

Editor's Commentary

JONAS R. RAPPEPORT, M.D.*

Since its creation by the Maryland General Assembly in 1951, the Patuxent Institution has become a major topic of discussion by many in the fields of criminology, correction, civil rights law and forensic psychiatry. Was the Institution, indeed, a noble experiment destined to find a means of increasing the safety of the public while at the same time treating some dangerous recidivists, or did it constitute merely another intrusion by the state upon the freedom and liberty of some of its citizens?

No other public institution in the history of corrections has been so beleaguered by constant criticism, law suits and other impediments to its successful operation. Patuxent has, in all probability, been the most sued institution in America, and yet the courts have consistently upheld the right of the state to select a special group of individuals for the special status of "defective delinquent." The basic philosophy underlying the creation of Patuxent was that it would be possible to select a group of dangerous recidivists and to incarcerate them indeterminately. By not releasing them until they were believed to be no longer dangerous, society was protected. Treatment, when possible, was only a secondary goal.

Following World War II there were great hopes for what psychiatry could do for society. The number of psychiatrists rapidly increased from a pre-war level of approximately 4,000 to a current level of 23,000. Some believe that these exaggerated "promises" represented the grandiosity and self-styled omnipotence of psychiatrists, while others believe that the "promises" were the result of society's wishful thinking in seeking easy solutions for its most difficult problems. Needless to say, both factors probably contributed to the advancement of great expectations from the psychiatric-medical-treatment model, particularly in the area of corrections. However, if one looks carefully at some of the committee reports that led to the establishment of Patuxent or the reports of the two subsequent "Blue Ribbon" committees that investigated Patuxent, it is quite clear that they were very cautious about the therapeutic results Patuxent might produce.

Shortly before Patuxent opened in 1955 the human rights movement began with the Supreme Court decision in *Brown v. Topeka, Kansas Board of Education*. This movement led to a great concern for individual rights and an increased preoccupation, in Patuxent's case, with the indeterminate sentence. More recently there have developed an increasing skepticism of the so-called medical model in corrections and a tendency to replace it with the

*Dr. Rappeport is Chief Medical Officer of the Supreme Bench of Baltimore and a past President of the Academy.

criminal-justice model of Norval Morris, David Fogel and others.

The *Bulletin* has, in the past, published several articles about Patuxent: Ted Sidley's article in Volume II, Number 2, "The Evaluation of Prison Treatment and Preventive Detention Programs: Some Problems Faced by the Patuxent Institution," and my response to it in Volume III, Number 1, "Patuxent Revisited"; also Sigmund Manne and Dave Rosenthal, "Decision-Making Regarding Release Programs for Committed Criminal Offenders," Volume IV, Number 1.

Arguments about Patuxent centered around the abilities to accurately diagnose "defective delinquents" and to predict dangerousness, the efficacy of the treatment programs, and the constitutionality of the indeterminate sentence. As those who opposed Patuxent became more vocal, the General Assembly of Maryland became more concerned. In each of the past four or five years "ripper" bills were introduced to do away with the entire institution and transfer its facilities to the Department of Correction. In the 1976 session of the General Assembly the House of Delegates passed such a bill. It was defeated in the Senate, however, with the understanding that the Governor would hire an outside research firm to conduct a thorough study of the institution and attempt to answer several questions about Patuxent's effectiveness. This study was awarded to the Contract Research Corporation of Belmont, Massachusetts, which gave its final report to the legislature on March 1, 1977. At about the same time, after a particularly spectacular sexual-kidnap-murder, the Governor became extremely concerned about very dangerous offenders who could not apparently be adequately dealt with by the mental health system or the correctional system. He established the Commission to Evaluate the Treatment of Aggressive Offenders to look at some of the problems created by individuals who appeared to be falling through the cracks of the currently established mental health and correctional systems. This Commission submitted a proposal to change the entire concept of Patuxent, primarily by doing away with the indeterminate sentence and the frequent judicial review of the cases of Patuxent inmates. After revisions suggested by the CRC, this new legislation was passed and signed by the Governor and became effective July 1, 1977.

Since Patuxent represents one of the major involvements of psychiatry in corrections, the editors of the *Bulletin* felt that a thorough look at Patuxent was in order. The excellent CRC study presented the best possible opportunity to find out what has happened in the twenty-one years (1955-76) of Patuxent's existence under its original model. We are privileged in this special issue of the *Bulletin* to have a series of articles about Patuxent from those who conducted the CRC study as well as a critique of the study and a historical review of corrections and Patuxent. These latter two articles are by two sociologists with many years of association with Patuxent as Board members. Finally, I have presented a discussion of the new legislation and the text of the actual statute.

This issue will serve as the basis for a panel discussion at the 9th annual meeting of the Academy in New Orleans.

Dr. Peter Lejins, an internationally known criminologist, Professor of Sociology and Director of the Institute of Criminal Justice and Criminology

at the University of Maryland, and a member of the Advisory and Governing Board of Patuxent since its inception, has written an excellent historical review of correctional philosophy and the Patuxent experiment.

Hal Shear, Officer-in-Charge for the Contract Research Corporation, presents an overview of their study.

This is followed by an article by Bert Hoff, J.D., the Project Director for CRC and the Director of the Decision Making Team. Bert is a graduate of Yale and the University of Pennsylvania Law School and has been active as criminal justice consultant and planner. He has also had some psychiatric training.

Dr. Neil Singer, Associate Professor of Economics at the University of Maryland, along with Dr. Howard S. Bloom, Assistant Professor of City and Regional Planning at Harvard, conducted the Cost Effectiveness part of the CRC study. In this issue they summarize their findings in a way that I feel is clearly understandable to the non-economist.

Next, our own Browning Hoffman, who is Associate Professor of Psychiatry and Professor of Law at the University of Virginia medical and law schools, and was leader of the Diagnosis Treatment evaluation team for CRC, presents a thorough review of his study.

Dr. Hank Steadman, a frequent participant at American Academy of Psychiatry & the Law meetings and Director of the Special Projects Research Unit of the New York State Department of Mental Hygiene, and leader of the Recidivism evaluation team, summarizes his group's findings.

Dr. Robert Gordon, Associate Professor in the Department of Social Relations at Johns Hopkins University and a member of the Patuxent Advisory Board for the past nine years, offers a thought-provoking critique of the CRC study with particular attention to the issues of dangerousness and recidivism. (The CRC staff have been given an opportunity to respond to Dr. Gordon in their articles.)

We had hoped to include another critique directed to the treatment part of the study. The author, however, has become ill and cannot meet the publication date. We hope that his article can be published in a future issue.

Finally, I have presented a discussion of the "new" Patuxent statute along with the text of the law itself, which became effective July 1, 1977.

On Saturday morning, October 22, at the annual meeting of the American Academy of Psychiatry & the Law in New Orleans, there will be a special panel to discuss Patuxent and the CRC report. This issue of the Bulletin will be the basic reading for this panel.

It is hoped that everyone will have an opportunity to read this issue and participate in the panel discussion in New Orleans.