More precisely, those programs, while indeed promoting the individuals' capacities and skills, and while appropriately helping them break negative peer associations, do not provide the above assistance *to the point* where many such youths become seriously motivated to modify or relin-

quish the following: (a) long-standing, anxiety-reducing or security-producing adjustment patterns; and/or (b) pleasures/excitements closely associated with specific delinquent involvements. This especially applies when (a) and (b) center around either adjustments of Later Childhood or Phases 1 → 3 of Adolescence, as they often do with serious, multiple offenders.¹⁰

What may often happen under the above conditions, including the program-pressures in question, is the following: The youths' commitment to the earlier-mentioned involvements/responsibilities (i/r's) is weak, superficial, or insincere; or, rather than being superficial, etc., it is strongly opposed by either the youths' specific desire to *not* reduce/relinquish (a) and (b), above. On the other hand, especially if the youths have reached Stage B of adolescence, the i/r's may be opposed or undermined by the youths' ambivalence and genuine conflicts about continuing to move forward. Such responses and situations may have often occurred in the New Pride and Violent Juvenile Offender programs, despite important or essential gains in educational as well as vocational skills and perhaps in social bonding and in terms of reduced peer- and family-pressures.

This suggests the value of determining, both during and after intake, "where" the youths are "at," i.e., in which era, stage, and phase(s) they are mainly invested. Whatever their stage and phase, it is also important to identify "what" they seem unwilling or apparently unable to readily relinquish, and, therefore, which program expectations may pose particular threats. In any event, staff and program planners should carefully examine any assumptions to the following effect: Their clientele's—especially multiple or chronic offenders'—main interests already center, in most or all cases, on a pre-adulthood stage/phase, or can usually be brought to do so in well under a year. However, despite clientele's chronological age, their interests may revolve around adolescent adjustment patterns and investments instead; and this may or may not primarily reflect psychological difficulties and issues more than socio-cultural forces, in the case of any given youth. At any rate, differing phases/stages of psychosocial development often call for different program emphases and intermediate goals, and for rather different motivational strategies.

Individualized Diagnosis and Intervention

Even if one ignores developmental-adaptation concepts per se and does not determine offenders' era, stage, and phase, the factor A → C frame-

work, i.e., habilitation/development itself, still implies the following: In order to engage and sustain genuine motivation, particularly on a long-term basis and for purposes of change and growth, more individualized diagnosis and intervention will be needed than usually occurred in the 1980's, even in most intensive supervision programs. Thus, for instance, to work with very difficult and/or high-risk offenders it will often be insufficient to develop intervention plans based largely or exclusively on the needs-classification checklists increasingly used since the mid-1980's. These lists were usually designed to let staff indicate if areas such as any of the following needed much, some, or little if any attention: alcohol abuse; other drug/chemical abuse; academic achievement; employment; learning disabilities; peers; family; emotional stability; communication skills; health. They were often used together with "risk assessments," which indicated how frequently the individual should be contacted (Clements, 1986, 1987).

Instead, much more careful and integrated diagnosis and planning will be needed. Here, the first task will be to specify or at least outline not just the main content-areas of intervention, e.g., employment, but each of the following areas or issues:

1. Offender's actual life-circumstances, including particular environmental pressures/resources and how to address or tap them.
2. Types and sources of offender motivation-and-interest.
3. Offender's skills, limitations, and principal fears.
4. Major opening moves, e.g., types of living-arrangement if in community-based program, and whether immediate return to school is preferable to employment or is even realistic.
5. Feelings/attitudes regarding—and types of relationship with—significant others; defenses and other critical or often used adjustment techniques/patterns.
6. Methods/techniques to which the individual might respond positively and negatively.

7. Timing and priorities.

8. Staff roles and needs.

Delineating items 1 → 8 will be particularly important if one's goal is other than short-term behavior-control or if an offender seems unusually volatile, crisis-prone, or resistive, not to mention low on eternal support and/or legitimate social opportunities.

In short, though commonly used checklists, by themselves, help staff specify some areas that need attention and how much attention seems needed, they may neither (a) tap certain other critical areas or issues nor (b) provide sufficient detail. At any rate, they do not constitute an integrated, prioritized plan, one which indicates how to proceed. Careful individualized assessment is a precondition for addressing (a) and (b), for identifying important interactions or relationships *between* various areas, and for then integrating this material in the form of a realistic, relevant, initial intervention plan. This action-plan, in particular, would identify and address major links between factors A, B, and C. In any event, brief, boilerplate, and/or computer-generated "treatment prescriptions," e.g., those derived from simplified offender-typologies, would not fully meet the need for such a plan, even though they could be more helpful than harmful if used cautiously in areas such as #6 above (Lerner et al., 1986; Arling & Lerner, 1981; Jesness & Wedge, 1983; Megargee, 1979; National Institute of Corrections, 1981; Palmer, 1984; Quay & Parsons, 1970).

Conclusions

During the 1980's correctional theory and practice strongly emphasized sociological factors and downplayed the psychological. However, when working with serious, multiple offenders it is essential to identify and carefully address not only sociological factors but possible—in fact, likely—psychological difficulties, e.g., personal conflicts and ambivalence about change. A habilitation/developmental approach can help bridge this important gap in recent correctional intervention and can apply to less serious offenders as well.

APPENDIX A

Factors Bearing on Psychosocial Development

Briefly, the main generic factors relating to psychosocial development from one phase/stage/era to the next are as follows:

1. Support-approval from environment (esa)
2. Opposition-disapproval from environment (eod)
3. Individual's own accomplishments-abilities (iaa)
4. Psychological difficulties/conflicts/ambivalence (dca)
5. Difficulty of tasks/goals invested in by individual (itg)
6. Individual's interest-/motivation-level re tasks/goals (iim)
7. Difficulty of social requirements/opportunities (sro)
8. Major or sudden trauma and overwhelming events (ote)

Individually, these factors operate in one of two basic directions. Three factors (esa, iaa, and iim) can promote or accelerate continued development; the five remaining factors (eod, dca, itg, sro, and ote) can hinder or decelerate it.

To assess the prospects of continued development or forward movement by a given youth, one must evaluate both the separate contributions and overall product of these factors. This product may be conceptualized in terms of the following general formula (the product would represent *total effective power*, e.g., developmental power, that may be ascribed to a youth at a given time):

$$\text{Total effective power} = \frac{(esa) (iaa) (iim)}{(eod) (dca) (itg + sro) (ote)}$$

The higher the ratio of numerator to denominator, the greater the chance of continued movement or development through given phases and stages. T.E.P., conceived as a force, has meaning relative to the challenges, expectations, and opportunities of each particular society.

The differing types of power, ability, or positive potential a youth may feel about himself can be termed *developmental capacities*; these may be described in terms of several postulated items or general categories. For instance, most of the following have considerable bearing not only on the transition from later childhood to adolescence, but on that from adolescence to early adulthood:

1. A general competence regarding objects and activities, including an ability to adequately utilize one's body, apply one's mind, and/or perform well in physical or social activities often defined as important or good.
2. An ability to influence other individuals.
3. An ability to resist what others define as "bad" activities or individuals, and/or to avoid or neutralize situations that seem physically threatening.
4. An ability to help other individuals.
5. An ability to understand or predict what is happening around one.
6. An expectation that enjoyable activities will occur, and a belief that one can participate in some of them.
7. A feeling of being generally supported in one's desires to try new things and seek varied experiences.

Capacities 1 through 5 are major components of the *iaa* and *iim* factors, whereas 6 and 7 are products of *esa*. Few youths score high on all or nearly all capacities, at least with respect to long time-periods. Nor need they do so, since—regarding continued movement or development—some capacities can partly substitute for others. Nevertheless, the more "high" or at least positive scores the better, other things being equal.

Capacities 1 → 7 can be important targets of intervention,

especially since they mitigate against factors *esa*, *sro*, and *ota*, among others, and can help individuals through difficult transitions. As such, they can indicate, not only "program integrity," but intermediate impact.¹¹

Stages of Later Childhood

Later childhood contains two main stages, both of which have certain parallels in early adolescence and early adulthood:

Stage A: Familiarization, Coping. In this period the child learns many new things about what the external world is like and what it expects of him. He learns the permissible and nonpermissible ways of expressing a number of feelings and impulses. He is highly involved in coping with external demands and with trying to master as well as reduce anxieties. He is quite concerned with being able to control the actual and perceived power of "significant others" by whatever methods seem acceptable to them or at least appear to work, e.g., by complying, by being "good," by direct or more subtle demanding, or, if necessary, by intimidation.

Stage B: Stabilization, Repetition. This stage is reached when a pattern of activities has been established for and/or by the child, one which brings predictable satisfactions and which he usually enjoys repeating. He is generally satisfied with his role as child and with the opportunities that seem open to him. His expectations, thoughts, and wishes seldom extend beyond hoping for more of the same or for variations and exciting elaborations thereof.

The shift from Later Childhood to Adolescence (also called "socialized relationships") occurs gradually, not overnight. This transition may be considered a stage in itself, and it, too, has parallels in later development:

Stage C: New Awareness, Suspension, Assessment. The Stage C youth has begun to recognize the existence of a rather extensive "new world" of expectations, opportunities, different possible activities, and privileges. He associates many of these features with the approaching years of adolescence; e.g., he recognizes, if only intuitively, that one must be of at least adolescent age in order to participate in various such activities. He generally begins to curtail and redirect some of his childhood activities in light of this new awareness of "what the bigger boys (or girls) do and don't do," and in relation to skills and traits that seem to be desired (strength, courage, self-control, endurance, etc.). This is generally a period of rising uncertainty, ambivalence, and anxiety, with the youth having neither (a) fully relinquished the most pleasurable aspects of later childhood, or of the childhood role, nor (b) having "bought into" the world of adolescence in an intense and involved way, or in much detail.

NOTES

¹¹The reliability of these findings is unclear because (a) E's and C's in most sites were not well-matched on crucial variables such as number of prior petitions and prior adjudications, and no statistical adjustments for this fact were indicated, and (b) possible matching on other important variables (except age) was not reported.

²It should be emphasized that even this view is far from universally accepted.

³Stated differently, it is mainly the coexistence and interaction of the following which often makes those strengths and skills unavailable or which limits their usage in socially acceptable contexts: (a) the above-mentioned deficits plus (b) major external pressures and/or an insufficiency of reliable supports, on the one hand, and (c) particular motivations, defenses, attitudes, feelings, and conflicts, on the other. In this connection, program planners sometimes assume that by substantially reducing factor (a), by also addressing and relieving (b), and by providing legitimate social opportunities, many or most serious, multiple offenders can be fairly quickly

and perhaps permanently "turned around," possibly within well under a year. Though such change may sometimes occur, it is far from typical. Nevertheless, though strategy (a) + (b) + opportunity is valuable and often vital as far as it goes, it can overlook or obscure the major interfering/limiting power of factor (c); and this factor has considerable relative importance for a high percentage of the offenders in question. (The role of factor (c), e.g., the importance of prosocial motivations and interests, has long been implicitly acknowledged with good-risk, i.e., low-risk, offenders. There is no reason to believe this factor, or some of its chief components, e.g., personal motivation, somehow ceases to influence *other* individuals, including higher-risk or serious, multiple offenders.)

"The medical model, specifically, the "diseased entity" or "fundamentally deficient/defective" view, has seldom been invoked since the early- or mid-1970's as a major or primary factor for any substantial percentage of offenders. Thus, when it is currently referred to as a basis for criticizing or characterizing various psychologically or socially/psychologically weighted accounts of offenders and/or delinquency causation, it comprises a largely obsolete argument. Moreover, since almost no current psychological explanations of delinquency rest substantially on "diseased-entity" and/or "deep-personality-deviation" premises, this criticism is largely a straw man argument and, in effect, hyperbole. Many psychological or social/psychological explanations draw heavily, for instance, on social learning theory, not, e.g., on certain early psychoanalytic concepts (Altschuler & Armstrong, 1990; Wilson, 1975).

⁵(a) and (b) differ from the following: preventing substantial progress from occurring in the first place, and/or undermining incipient as vs. actual accomplishments. Such lack of progress, it should be added, can also occur regardless of factor C; e.g., mainly because the program or some of its key components are too short or because too little time has elapsed.

⁶It is often wrongly assumed that offenders' personal difficulties seldom increase during given programs, at least when progress is occurring in other important areas. Yet, increased tensions and problems do commonly emerge in one area, e.g., peers or family, when progress is occurring in another, e.g., employment. (Sometimes it occurs because of that progress.) Similarly, it is sometimes forgotten that many individuals' progress, unlike a rising tide, may not occur fairly evenly and simultaneously along an entire "shore."

⁷With regard to New Pride and VJO it would be surprising if, based on the earlier discussion, personal stresses and related factor C difficulties had *not* developed in many lower SES and/or minority-group offenders prior to program-entry. This could have occurred partly as the individuals' response to their presumably self-recognized and unwanted deficits and disadvantages. Regarding other offenders—specifically, many who may have had fewer such deficits/disadvantages at program-entry, regardless of SES, etc.—we assume that similar factor C difficulties existed (though partly for other reasons), and that they, too, needed close and often direct attention. The percentage of minorities in New Pride and VJO was 72 and 90+, respectively.

⁸Despite important similarities, this theory differs in detail, emphasis, and substance from other descriptions of individual development, the I-level account included (Warren, 1971).

⁹In some contrast, still other individuals may have developed such standards and then rejected them and returned to Phase 1 or 2 of Stage A rather than move toward B. During this return or recycle they may, however, have become involved in the adult-type activities/roles in question, without, e.g., necessarily assuming adult responsibilities.

¹⁰Here, e.g., many Stage A youths who feel external pressure to make major or rapid strides toward adulthood and toward much greater personal and social responsibility are

neither ready nor willing to relinquish various adjustment patterns or personal compensations they developed during the Restitution of Esteem/Status phase of Adolescence. With other youths there is less a "battle over relinquishing"—relinquishing given patterns/compensations the youths consider threatened by adult expectations in general—than a need to work through conflicts or ambivalence about particular adult involvements.

¹¹Developmental-Adaptation theory suggests that, to be considered relevant by many youths and thereby engage their interest, programs should work toward the following goals: (a) Reduce pressures, or change perceptions, that prevent youths from developing areas of genuine competence or from using skills and assets they already have. (b) Increase present skills and assets or assist in developing new abilities, thereby helping youths evolve a power base that can help them attain legitimate satisfactions and pleasures, or genuine esteem. This means that programs, starting with their initial intervention plans, should address not only one or more of the earlier-mentioned denominator items, e.g., *eod* or *itg*, but numerator items as well, e.g., *esa* or *iaa*. Psychological strengths may be considered a further type of competence or ability, and processes or conditions that detract from them should be addressed as well. In addition, if they are to be reliably available and relatively efficient, competencies should not be hampered by serious ambivalence or conflict. For such reasons, among others, factor C—in the habilitation/developmental framework—requires serious attention if progress in factors A and B is to be taken good advantage of, and sometimes even sustained. Naturally, the opposite also applies: progress in A and B can itself help C.

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