

## CLINICAL SOCIOLOGY AND THE CRIMINAL JUSTICE PROFESSIONS

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### INTRODUCTION

1) Attention is focused on the nature of clinical sociology and its possible use in the criminal justice profession. 2) Specific examples will illustrate the work of clinical sociologists in the area of criminal justice. 3) Specific consideration is given to the current state of the criminal justice professions with respect to manpower and training, to determine whether there is a genuine function for clinical sociologists in these professions.

### CLINICAL SOCIOLOGY DEFINED

Wirth (1931), one of the first to use the concept of clinical sociology, defined it as application of sociological knowledge and methodology to understanding and treating personality problems of those who come to the clinic. Wirth felt that the clinic provides sociologists an opportunity for carefully controlled observation. Although this use of the term *clinic* seems rather narrow and specific, he used it in a very broad sense to refer to the various settings in which sociologists could make observations. Wirth's use of the concept was much more inclusive than the medical concept of clinic. Argow (1941) also contended that the application of sociology to therapeutic practice in the clinical setting was a valid expectation. Firsthand observation of group response to therapeutic efforts is the clinical study of society (Lee 1955).

Sociological practice as applied and clinical sociology has been a significant component of sociological training and of the role of the professional sociologist from the inception of the discipline. In fact, sociology emerged in the United States as clinical sociology, but it was not until the 1970's that clinical sociology was systematically developed as the logical outcome of all sociology and an important source of its theory building. Since then, clinical sociology has emerged as a significant national and international force in the field of sociology.

The literature which has resulted from the renewed interest in clinical sociology makes it clear that the concept is not limited to the medical model. There is also some indication that the field includes both a broad and a

narrow focus. Clinical sociology is concerned with both micro and macro sociological phenomena. In its narrower focus, the therapeutic and counseling process is primary. At the macro level, counseling is simply one method among many others which might be used in problem solving intervention in practical reality. The distinction is not sharp in clinical sociology. Counseling is done not only with individuals, but also with groups, families, organizations, and communities. The narrow focus of individual counseling is done to underscore the legitimate role of the sociologist as counselor or therapist. It has been contended that the clinical sociologist who specializes in counseling is unique in comparison with counselors and therapists in that they are committed and professionally trained in developing sociological theories of counseling, and to using sociological models in counseling (Black, Enos 1980).

Clinical sociology is the utilization of sociological knowledge for positive change (Glass 1982). It involves application of sociological perspectives, concepts and methods in problem solving intervention. The underlying assumption in the clinical and counseling process is that the more one understands the means by which cultures, societies, institutions, groups, roles, and statuses are constructed, the greater the probability the individual, group, or organization will be able to manipulate their behavior to their own ends. Sociology provides unique theories of intervention, models of intervention, and strategies of intervention. These include goals, objectives, and anticipated outcomes in macro and micro social settings.

### EXAMPLES OF CLINICAL SOCIOLOGY IN THE CRIMINAL JUSTICE FIELD

Examples of clinical sociology in criminal justice professions are limited. The present examples are neither exhaustive nor representative of the work being done in the field. Rather, they suggest something of the diverse current expressions, and show some of the possibilities for clinical sociologists.

Special consideration should be given the role of the clinical sociologist as counselor or

therapist. Individual counseling is identified as one aspect of clinical sociology, and several specifically sociological models have been posited for use by sociologists in counseling (Glassner, Freedman 1979; Straus 1979; Lee 1979; Glass 1979; Hurvitz 1979; Black, Enos 1982). This possibility for sociologists in the criminal justice professions takes on added reality through efforts of the national Clinical Sociology Association to certify its own members, and clinical programs, and to provide training and internships. An equally important consideration is the licensure of several clinical sociologists by the State of Texas under the *Licensed Professional Counselor Act*.

One clinical sociologist has reported her work in the counselor role in the correctional field with a chronic slasher (Powers 1979), and a second clinical sociologist has reported on clinical work with prisoners (Black, Enos 1980, 1982). Other clinical sociologists are involved in such work in various ways, but none are practicing in a prison setting.

A variety of examples are available which are more indicative of the macro possibilities for clinical sociologists in the criminal justice field. All except one are outside the criminal justice system, but suggest the capabilities of the clinical sociologist as a part of that system.

- 1) One clinical sociologist in the criminal justice system is in the role of the Criminal Justice Coordinator for a Drug Abuse Prevention Division.
- 2) Another clinical sociologist works with the legal community on jury selection, client support, and rehabilitation plans.
- 3) A clinical sociologist develops workshops for convicted offenders, including parenting classes for incarcerated mothers.
- 4) Clinical sociology is used in continuing education programs for prison staff.
- 5) The clinical sociology perspective is used in understanding the role of the prison guard and developing training programs for guards.
- 6) The clinical sociology perspective is used in continuing education programs for police.
- 7) The clinical sociology perspective is applied in continuing education programs for probation and parole officers and workers with juvenile delinquents in wilderness camps, and detention centers.
- 8) One clinical sociologist taught in the formal education program for prisoners.
- 9) A clinical sociologist has served as consultant on

corrections for a major religious denomination.

In all of the training or continuing education settings, the nature and importance of such sociological variables as race and social class are emphasized. The nature and implications of criminal justice components as complex organizations are considered. These are just a few of the issues which the clinical sociologist can raise in education settings, and with various professional and staff groups in the criminal justice field.

The examples which we have considered, and possible future applications can be dichotomized in two ways. 1) Clinical sociology can be used by professionally trained staff, or it can be used in training some other staff in the criminal justice professions. 2) It can be used as the basis for counseling individual offenders, or it can be used in organizational analysis. At whatever level the clinical sociologist operates, there are some basic guidelines for this work. For the most part, this work has been shaped by humanistic, holistic, and multidisciplinary approaches (Glass 1979; Black, Enos 1982).

With respect to the humanist orientation, Straus (1979 480) says that the clinical sociologist is "... committed to helping people cope with their sociocultural and historical situations and institutions ... The goal is to help them reconstruct and shape institutions and situations in the direction of self-determination, human values, and human dignity." These authorities underscore the significance of the holistic perspective in clinical sociology. There is an emphasis on the individual in relation to the larger social context such as values, ideals, norms, social structures, and social processes. Finally, clinical sociology, as it emphasizes the unique contributions of sociology in intervention strategies, is committed to multidisciplinary perspectives and practices.

#### **FUTURE OF CLINICAL SOCIOLOGY**

One of the recently cited manpower problems is a critical shortage of specialized professional personnel (Kratcoski 1981). Clinical sociology is one possible source for alleviating such manpower problems. Although the *NELS Bulletin* does not list openings for clinical sociologists, there are listings of positions available to persons with sociological training.

Clinical sociologists do have a more legitimate claim to such positions than the graduate with the traditional sociology degree. We should anticipate that as clinical sociologists demonstrate their capabilities in criminal justice internships and full-time career positions, the demand for them will expand.

In a discussion on correctional management, Kratcoski (1981 91) raises an issue which should receive serious attention in any discussion of clinical sociology in criminal justice professions. He notes that "... the history of correctional management is dotted with treatment fads and cults ..." In needs to be clarified that clinical sociology is not just another fad in the criminal justice field. Nor is it an attempt to suggest that sociology is *the single answer*. Rather, it is an attempt to bring sociological theory, methods, and techniques to bear in a new way in approaches to the individual and crime, and to social forces and crime. It is thought that both psychology and sociology have dominated the field of corrections at one time or another. It is the perspective of the clinical sociologist that sociology in fact has been the *missing discipline* in intervention strategies. It is the intent of the clinical sociologist to change that situation.

It should be stressed that clinical sociologists are committed to multidisciplinary approaches, and that they consider clinical sociology as one among several intervention strategies. As Kratcoski (1981 92) describes the multifaceted nature of the field:

There are dehumanizing prisons, overcrowded jails, expensive and excessively staffed reception and diagnostic centers, halfway houses, youth industrial schools, experimental community treatment programs, and field services such as probation and parole.

He contends that each of these settings requires several types of personnel and a variety of ways have been used to prepare staff. Training in clinical sociology is one of the legitimate ways to prepare staff, and clinical sociologists can be a valuable contribution to the various other types of personnel in the criminal justice field. Diversity of opinion as to the most appropriate method of training or preparation for a corrections career is noted by Kratcoski (1981 87):

... the 'professional program' which provides the student with a foundation in the social sciences

as well as with training in the specific job-related procedures, is currently considered superior to either a pure 'training' program or a totally academic preparation with no close tie-in with the field.

In fact, the clinical sociology programs with an academic base in sociology and supervised internships in criminal justice professions provide this type of 'superior' training preparation. A degree in sociology is one of the common degrees held by treatment and administrative personnel working in corrections. It is also noted that those working in corrections have been educated in a 'helping' profession rather than being prepared directly for a career in corrections (Kratcoski 1981 88). Whether preparing for a helping profession in general or a criminal justice career in particular, clinical sociologists definitely consider themselves as one of the 'helping professions'. There should be a realistic prospect of clinical sociologists assuming an accepted role in the criminal justice professions.

One issue to be discussed in regard to the clinical sociology in the criminal justice professions is that of the level of academic degree to be attained. In the area of counseling in the criminal justice field, most work will almost certainly require either a masters degree or a doctoral degree, or their equivalent. It is apparent even now, however, that a sociology graduate who holds the baccalaureate degree may well be doing some counseling with an individual on probation or parole, or as an officer of the juvenile court. In clinical sociology in general, most tasks which are done by a clinical sociologist with a doctoral degree can also be done by an appropriately supervised clinical sociologist with a baccalaureate or masters degree (Black, Enos 1982). These stipulations are probably applicable to the clinical sociologist in the specific practice area of criminal justice. These issues will be resolved in the course of time.

## CONCLUSION

We have considered how realistic it would be for a clinical sociologist to anticipate a role in the criminal justice professions. Three comments are appropriate. 1) The clinical sociologist has a legitimate and valid role to play in criminal justice professions. 2) Concrete examples of clinical sociologists

practicing in criminal justice professions are currently very limited. 3) Analysis of manpower needs in the criminal justice professions, and the training for these professions indicate that it is indeed a very realistic possibility that clinical sociologists can expect to assume a legitimate role in the criminal justice field.

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