

Inservice Training of Nonprofessional Counselors in a Correctional Institution Setting

HAROLD S. BERNARD, Ph.D., and
BERNARD S. YUDOWITZ, M.D., LL.B.*

The training of counselors who work in a correctional institution setting presents a unique set of challenges, and yet no mention of it exists in the forensic psychiatry literature. There has been some writing about *psychiatric* intervention with prisoners (e.g., Roth and Ervin, 1971¹), but for the most part, on-the-line counseling work in correctional institutions is performed by people with limited, if any, formal mental health training. Thus, counselors in prisons, houses of detention, and jails around the country fall under the rubric of "non"- or "para"-professionals. The irony is that these individuals, with minimal training, have one of the most difficult populations as their clientele. Thus, inservice training is especially important in such settings.

The present authors were involved in such a training program. Under the terms of a small subcontract which was given to the hospital with which we were affiliated, the first author made weekly visits to a House of Correction over a 10-month period to work with the counseling staff, while the second author coordinated the overall program with prison officials. The prison houses individuals convicted of misdemeanors and serving terms of up to 2½ years. The mandate was to provide training and professional back-up to the counseling staff. Accordingly, the first author engaged in two major activities each week:

(1) Interviewing inmates who were proving most difficult for the counselors, and talking with the individual counselor after each interview to devise strategies for dealing with the inmate in question more successfully; and

(2) Conducting a 45-minute seminar for the counselors, at which a variety of issues were addressed.

The intent of both activities was to increase the skills of the counselors to deal with the men to whom they were assigned. Over the course of the 10-month training program, certain guidelines for the effective training of nonprofessionals in this kind of setting became clear to us.

Client Variables

Many of the counselors started out with virtually no knowledge of psychopathology. However, they had all heard most of the terms used in psychiatric parlance and were eager to use the terminology and learn the distinctions amongst the various diagnostic categories. Though the counselors posed most of their questions in terms of fine discriminations amongst diagnostic categories, it became clear that the most useful training was at a more elementary level. Most of the work was at the level of helping the counselors understand the basic nature of psychological symptomatology and the differences between and among neuroses, psychoses, and characterological disorders. Time was devoted to explicating the difference between a symptom which is experienced as ego-

* Dr. Bernard is currently an Assistant Professor of Psychiatry (Psychology) at the University of Rochester Medical Center, Rochester, New York. Dr. Yudowitz is Director of the Institute for Law and Psychiatry at McLean Hospital, Belmont, Massachusetts.

syntonic and one which is experienced as ego-alien, and to consideration of the extent to which a symptom impairs reality testing and overall psychological functioning. We found that it is not particularly crucial for a counselor with limited training to understand the difference between a passive-aggressive and a passive-dependent personality disorder, or between a depressive neurosis with features of anxiety versus an anxiety neurosis with depressive features, or a schizophrenic with manic features as opposed to a manic-depressive psychotic. Rather, the important thing is for the counselor to understand the basic nature of symptomatology, its pervasiveness, and its accessibility to therapeutic intervention. To the extent that the counselors developed sophistication in making these broad distinctions in working with their clientele, they gained the tools that were of real benefit to them in their work setting.

Perhaps the greatest focus of attention during the training sessions was upon the area of management issues. The counselors were confronted with sophisticated and varied attempts at manipulation by their clients, and were often stymied as to how to respond. A great deal of time was invested in one female counselor who was new to the job and was assigned as one of her first cases a slick con man who was an extremely adept manipulator. He had been quite successful at getting guards, probation officers, and even high echelon officials within the prison to intervene on his behalf for passes, telephone privileges, and other special forms of treatment. After the counselor began denying some of the requests made by this inmate, she found herself beseeched by all of these people to provide him with the kind of special treatment he wanted. The client was successfully avoiding dealing with his feelings of hostility toward the counselor for not giving him everything he wanted by getting all of these other people to intervene on his behalf. Discussion with the counselor focused on the importance of getting the client to deal with his feelings about her within the counseling relationship. A great deal of her effort was devoted to getting these various third parties to suggest to the client that he deal with his feelings directly with the counselor and that they avoid complying with his demands that they intervene. This strategy seemed to be working well (in that the client's anxiety level during his counseling sessions was rising) until he succeeded in persuading a judge to transfer him to another institution. Though the work with the client was thus short-circuited, the sessions provided an excellent initial training experience for the counselor, illustrating how some clients manipulate their environment so as to avoid and defuse the anxiety they are experiencing within the counseling relationship.

Another important function of training counselors at this level is introducing them to alternative ways of thinking about and working with their clientele. Almost all of the counselors initially thought about their clients as isolated individuals with varying degrees of severity of psychopathology. A great deal of time was spent in helping them to view their clients as integral parts of their various systems, essentially imparting the principles delineated by Jones and Weeks (1973).² Introducing the systems approach gave the counselors a new way of conceptualizing their clients. Emphasis was placed on both the prison and the family as social systems. The authors discussed the ways in which these systems elicit particular behaviors, and talked about how the responsibility for an individual's deviance is often shared amongst the various component parts of the systems of which he is a part.

As the counselors became increasingly comfortable with the systems approach, the authors took up the implications for intervention. The counselors came to see that it did not always make the most sense to work with the individual client as if he existed in a vacuum. They moved toward a definition of their roles which was considerably broader and more flexible than the way in which they had originally thought of themselves. The counselors came to think of making interventions at the institutional level as appropriate at times, and they began exerting leverage to improve the overall climate of the institution.

As the year progressed, they also became familiar with, and began to utilize, counseling with both couples and families. Once again, training focused on the rudimentary precepts of these approaches. We talked about some of the ways to help couples and families talk with each other, and the importance of maintaining a position of neutrality, rather than taking sides with one side or the other. Though the counselors' work with couples and families could not be closely supervised, as would have been ideal, it became clear over the course of time that they had gained an important additional perspective which made their view of their clients and their jobs richer, fuller, and more sophisticated.

Counselor Variables

One of the most important areas the training program focused on was the problem of making judgments as to which clients the counselors could work productively with and which did not merit a significant investment of their time and energy. Most of the counselors started out with a "savior" mentality: i.e., they believed they could help everyone if only they worked hard enough and cared enough. The difficult challenge in this area was to help the counselor develop a more realistic view of what he could and could not accomplish, without eradicating the enthusiasm he brought to his job. The goal was not to stamp out the desire to be helpful, but rather to help channel it in the most productive directions.

Initially, many of the counselors conveyed the belief that there is a magical way to overcome every form of resistance with which they might be confronted. The process of learning that many inmates are simply not amenable to a counseling intervention, at least at a given time, is a painful one, as it involves coming to grips with the limits of one's own potency. A great deal of time was invested in working with the counselors on setting out various alternative approaches to the multiple forms of resistance manifest by their clients; in those cases in which these approaches were tried and failed, we dealt with the feelings aroused in the counselor by his inability to reach the individual in question. As the counselors came to accept the limits of their abilities, their work with those inmates with whom they had ongoing contact seemed to improve.

A related problem is setting realistic goals for those clients with whom it is possible to work. Once again, most of the counselors started out believing that basic personality change could be brought about in many, if not most, of the people with whom they worked. In fact, of course, this is rarely, if ever, possible. Firstly, the settings in which inmates are typically confined are usually much more anti-therapeutic than therapeutic in nature. Secondly, a great many of the inmates bring well-entrenched personality disorders to the counseling situation. Thus, counselors in correctional institution settings are up against enormous odds, in addition to the limitations of their own abilities. Bringing the counselors to an appreciation of these realities was a major focus of the training effort.

Once these realities had been faced, the discussions addressed the issue of defining realistic goals within this context. For instance, with many of the violent inmates, the group often agreed that an attainable goal was to help them gain some understanding that there is a difference between feelings and behavior: i.e., that once they gained some insight into what kinds of things made them angry, and some ability to recognize their feelings, they had options concerning whether and how to give these feelings behavioral expression. With inmates having long criminal records, the authors often attempted to get the counselors to confront the inevitability of their spending most of the rest of their lives in jails unless they found alternative ways of behaving on the outside. Thus, the group often agreed that any attempt to work through psychodynamic conflicts would be fruitless, and opted instead for imparting certain elementary skills and confronting reality choices with them in as straightforward a way as possible. This

involved a substantial reorientation for many of the counselors, and was a gradual process evolving over time rather than an alteration that took place overnight.

The issues of limitations to effectiveness and setting of realistic goals lead directly into the broader area of counter-transference. This is an area in which counselors in correctional institution settings are often completely naive. Like most mental health professionals, they find it much easier to focus on the psychopathology of the client than on the ways in which their feelings and biases may intrude upon the counseling relationship. Since the clients are prisoners who have committed acts about which most people have strong feelings, it is especially important to help counselors in this kind of setting to begin to tune into their feelings about the people with whom they are working. When asked how they felt about murder, rape, homosexuality, and other major crimes, most of the counselors were at first surprised and defensive, claiming either that they did not have feelings about these things, or that these feelings were irrelevant to their work with their clients. As the counselors discussed various cases and it became clear that their feelings about their clients were often having an important effect on their relationships with them, their reaction was often to try to stop feeling the way they did. The difficult lesson to convey to them was that the job of a counselor is to know oneself and the feelings and biases one carries around, rather than to be all-accepting, so that one can monitor his feelings within the counseling relationship and thereby minimize the extent to which they intrude in working with particular clients. Once the counselors came to appreciate that it is all right to have feelings about the people they were working with, they were freed from making unreasonable demands upon themselves not to have such feelings, and thus could be more human and natural in the way they related to their clients.

Summary and Conclusions

Inservice training of nonprofessional counselors in correctional institution settings is a challenging undertaking. This paper attempts to identify some of the areas that are important to discuss in such training, and the level at which each issue is most usefully addressed. These topic areas fall under two headings: those that pertain to the nature of the clientele, and those that pertain to the counselor as a para-professional and a human being. Under the former category, the areas discussed include the nature of psychopathology, the management of cases within the prison setting, and the introduction of a systems theory approach to supplement and enrich the perspective of the counselor. In terms of counselor variables, the issues addressed include realistic assessment of which inmates are amenable to a counseling intervention at a particular time, the setting of realistic goals with those clients with whom the counselor decides to work, and the various ways in which counter-transference can get in the way of working effectively with various clients. We feel that addressing these issues with counselors in prison environments offers significant payoff in terms of the quality of services they are able to provide to people in desperate need of high-quality mental health services.

References

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