

Teaching "Street Law" to the Criminally Insane

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Introduction

The purpose of this article is to focus attention on a novel approach to teaching a course in law to non-lawyers, and specifically to report on its use with the patients in the forensic division of a mental hospital for the first time. The idea of teaching this course to forensic patients was generated from two sources. First, these patients had shown a real interest in learning but were apathetic toward traditional methods of therapy. Second, they had a genuine interest in law since most of them had been dealing with the criminal justice system for many years. It was hoped by the authors that the enthusiasm for this enterprise, shared by students and teachers alike, might spread to other divisions of the same hospital and to other institutions.

What is Street Law?

Street Law is a course in practical law for non-lawyers. Its curriculum is used in classes for inmates and staff of correctional institutions, students of community colleges, adult education centers, high schools, senior citizens centers, and many other institutions. For the first time, in the spring of 1978, a Law course was offered to mental patients who had been found not guilty of a crime by reason of insanity.

The Street Law course originated in 1972 as a Georgetown University Law Center program in Washington, D.C., in which law students began teaching the course in D.C. public high schools. Two years later, the Street Law course was expanded into correctional institutions. In the Fall of 1977, a staff member of St. Elizabeth's Hospital (the mental health facility in the District of Columbia) inquired about the feasibility of teaching Street Law to their patients.

Up to that time, two fourteen-week courses were offered to residents of five correctional institutions each year, and a full course was taught in all

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D.C. public high schools. In the institutions, law students team-teach a course consisting of criminal, correction, consumer, family, and housing law. Emphasis is placed on innovative teaching techniques in the classroom, including roleplays, mock hearings, and simulation activities.

History of The National Street Law Institute

The National Street Law Institute, an outgrowth of the D.C.-based Street Law program, was created to offer increased opportunities for citizen education in law, and is organized to provide technical assistance, training and curriculum materials to various groups interested in establishing law education programs.

The objectives of the Street Law program for mental patients are similar to those for inmates and include:

- (1) providing patients with practical legal knowledge for use in their daily lives;
- (2) broadening students' perspectives to enable them to see all sides of a legal problem through a better understanding of the law;
- (3) improving analytical skills and promoting informed critical thinking on the part of institution staff and patients;
- (4) developing in the patients a willingness to use legal means to change law and policies; and
- (5) sensitizing future lawyers to the social and legal concerns of mental patients.

Taking Street Law to St. Elizabeth's

In the Fall of 1977, one of the authors, who, as well as being a psychiatrist at Saint Elizabeth's Hospital, was also working toward a law degree, joined forces with the educational therapist in the forensic division to make the Street Law course available to the patients.

The issue was raised whether or not some conflict of interest might be present in having a staff psychiatrist teach a law class to his own patients.

The proposal was to keep the class as similar as possible to classes held in other correctional institutions. The student body would be recruited from patients and staff members from other maximum security wards. Recognition for satisfactory completion of the course would be made in the staffer's file.

The staff attorney of the mental facility supported the course as an educational endeavor, but was emphatic that the course should not be designed to give legal advice to patients about their particular cases.

Law Student Model

Street Law comes in many formats and models. The law student model, based at Georgetown University Law Center, has been replicated in various states around the country. The Georgetown model uses law students from the Consortium of Universities to teach a fourteen-week course for four clinical credits, because student teachers were not

attorneys and members of the bar authorized to give legal advice. This teaching session was part of the correctional program.

The law students are required to attend a weekly seminar for their own instruction in substantive law and appropriate teaching methods, to submit weekly lesson plans detailing the objectives and classroom techniques used for the next two classes, and to teach a one and a half hour session twice each week. Five observations are conducted by the attorney-educator staff of each class to provide useful feedback on the law student's classes.

The books used in the classes are *Street Law: A Course in Practical Law* (West 1975) and *Street Law: A Course in the Law of Corrections* (West 1976). A teacher's manual accompanies each of the two books and provides answers to all problems posed in the student books. It supplements the texts, giving additional case cites, and provides model examinations, selected bibliography, sample mock trials, and annotated lists of audio-visual aids for each chapter.

A Typical Roleplay — "Arrest and Search"

Part I: At a street corner meeting, police officers Jones and Smith are told by Fingers McGee, who has been a reliable informant in the past, that just twenty minutes earlier he saw a six foot white male who "looked like" Bill Johanson and whom the police don't know, being chased down the block by the owner of the Dixie Liquor Store. McGee says that Johanson had been carrying a sack and a knife and was probably headed toward his home some two blocks away (apartment number given). McGee also tells the police officers that he knows that Johanson is a drug addict.

Roleplay this street encounter.

Part II: About ten minutes before their encounter with McGee, Jones and Smith had received a police radio report indicating that a robbery had taken place at Dixie Liquors. The report noted that a white male, about six feet tall, had committed the crime according to a statement given to police by the store owner.

Jones and Smith, deciding to pursue McGee's tip, go to Bill Johanson's house. When they arrive, they find him sitting at a desk, nodding and obviously on drugs.

Roleplay this arrest and search situation. (Before this portion of the roleplay, the two police should be given a few moments to confer as to the strategy they will use in the arrest. The following items should be in Johanson's home: a gun in the desk drawer, a knife on the desk in plain view of the police, a sack full of money in the far corner of the room, and a small package of heroin in Johanson's shirt pocket.)

Basically, if proper procedure has been followed, a roleplay would have gone much like this:

1. Fingers McGee, the police informant, would have been questioned in an organized manner to establish his credibility and obtain all relevant

information regarding a bank robbery suspect, Mr. Johanson.

2. The police officers would have discussed whether it was necessary to obtain a warrant to search, seize, or arrest the suspect.

3. Once arriving at the door of the apartment, the police would be required to knock, identify themselves, and announce their purpose. If there were no response, the officers would have had to go to a judge or magistrate to obtain a warrant before entering the apartment. The officers could have entered if the defendant had voluntarily consented to their entry. Usually the police would post one officer outside the apartment while the other went for the warrant.

4. The officers would have read the suspect his Miranda rights after his arrest.

5. With a search warrant the officers would have searched the premises and seized any items that were described in the warrant, any incriminating items not mentioned in the warrant which were in "plain view," or any weapons, evidence, illegal or incriminating items seized in a search "incident to a lawful arrest," or seized in a search to which the defendant voluntarily consented.

Without a warrant, the officers, if properly in the apartment, could have taken any incriminating items found in "plain view," any weapons, evidence of the crime, or illegal or incriminating items taken from the defendant and from the area within his immediate control in a search "incident to a lawful arrest," or seized in a search to which the defendant voluntarily consented.

6. The suspect would have been taken to the scene of the robbery for identification, then to the station house to be booked.

Report of How This Roleplay was Conducted in Two Locations

Part I: In the class held for inmates of the D.C. Jail in the 1978 Spring semester, the two inmates acting as police officers closely questioned Fingers McGee, the informant, as to whether or not he had reason to have a grudge against the suspect, Johanson. They got an admission from the informant that, in fact, Johanson and he had had a fight the night before in a pool hall, therefore lessening the credibility of the informant. They also got detailed information about the address of the accused, whether or not he lived alone, and a more detailed description of the accused's clothing. The informant then inquired about his payment, which the officers promised to give him later on.

Part II: Upon ascertaining that this was the door to Johanson's apartment (the address given by the informant), the inmate cops, without a word, broke down the door and entered with their guns drawn. Without identifying the nodding individual sitting at the desk, the (inmate) "officers" beat him over the head with their imaginary gun butts and threw the suspect to the floor. While kicking him they asked where he was that night. These "officers" seized the knife from the desk and then

slammed the accused against the wall to conduct a full search. No Miranda warnings were given. A packet of white powder was removed from the accused's pocket, and the bag of money in the corner of the room was seized. The entire room was ransacked, and the gun was discovered at some distance from the accused.

At this point the officers led the accused away to be viewed by the owner of the liquor store for identification.

St. Elizabeth's Hospital

The roleplay of "Fingers McGee" conducted by this group of hospital patients and staff closely resembled the roleplay of the inmates of the D.C. Jail. This seems only natural, because, with the exception of the staff, these students had spent time in jail or prison. In spite of the enthusiasm with which each person entered into playing the assigned role, there was still considerable confusion as each person tried to decide how he should carry out his role. Previous instructions regarding the law of arrest, search, and seizure were ignored for the most part. There was a garbled attempt to read Mr. Johanson his Miranda rights, but it was apparent that the patients who were acting the role of officers had already decided that Mr. Johanson was guilty. With very little ceremony, he was arrested and searched; the drugs were seized, and he was hauled off to jail. The real value of the roleplay was achieved through the debriefing, where each person was asked to compare his behavior with what the law actually requires through constitutional due process and protection of the rights of suspects.

Profile of the Typical Patient/Student in The St. Elizabeth's Street Law Course

The typical patient/student was a thirty-year-old black male, who was twenty-seven years old on his first admission to the Hospital. His diagnosis was paranoid schizophrenia, and he was overtly psychotic half of the time. He had been found not guilty by reason of insanity, of charges ranging from petty larceny, burglary, robbery, assault, rape, and murder. His most common charge would be assault with a deadly weapon. He would be receiving psychotropic medication, and his general behavior would cover a fairly wide range, from (1) quiet to hypertalkative, (2) oversimplified to superintellectualized verbalization, and (3) psychomotor retardation to agitation.

Twenty patients attended the class regularly. Twenty staff members attended as time permitted. Patients and staff as students together in a class became a unique feature of the overall treatment program in the Division, since this was the only instance where staff and patients met together as equals. This cost the staff nothing, but gave the patients a feeling of normality.

Relationships of Diagnostic Category, Treatment Value, and Student Response in Class

Although the overall general response of students would have made it difficult for the outside observer to identify this as a group of mentally-ill patients, certain outstanding exceptions are worth mentioning.

Therapeutic benefits to the patients exceeded anything that might have been anticipated. Mr. R. is an illiterate epileptic with overprotective and impulsive behavior which is fairly well-controlled by anticonvulsive medication. In spite of his inability to prepare for the classes on his own, he made outstanding efforts to get others to help him, and as a result was able to make some appropriate contributions in class. He accepted the positive reinforcement given for this behavior, and although his level of performance was nowhere near the top of the class, his level of self-esteem increased beyond anybody's hopes. The outcome was his cheerful and enthusiastic participation in all ward activities. It is doubtful that he will ever retain much information about the substantive law that was taught, but he is still benefiting mentally from his increased self-esteem.

A forty-seven-year-old man who had been in the Forensic Division for twelve years, diagnosed as explosive personality and alcohol addiction, never really known to show psychotic symptoms, and charged with assault with a dangerous weapon, burglary, obstruction of justice, and attempted rape, had spent many years in prison and was familiar with the legal system. He was spontaneous, very knowledgeable, and eager to participate in roleplaying or answering questions. This man had been known to interrupt proceedings in court in front of a jury by throwing soap powder into the air and blowing it toward the jury. He had also faked a *grand mal* seizure in the courtroom, and was known to do whatever he felt necessary to get his own way. Diagnosis of sociopathic personality in this case was certainly not out of order. Throughout the Street Law course he was a charming, engaging, model student. It was interesting that during the roleplay of a mock trial, acting as a defendant in a criminal case, he interrupted the court proceeding to deny allegations, much the same as he had done in real life in a real court of law. When an observation was made about the similarities of his conduct in Court and in the classroom roleplay, he took it in good humor, simply laughed, and agreed that he was doing his usual thing. Student involvement in the roleplay became so intense, it was necessary to point out that this was only a "mock" hearing.

Mr. S., a twenty-four-year-old paranoid schizophrenic who had taken a machete to the Senate Office Building in Washington, D.C. with the intention of getting the Senators to institute "God's Government," manifested his religious and grandiose delusions from time to time, depending on the subject. In the discussion on housing law, his comments were totally appropriate, but in a discussion on family law where it became apparent that a common-law marriage could be quite easily effected in the District of Columbia, he waited until the break,

approached the instructor, and in a vehement manner pointed his finger at the instructor's nose and stated loudly, "I hope you don't approve of such behavior. Would you want your daughter to do such a despicable thing?" Past discussions with this patient revealed deep internal conflict between his beliefs and his actual sexual behavior.

Mr. R., a thirty-eight-year-old "Other Paranoid State" known by the staff to be very "pushy" and wanting everything his own way, made some of the best and most appropriate contributions to the class. It was later learned that his superior understanding of the law had come from working as a para-legal assistant in a public defender's office, before developing mental problems and getting into legal difficulty.

Another paranoid schizophrenic, Mr. M., age thirty-two, had displayed violent behavior while crossing a downtown street in Washington, D.C. The voices he heard during auditory hallucinations had told him that Social Security was not treating him fairly and that he should use his briefcase to smash out the windshield of a car that was stopped at a red light. He had been unmotivated and apathetic for a long period of time, and it was difficult to understand why he would register for this course when he had shown so little interest in other treatment modalities. In spite of his claim that he was virtually illiterate, he did study and participate actively, and made such marked improvement in his mental state during the semester that he was able to make concrete plans leading to release from the Hospital.

After spending four years in the Forensic Division, Mr. W., a thirty-year-old paranoid schizophrenic who had murdered four people one morning while paranoid under the influence of PCP, attended every class and was appropriate in all of his responses. He was alert, cooperative, and interested in learning about the law. He, too, was brought to the point of arranging a release during the time he was attending this course.

Mr. L., a twenty-six-year-old manic depressive with a college education, who set a fire in a U.S. Senator's office in the middle of the night, responded to Lithium Carbonate treatment and proceeded throughout the course showing no overt symptoms. He was obviously capable of studying almost any course and could well have been a registered student in any law school. With his symptoms controlled by medication, he went about his studies in the usual manner and was quite successful in completing the course.

Some Unique Features of the Street Law Course at St. Elizabeth's Hospital

The course usually is taught in the Department of Corrections by a team of two law students under the supervision of the professors of Georgetown Law Center. This particular team consisted of a male psychiatrist and a female second year law student. The psychiatrist had the advantage of being a supervising psychiatrist in the Division where the course was taught. He was personally acquainted with most of the

patients, with the problems of security, and with the rest of the staff now involved as students.

The female law student found the environment of the Forensic Division to be novel and initially intimidating because of all the locks, keys, maximum security, and reputations of the patients. She was reassured by the presence of a professional capable of dealing with problems as they might arise. The class responded well to the psychiatrist because of familiarity and past association with him, but they also responded equally, although differently, to a new and pretty face. It is to the credit of this young woman, because of her friendly, relaxed, but down-to-business approach that male patients, long confined, with minimal female social contacts, never responded inappropriately.

Post-Course Evaluations

In general, the written evaluations reflected a very positive attitude toward the course. Specifically, the majority said they liked the short talks, the roleplaying, their homework assignments, and that they especially liked the opportunity to ask questions and receive answers from the teachers. Students were unanimous in stating that the right amount of time was spent on every part of the law. They also felt they should be expected to do some reading in law books in the institution's library, other than the Street Law text that was basic to the course. In comparing the Street Law course with other courses the patients had previously taken in school, they all felt it was either the best or one of the best they had ever taken.

Graduation Exercises

Dr. Roger Peele, the Hospital's Assistant Superintendent, presented certificates of graduation. Valedictorian speeches were made by staff and patients. Ceremonies concluded with dancing to the music of a live band, and refreshments quite in excess of the usual institutional fare.

Summary

A course in "Street Law" was taught to forensic patients by law students, following a format used by Georgetown University Law Center. Although the course has been taught to high school students and inmates of correctional facilities, this was the first time it had been extended to mental patients found not guilty of crimes by reason of insanity.

An outstanding feature of the course was the marked enthusiasm shown by patients who, through long institutionalization, had become apathetic, indifferent, and despairing. Their readiness and ability to learn brought to mind a couple of old sayings often heard around mental hospitals, "I may be crazy but I'm not stupid," and "Sometimes you can't tell the patients from the staff." The staff of at least one ward has picked up "teaching and learning" to use as a central theme in treatment of patients, not abandoning traditional methods, but shifting the emphasis from therapy to

teaching as a way of getting the patient's interest in his own rehabilitation.

Judges, reviewing cases for release, have looked quizzical when the patients' active participation in a "law course" has been used as evidence of satisfactory progress.