

CLASSIFICATION AS A KEY TO DEVELOP CORRECTIONAL POLICY

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ASSUMPTIONS

The ultimate factor which shapes any correctional policy or administrative decision is correctional goals. The two broad goals common to state correctional agencies are, the protection of public safety and the provision of basic custody. Necessary for the achievement of these goals are "sorting" systems and certain critical support services. Classification addresses both goals but is most concerned with decisions related to safety - of the public, and of staff and inmates. Support Services are oriented primarily toward provision of primary basic custody of inmates while incarcerated. Classification is, however, theoretically the means used by a correctional system to assess inmates and departmental resources along the same dimensions.

A classification system is only as effective as that match of resources and inmates. The match differs with the correctional environmental requirements of community versus institution. With regard to institutions, the physical plant and staffing patterns are the two major resource areas that can be used to shape responses to inmate behavior. The inmate behaviors of greatest concern are the potential for violence and assaultiveness and the propensity for escape, general misconduct and violation of institution rules.

**DESCRIPTIVE VERSUS
PRESCRIPTIVE APPROACHES**

An agency may develop either descriptive or prescriptive guidelines for classification or sentencing, or for other decision-making. One's choice is depends on available technical and fiscal resources, the "current climate" in the public sector and the legislature, and the administrative and operational philosophy of the implementing agency.

The descriptive approach codifies and formalizes the current decision patterns within the organization. Little major change occurs in the way things are done, but criteria become more explicit, procedures more standardized, and activities more closely monitored. An example of the supporting rationale for this approach usually follows this line of argument:

"The way this agency does things is already pretty good. Processes give the guidelines the validity they need. We really do know the best way for us to conduct our business. Guidelines should be based on the knowledge and experience of staff who do this operationally every day. Besides, the body of research theoretical knowledge is inconsistent and 'experts' do not yet have strong enough predictors, methods, or other information to offer really better solutions."

The prescriptive approach is more difficult and more complex. It requires that the agency and the Director take a serious and extended look at some very important questions:

- Are persons with requisite technical skills available to the Department, either internally or externally?
- Do data bases currently exist or does the agency have the resources to develop, *simultaneously with a classification system*, the necessary data base for predictive and postdictive.
- Do there exist within the agency a few professionals who have combined knowledge and skills with agency and practice wisdom and who have attempted with at least some success to "do it"?
- How able is the agency to absorb change and cope with potentially radical change in policy and procedure and possible redeployment of resources?
- Are there systems in existence anywhere in the country with possible transferability to the agency?
- Is there a recognized need, strong commitment, and support by the Director, top management, and critical administrative staff for the design and implementation of a classification system?

Because of the support of the National Institute of Corrections and the Illinois Law Enforcement Commission, the Illinois Department of Corrections, Bureau of Policy Development, was able to obtain some of the needed external technical expertise and resources to develop the data bases necessary

for creating and validating their classification instruments. This fact has enabled the agency to shift gradually towards a prescriptive approach to classification. Of equal importance, this classification project has received the strong support of the past and the current Director of Corrections and the Deputy Director of Adult Instructions.

CLASSIFICATION OBJECTIVES

The Illinois Department of Corrections is committed to developing an adult offender classification system which would be guided by four major goals:

1. Develop a department-wide system for classification decision-making for adult offenders.
 - Develop an empirically-based classification system.
 - Develop a classification system which complies with the 12 Model Principles of the National Institute of Corrections and the ACA standards.
2. Place inmates in the lowest level security classification while protecting public safety.
 - Place inmates of like security classification in similar security level institutions.
 - Insure a safe and secure institutional environment through a greater monitoring of maximum security inmates.
 - Provide periodic systematic review of inmates' security classification.
3. Impact institutional programming through a more effective allocation of resources.
 - Establish procedures to identify "special needs."
 - Based on assessment of individual needs, design programs and services to meet priority needs.
4. Improve the management and service delivery of the Department through the use of a classification system.
 - Monitor the success/failure of classification designation.
 - Monitor classification designation by classifying unit and classifying counselor.
 - Monitor service delivery for "special needs" group.
 - Monitor identification and handling of dangerous inmates.
 - Monitor inmate initiated action, grievances or litigation, objecting to classification decisions.

Institution classification has been based primarily on a non-rational or even irrational mixture of anecdotal judgments and operational convenience, such as the current available space.

"Classification often is based on a simple list of rules governing the separation of particular groups (males from females, juveniles from adults, homosexuals from heterosexuals, serious felons from misdemeanants, etc.). Within the limits of such rules, classification committees commonly make custody-level decisions based on subjective criteria. Many large state systems use information derived from complex diagnostic procedures when making custody-level decisions, but these diagnostic work-ups are aimed primarily at identifying special offender needs rather than assessing risk. Although psychological tests are employed in diagnosis, test results usually are not weighted or considered in a structured manner. The final custody classification most often is a product of subjective decision-making by committee" (Bohnstedt and Geiser 1979 6).

Classification should be based upon *verifiable assessment* of individual likelihoods towards such in-prison factors as violence, assaultiveness, disturbance-proneness, escape and other security risk, alcohol and drug use; and such post-release factors as social instability, violence, unemployment, alcoholism and drug abuse, and recidivism. Ultimately the key questions asked of any classification system, whether administrative, programmatic, or operational, are questions of cost effectiveness, cost efficiency and cost benefit, not of process, protocol and procedure.

Classification goes to the heart of program and budget issues. It is the source of information for two major questions:

1. How can an agency plan for its mid-range 3 to 5 year future without knowing who is coming in and who is coming back?
2. Once we know who is entering or returning, given the data base available, is there anything that various techniques can tell us about program effectiveness and/or operational efficiency?

Without methods for developing answers to such questions as who is/will be incarcerated and what might be or might not be done, or what could be done in keeping some people out of the system, the system has no recourse but to feed upon itself. It does not know which administrative direction to take — or how to manage. It cannot prevent costs from escalating. It does not know how to reduce populations or disturbances, or how to stem proliferating institutionalization.

Further, to answer classification related questions, we need predictive information. Consider for example, the relevance of being able to identify subgroups of inmates. We are concerned here with these questions about institutional behavior on which very little cogent work has been done:

Violence proneness.

Assaultiveness.

Tendency to instigate disturbances.

Tendency toward involvement in disturbances.

Escape risk.

Suicide risk.

Alcohol and drug use.

General misconduct/rule violation proneness.

PREDICTION OF FUTURE BEHAVIOR

The task of predicting future behavior is even more complex. What factors would be included in a classification instrument? How should they be weighted? Do some factors apply across the system, from institutional intake through community supervision? Are there some factors whose weights change between institution and community? Are there some critical factors that predict in-institution behavior but have little to do with prediction of in-community behavior?

Without the demand that classification instruments be validated against prediction, agencies will continue to set up self-serving constructs, implement them, and never evaluate them for effectiveness or cost-benefit. This is the worst kind of "inefficiency." But agencies cannot move beyond present approaches without new methodologies which enable them to actually design better predictive systems.

INADEQUACY OF CURRENT METHODS

Since the early 1960's many "clinical" classification systems have been proposed, primarily for juvenile offenders (Megarsee & Bohn, 1979; Gaensbauer & Lazerwitz, 1979). However, application of predictor variables identified by nine major studies and by clinical recommendations to the court of records of juveniles has revealed no significant relationship to subsequent dangerous behavior (Schlesinger, 1978). No independent sample validation was conducted in many studies (Bender 1959; Cowden 1966; Hellman & Blackman 1966; Glueck & Glueck 1967; Guze, Goodwin, & Craine 1970; Hirsch 1972; Wenk & Emrich 1972; Justice, Justice, & Kraft 1974; Sendi & Blomgren 1975.) The limitations of clinical predictions of dangerousness have also been explored (Kozol, Boucher, & Garofalo 1972). Monahan (1981) provides a particularly cogent summary of why clinical classification of violent offenders and is either not predictive, over-predictive, or minimally and sporadically predictive:

In the process of predicting violent behavior, clinicians appear prone to several types of systematic error, including vagueness as to what is being predicted, lack of attention to base rates of violent behavior, reliance on erroneous predictor items, and a failure to take into account information regarding the environment in which the individual is to function."

On the other hand, there have been numerous studies of predictors of criminal behavior, in particular of "recidivism," at least since Burgess (1928). Studies of parole prediction have consistently found a relationship between indicators of instability such as education, (employment, military, and marital) and parole success. (Mannheim & Wilkins 1955; Simon 1971). Instability also have been linked in various studies to outcome in mental illness and alcoholism (Gibbs, 1977; Ziegler & Phillips, 1961) as have the relevant predictors: Age at onset, intelligence, education completed, occupation, employment stability and marital status. Generally the body of literature supports the relationship, the younger the age of onset of instability, the poorer the prognosis.

Pritchard (1979) summarized a sample of 71 such studies using 177 different groups, based primarily on "actuarial" predictors. He concluded that a combination of such items as an offense of auto theft, the presence of prior convictions, stability of employment, age at first arrest and other arrests should account for a major portion of variance for large groups of offenders regardless of jurisdiction. The National Juvenile Justice Assessment Center (1980) defines "seriousness" via such assessment techniques as the Sellin-Wolfgang Seriousness Scale:

A serious juvenile offender is defined as one whose offense history includes adjudication for *five* or more serious offenses (in the Sellin-Wolfgang Scale) or one who is adjudicated for one or more offenses whose severity is equal to homicide or juvenile sexual intercourse as measured by the Sellin-Wolfgang Scale.

Most such scales depend on criminal background information which may or may not show significant relationships with clinical typologies (Megargee & Bohn 1979; Booth & Howell, 1980). In short, much continues to be made of the distinction between "clinical" and "statistical" methods, a distinction described concisely by Meehl (1954).

The mechanical combining of information for classification purposes, and the resultant probability figures which is an empirically determined relative frequency, are the characteristics that define the actuarial or statistical type of prediction. Alternatively, on the basis of interview impressions, other data from the history of the same type as in the first sort of prediction, we formulate, as in psychiatric staff conference, some psychological hypotheses regarding the structure and dynamics of this particular individual . . . This type of procedure has been loosely called the clinical or case study method of prediction.

This distinction between prediction methods using different data and different approaches need not continue to be a source of apparently unresolvable conflict and controversy and poorly predictive classification (Monahan 1981).

In practice, clinical and actuarial ap-

proaches function very differently. Yet it is important to keep in mind that they are merely *ends* of a *continuum* regarding the collection of data and methods for transforming the data into predictions. Almost all data have some subjective element to them . . . and there are identifiable commonalities in the "intuitive" clinical decision rules.

Statistical analyses of violent behavior have yielded such useful factors as past violence, age, sex, race, socio-economic-status, and opiate or alcohol abuse. Estimated IQ, residential mobility, and marital status, also appear to be related to violent behavior. Despite these encouraging "findings" of statistical predictability, Monahan pleads for: 1) clinical approaches when dealing with rare events not anticipatable by statistical analyses, and 2) the "pressing" need in the field of violence prediction for the inclusion of situational variables. He suggests that three of Moos' ways of conceptualizing and measuring human environments - personal characteristics of milieu inhabitants, functional or reinforcement properties of environments, and psychosocial characteristics and organizational climate - be used *in addition* to dispositional variables in predication strategies, based on the *interaction* of dispositional and situational variables. Findings of prediction research should reinforce "the rehabilitative ideal," in that such findings should provide critical, pivotal information for *both dispositional and intervention decisions* (Monahan 1977).

CONCEPTS OF INSTABILITY

Our assumptions are consonant with Monahan's view. We have assumed that correctional classification systems are concerned with two particular types of maladjusted behaviors, instability and violence, and that these behaviors occur in and interact with two types of correctional environments: community work release and parole supervision programs and institutions.

NEED FOR RESTRAINT

The criterion/definition of need for restraint in a classification system is based primarily on current and past history of violent behavior, including types, degree and circumstances of the violent behavior. A set of assumptions in the use/need for restraint include a belief that

criminal history is a fair type of evidence. Where there is a history of repeat or wanton violence, that history has been considered an acceptable standard for placing the individual in a secure facility without the requirement of statistical proof that there will be a repeat of the behavior.

Statistical and other evidence will, however, be used as a basis for classification to less secure facilities . . . In general, the presumption is that the offender is capable of doing what s/he was convicted of doing and is classified accordingly but this presumption can be overcome by affirmative evidence of low risk (Flanagan 1981 17).

It is possible to arrange in some rank ordered manner categories of violent behavior. This continuum would range from:

- None.
- Situation offense (without/with victim precipitation).
- Occurred in effecting or fleeing from the crime (not to include unresisting or fleeing victim, personal revenge).
- Escapes and attempted escape.
- Predatory violence terrorism, gangs, enforcer, for hire, extortion, intimidation.
- Extreme violence (use of shotguns, explosives, fire bombs, arson).
- Bizarre/gratuitous (home invasion injury, injury to unresisting or fleeing victim, torture, violence to animals or against particularly defenseless persons - children, elderly, disabled).

NEED FOR SUPERVISION

A great deal of evidence has been accumulated on the relationship between instability and general (societal) rule misconduct, criminality and recidivism. As noted previously, the relevant predictors have been generally established:

- Grades completed/IQ
- Military record.
- Employment history.

- Marital history/status.
- Age of onset of criminality.
- Extent (auto, burglary/theft)/frequency of criminal activity.

DESIGN CONSIDERATIONS

Given the theoretical assumptions and conceptual frame described above, several general considerations were recognized either as parameters or constraints by research consultants and project staff in the design of the IDOC classification system. The two most important:

1. Security/risk designation levels are the primary purpose of initial classification. After placement at the appropriate security level institution, it should be the responsibility of institutional staff to assign a custody level within that institution.
2. Critical needs (medical, mental health, mental retardation) are also of concern at initial classification. After placement, program needs are considered and assignment made by the institution against available resources: vocational, education and work.

These two areas of consideration attempt to account for two levels of decision-making regarding classification as shown in Figure 1.

These levels are the *system level* and the *individual - instruction level*. Where classification has tried "to do it all up front," reception-classification systems have generally failed to perform to expectations. Decisions at one level have not been accepted, followed up or implemented by another level. Reception centers are designed to determine institutional placement and to match classification of prisoners to classification of prisons, not to make specific decisions for each institution. Thus, we adopted the position that a classification system should first sort for system needs, then for individual needs. We also recognized that some decisions are better made by those who

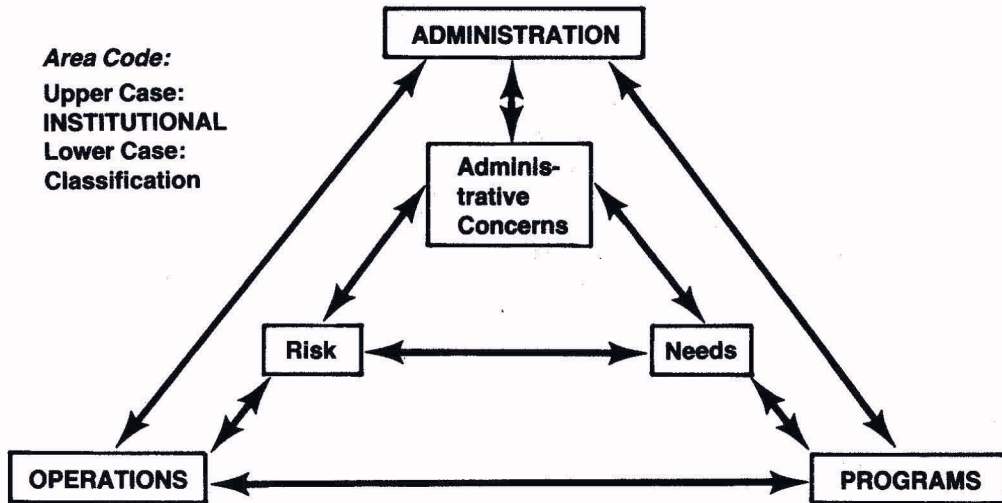
FIGURE 1: LEVELS OF DECISION MAKING IN CLASSIFICATION

System Level

- Security Designation
- Critical Needs Assessment
- Initial Placement Assignment

Institutional Level

- Custody Assignment
- Program/Work Assignment
- Housing Assignment
- Basic Services Delivery

FIGURE 2: INTERACTION OF CORRECTIONS FUNCTION & CLASSIFYING SYSTEM

are operationally accountable for day-to-day management of those decisions; in custody, work, housing, and program assignment.

Clearly, we also made a distinction between risk and need assessment. Risk assessment has to do with dimensions of behavior with which we are here most concerned - stability and violence. Its "system" purpose is to estimate the necessary allocation of resources to incarcerate individuals while addressing the major correctional goals (public, staff, inmate) of safety and basic care. The role that "needs" play in behaviors within the institution has never been adequately determined, nor its effect on restraint and supervision requirements. However, this does not mean that the agency may ethically or legally exempt itself from the resource/strategy/management issues implied or found in the delivery of basic services to the inmate population.

Finally, we realize that while it is important to have a conceptual model, it will always be necessary, given the complexity of human nature, to make judgments case-by-case. We identify three major areas that any classification system must address: risk, need, and administrative concerns. They, in turn, relate to the three major functional areas within a Department of Corrections: operations, programs, and administration. Their relationship is interaction as shown in Figure 2. Not until a classification system is able to address all three areas and

provide interactively information between and to all three major functions, does it really relay to the Director's and the Agency's requirements to develop, to implement, and to manage effective policy.

SUMMARY

A Director must be able to view classification information across the "operational" span of the agency. Only with such information can the Director create and influence policy, decide on future directions, efficiently allocate resources, implement policy decisions, anticipate and monitor problems, and decide which priorities must be shifted or realigned.

The theoretical assumptions and conceptual frame described in this paper led to two initial studies using 2000 cases. These studies suggested the potential parsimony and utility of our model instruments. Planned periodic testing over the next several years will, tell us more adequately whether or not Illinois' correctional policy can be continuously informed by classification data retrieved by our instrument and their project implementation process.

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