

REHABILITATION IN CALIFORNIA PRISONS

by

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I have worked as a behavioral therapist and a psychotherapist in treatment facilities for two decades, with chronically mentally ill, developmentally disabled, and dual-diagnosed people, from the ages of three and up. I was arrested in 2002. Any facility named the "California Department of Corrections and Rehabilitation" (CDCR) has a fundamental conflict that prevents success: One cannot punish ('correct') and rehabilitate at the same time. Any form of treatment, whether psychological, medical, or sociological, requires the person receiving the treatment to want to get better. We must agree on several

concepts before we start treatment, and the first thing we have to agree on is what 'better' means. Usually, this involves the therapist convincing the person receiving treatment that their idea of better is the right one; i.e., that society knows best. "Fake it 'till you make it," Acknowledge that your problem is beyond your control, Reality Therapy, are all ways of saying the same thing, that I know better than you.

As a child, teen, and young adult, I listened to my mother. Like most kids, I thought she was, at least usually, right about things. In truth, she wasn't. She was abusive, saddled with severe anxiety and panic attacks, narcissistic and possibly borderline. Even when I knew this I still listened to her, took my problems to her, and followed her advice for the most part. Why would I do that? The simplest answer is that she cared for me, and most importantly I **knew** she cared for me. As abusive as Mom was, she loved me. I cared about her -- **because** she cared about me. As many of the songs from the 1960's told us, love is the answer.

I've been in custody for almost twenty years now, and honestly I'm not feelin' the love. California provides for me solely because the Constitution requires it and the federal courts enforce it. Am I fed? Well, yes, low quality and often not enough, but yes. In the 1980's, the U.S. Supreme Court ruled that the State of Texas had to feed incarcerated people three full meals a day; so California provides three meals a day. DO I get medical care? Well, yes, pursuant to a three-judge panel established by the 9th Circuit Court of Appeals to oversee the unconstitutional prison medical system in California, but yes. What about rehabilitation? Actually no, the U.S. Supreme Court has never held rehabilitation to be a constitutional right. At least the CDCR isn't stopping me from taking free, mail order classes from a church-run rehab program. That's a plus, isn't it?

One thing I was told before I actually got to prison was that correctional officers are not your friend, but they are not the enemy either. Officers, just like poop, happen; it's the system that is broken. I've been fighting for nearly two years to get dental flosser picks given to indigent incarcerated people, like me, on this yard like at most other prisons. I've been sworn at by officers, told I was wasting a sergeant's time with "this b____s____," and read the riot act by an officer six-inches taller and half my age only inched from my face. Over a month's supply of flossers worth less than fifty cents per person. This isn't a one-time event either, it's the typical response to a request for what is seen as 'extras', not mandatory

for survival. (When confronted with an irate and apparently unhinged officer, a calm yet firm demeanor almost always defuses the situation. The officers are trained that incarcerated persons are always trying to take advantage of them, so once they realize that you aren't they become much calmer.)

When this is a typical interaction with an officer, how do you convince the incarcerated person that society, as typified by the aforementioned officer, is 'right', caring about the incarcerated person, should be looked up to and listened to? That, as a psychotherapist, sounds like a hard row to hoe. Even if the therapist is seen as on the incarcerated person's side, society, which established the norms that the incarcerated person is to aspire to, isn't. This social division breeds the development of subcultures that do value the incarcerated person. Whether these are actual criminal gangs like the Nazi Low Riders, counterculture groups like the Five-Percenter, anti-government organizations like the Maoist International Ministry, or simply the incarcerated culture (in prison lingo, who ya run with), it provides the feeling of belonging that disenfranchised incarcerated people need. Psychologist Abraham Maslow wrote about human needs, and one of the basic needs is the need to belong, have a family, have a culture, have a society. If this isn't available, people will create it. The need is simply too strong to abandon.

The recent CARES Act, providing a stimulus package to the economy to offset the effects of the COVID-19 stay-at-home order, is a good example. Initially, it was denied to incarcerated people. Homeless, drug addicts prostituting themselves on the street and their gang-banging pimps got a stimulus check, but incarcerated people didn't. What does that tell the incarcerated person trying to rehabilitate? Are they cared about by society? A lawsuit has recently required the government to pay the stimulus checks to incarcerated people, reinforcing the perception that society doesn't care. The courts had to force society to care, begrudgingly.

I am involved in helping other incarcerated people, farther along in the process than I am, in their preparations to go before the Board of Parole Hearings. While a number of them have made impressive changes in their lives, some so significantly that I barely recognize them from ten years ago, in my opinion they grew in spite of, not because of, the CDCR's treatment programs. Most incarcerated people have been through the classes and self-help programs many times and only in middle-age do they finally 'recover'. This isn't a flaw in the treatment program, I've run similar groups before and am confident of their efficacy; where the problem comes in is in the relationship between incarcerated person and therapist, called rapport. If the person receiving the treatment isn't positively engaged with treatment there won't be any progress. This has been a topic of debate throughout the history of psychology: How does the therapist establish a clinical rapport? At one point, Sigmund Freud even resorted to slapping his patient's forehead with the heel of his hand exhorting, "Stop resisting!"

While I do not advise assaulting incarcerated people in the name of treatment, I do advise finding a new way to gain the cooperation of incarcerated people in treatment. The CDCR seems to be at the beginning of changes that could lead to such positive relationships. Dismantling the prison-industrial complex

would be a good first step and seems to be happening. I've read articles suggesting officers in California are being held to a higher standard of professionalism than in the recent past. While establishing stiffer consequences is good, training changes must be concatenate with higher expectations. While the dramatic downturn in the economy due to COVID-19 and massive California fires in 2020, and subsequent cost cutting, it is unlikely that training changes will be forthcoming. High expectations without improved training is simply one more example of the state abandoning it's employees, and that leads to the resentments that police are expressing during the Black Lives Matter movement. Officers are trained, incorrectly in my opinion, to choke arrestees into submission. Then, when they do what we expected and trained them to do, we prosecute them for murder. California is doing the same disservice to correctional officers in the CDCR.

I have seen examples of correctional officers doing it right. A C/O I met when I first arrived at a regular prison (other than a reception yard) had 18 years of experience according to the stripes on his sleeve. He never wore the one-piece jumpsuit and combat boots most C/O's wear, preferring a shirt-and-slacks uniform and dress shoes. Consummately calm and professional, he never yelled, swore, or insulted anyone. He wasn't a 'mark', as the incarcerated people say, no one ever took advantage of him. During a fight, he was able to defend himself without unnecessary violence. He was always available to the incarcerated people who need to talk, always positive in his interactions, and spoke softly and simply to people who were upset, and almost never had problems with any incarcerated people. He retired in 2010. He was respected by everyone, staff and incarcerated people alike.

He was, unfortunately, an exception to the rule. Most officers in the CDCR seem to consider incarcerated people as the enemy, not just in general either. Openly hostile, often using foul language, and 'no' is the start to any discussion about almost anything is de rigueur. Recently, at the prison I'm housed at, an officer received a disciplinary report for using foul language directed at an incarcerated person. I was stunned. Yes, the California Code that governs officer behavior specifically restricts profane or abusive language being used with incarcerated people. (See 15 CCR 3391(a)) This has been the law for decades, and all those years it was routinely ignored. It is unusual events like this that presents me with a little hope for improvement. This author wants to stress that in his opinion, it is not a 'few bad apples'; it is endemic. It is cultural, and is a function of how these otherwise fine men and women are trained and what is expected of them. All people will rise to meet expectations, it is one of the beautiful aspects of humanity. Problems come up when the expectations are faulty. This is the issue in the CDCR.

Other problems exist and reinforce the 'us versus them' mentality pervasive in the CDCR and that is so lethal to rehabilitation. I have been on the waiting list for a self-help group called, "How It Works", a more generic version of 12-Steps inclusive of addictive behavior disorders as well as more traditional drug and alcohol dependency, for more than two years. Admittedly, COVID-19 has put the kibosh on groups of any kind right now, however I was on this waiting list for for more than a year before March 2020 and the associated lockdown. I am not allowed to attend any classes or treatment groups because I am five years or more from my earliest parole date. (As this author writes, there is a law waiting for the governor's signature that would grant parole in my circumstance as early as parole. If signed into law, I would suddenly become eligible for these classes.)

date. (As this author writes, there is a law waiting for the governor's signature that would grant people in my circumstances an earlier parole date. If signed into law, I would suddenly become eligible for these classes.) The only recovery programs I am in are correspondence courses, PREP and GOGI. I was able to get involved in these only through incarcerated people, not the CDCR.

I am in Vocational education, the only vocational class on this yard, studying Office Services, and learning the basics of Microsoft Office. The fact that I worked all my adult life in an office, and had extensive computer experience including network administration, seems to be irrelevant. I took no placement test other than basic reading skills. No aptitude test, no interest survey, not even an interview with the teacher. Just, I'm your counselor, it's open, you're in. It has been twenty years, I admit, so I am getting an update and refresher.

Most incarcerated people don't care what classes or groups they are in so long as they get credit for the class and therefore a reduction in they time they need to serve. While I support ANYTHING that that reduces an incarcerated person's sentence, everyone in California is over-sentenced in my opinion, using the reduction of torture as a negative reward doesn't strike me as getting us all on the same side. "Do what I tell you to do and I'll stop torturing you sooner," doesn't strike me as facilitative of clinical rapport. Until California prisons become humane, in both physical environment and manner of care, there will be little rehabilitation and lots of recidivism.

California prisons are so harsh that nearly everyone in the system is disenfranchised, disillusioned, and discombobulated. But not rehabilitated. I recently read an article by Brie Williams, M.D., who specializes in prison medicine. She stated that it is widely accepted that 'elderly' incarcerated people begins at age fifty, because the U.S. facilities are so harsh and medical care so poor we age at a more rapid rate. I sleep on a metal plate covered with a cheap yoga mat for a mattress. Pillows, when you can get one, are plastic covered and never comfortable. Seats in the dayroom are steel stools welded to the table upright. Bare concrete is everywhere with rusted metal, painted over and blistering, for all the furnishings. The softest surface in my cell is me. At my current prison, there are eight people living in a room about 16 by 17 feet, with one toilet and two sinks. The upper bunk of the bunk bed I sleep on is so low that I cannot sit upright. Early on in my imprisonment a psychologist told me that, "There is life in prison." I replied, "Really? It feels more like protracted death." At the time I was being flippant, but I was also being prophetic.

Imagine being in mild, constant physical pain with no way to get comfortable, always hungry and thirsty but not desperately so, and surrounded by people you don't know and have no control over who you live with. You have little to no contact with your family, little or nothing to do all day. You have lots of questions but no one seems able to answer them. The people in charge are usually rude, crude, and down on you. Rules change based on who came to work that day and not knowing the 'rules' is never an excuse. Many of

the people around you seem mentally ill, often having bizarre behavior or speech patterns. If you do make a friend, you are only together for a few months before you or they are moved. That is the 'life' available in prison. Prior to my arrest, had I been asked to design an environment to create mental health problems, I couldn't have done much better than the prison system.

I have always been of the opinion that people are a precious commodity, not to be wasted. Prison in California is for punishment by legislative decree, making it nothing but a waste. Rehabilitation is a laudable goal and should be the sole goal of the criminal justice system. Incarcerated people and staff alike are wasting time as long as prison goals are to punish and not rehabilitate. The waste is not just personnel either. Everything here could be providing productive and meaningful services in the society; land used for productive purposes, materials recycled and made useful, efforts redirected to profitable goals that promote society.

Society will always need some type of long-term custody for individuals who, for a number of reasons, can never be allowed to return to society. Think John Wayne Gacy, the notorious serial killer from the Chicago area. These people are very rare; nearly everyone in prison could be released, eventually, with little impact on community safety. Consider for a moment, that everyone in prison will be released someday. Should we beat them down, make them feel worthless, try to 'scare' them straight? We risk resentment, leave untreated or worsen underlying mental health problems, unrepaired traumas, continuing addictions, and no life skills other than criminal enterprise. Should we instead give these men and few women a reason to want to recover, a desire to rejoin society positively, become productive members our society? Here, our only risk is recidivism, something California already does worse than any other state according to the Sacramento Bee. The choice seems clear.