

# Making Corrections Work: It's Time for a New Penology

by Francis T. Cullen\*

It seems quite appropriate that the International Community Corrections Association has held its 19th Annual Research Conference in Cincinnati, for the city has occupied a special place in correctional history—a place where rehabilitation has been reaffirmed in both the recent and more distant past. Thus, by an odd set of circumstances, Pat Van Voorhis, Ed Latessa, and I ended up at the University of Cincinnati in the early 1980s. This was a time when, among academic criminologists, rehabilitation had fallen into disfavor. Thus, it was an unlikely and fortunate turn of events that the three of us—all firm supporters of offender rehabilitation—came together in Cincinnati at this time. (We have since added Paula Smith and, this year, Sarah Manchak, to our group of treatment scholars.)

Although we saw rehabilitation in different ways—a healthy sense of diversity—Pat, Ed, and I shared, I think, a common vision of corrections—what I call “liberal but not stupid” (Cullen, 2002). (I should note that when I told my colleague Larry Travis that I was liberal but not stupid, he said that I was half right!) Now, by “liberal,” I mean a healthy sense of social purpose, which I suspect that we internalized from our upbringing in the 1960s. We saw our job as a way not only of making money, but also of improving people's lives. This is why we were all drawn to rehabilitation as the core of corrections. It was not enough to tell what was wrong with the system, as most criminologists were doing; it was necessary as well to tell how to make it work better.

The “not stupid” part, however, was equally important. It represented our belief that it is not enough for those of us in corrections simply to want to do good. We also must embrace practices that are not stupid—that is, practices that actually work and thus are capable of saving offenders from a life of crime. In our view, the key to this was using science to create an evidence-based corrections. We should not be in the business of quackery—of doing things that are

unproven, ineffective, or, still worse, harmful (Latessa et al., 2002).

For nearly 30 years, Pat, Ed, and I—and now our newer colleagues—have been committed to this task of arguing that corrections should be liberal but not stupid (see, e.g., Cullen et al., 2009; Latessa et al., 2002; Van Voorhis, 1987). Again, when we came together in Cincinnati, the field of corrections was mired in the era of the “nothing works” doctrine—the belief that offenders could not be changed, both because the treatment technology did not exist to do so and because correctional settings were not conducive to accomplishing anything positive. As some of you may remember or have learned along the way, the nothing works doctrine was traced to Robert Martinson (1974), whose systematic review of program evaluation studies purported to show that no treatment modality enjoyed consistent

taking on Martinson's challenge of showing that offender treatment can be accomplished successfully (Cullen, 2005). In a different but related way, I should note that many of you in community corrections have also done much to advance the cause of offender treatment. You have made, and continue to make, a difference.

Now, I wish to recall another time when Cincinnati was a place where rehabilitation was reaffirmed—a time in our more distant past. Think back to 1870. As some of you might already know, at that time a remarkable conference was held in Cincinnati—a conference at which the attendees called for a “new penology” and formulated its core principles. As described by historian Blake McKelvey (1977, p. 89), this gathering was attended by “130-odd delegates who gathered from twenty-four states, Canada, and South America,” including “wardens,

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success in achieving offender change (see also Cullen & Gendreau, 2001). It became standard belief that rehabilitation did not work and should not be the guiding theory of corrections (Cullen & Gendreau, 2001).

Those who stood up for rehabilitation—such as my friend Ted Palmer (1975)—were either politely dismissed as bleeding hearts or vigorously attacked. But the larger lesson is that even in the face of adversity, people can make a difference (Cullen, 2005). Correctional futures are not inevitable; new directions can be chosen—especially if enough people decide to do so. This is an issue I will return to below.

I would like to think that our group at the University of Cincinnati has had an enduring effect on the field by reaffirming rehabilitation and by doing our best to ensure that offenders are treated using evidence-based approaches—in a liberal but not stupid fashion! In particular, Pat and Ed have spent their academic lives not only writing but also flying around the nation giving talks, doing training, and evaluating programs—often at great personal sacrifice. But their legacy is that they have played an instrumental role in

chaplains, judges, governors, and humanitarians.” Papers also arrived from around the world and were read to the congress. The delegates were remarkable both for what they said—a “new penology” was articulated—and for the context in which their new correctional vision was set forth. We start with the latter point first.

Thus, the aftermath of the Civil War was a period when reformers' belief in rehabilitation might have been abandoned. The penitentiaries—invented by the Quakers and others with great hope in the 1820s—had proven a failure. The ideal of the orderly prison capable of reforming the wayward had fallen prey to the decision to crowd more and more offenders into institutions. More disquieting was that the rise of social Darwinism made it comforting to attribute crime to the urban poor who were portrayed as being biologically inferior and beyond redemption. Given this ideology, the temptation was strong simply to view prisons as convenient places to cage the innately wicked.

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In the face of these daunting obstacles, however, prison reformers came together for a historic meeting in Cincinnati at this National Congress on Penitentiary and Reformatory Discipline. They founded the National Prison Association, which would change its name in 1954 to the American Correctional Association. Most importantly, the congress's members stridently rejected punitive, pessimistic thinking. Instead, in their "Declaration of Principles," the congress's members advanced a "new penology"—a blueprint for renovating American corrections. In so doing, they reaffirmed that "the supreme aim of prison discipline is the reformation of criminals, not the infliction of vindictive suffering" (Wines, 1910, p. 39).

Indeed, many features of the National Congress's new penology were so forward looking that they would not be foreign to current-day discussions of correctional reform. For example, the congress favored:

- The individualized treatment of offenders through indeterminate sentences;

new penology eventually would play an instrumental role in creating the outlines of the correctional system we now have—including rehabilitation programs, probation, parole, and a separate juvenile justice system (Cullen & Jonson, 2012; Rothman, 1980).

The point is that ideas sometimes do matter, especially when they are conveyed in a coherent and persuasive way and are informed by a powerful sense of social purpose. Ideas especially flourish when they coincide with a conducive social context. What I am suggesting is that we have arrived at just such a special time when our ideas have a chance to matter a great deal. The challenge is to affirm, as our predecessors did, a clear sense of a new penology—or even broader—a new corrections. (Because the term "penology" suggests a prison focus—it is generally meant to cover prison management as well as the rehabilitation of criminals—the term "new corrections" might be more in order.)

And thus it is to these issues—context and ideas—that I next turn. Specifically, I will make three points. I will suggest that:

1. We are standing at a *special time* in corrections, a juncture when it is possible to

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- The "progressive classification of prisoners";
- The use of "rewards, more than punishments";
- "Special training" in order "to make a good prison or reformatory officers";
- Access to "education" and "industrial training"; and
- Efforts to reintegrate offenders into society "by providing them with work and encouraging them to redeem their character and regain their lost position in society" (Wines, 1910, pp. 39–45).

Again, these recommendations were set forth as part of a plan to create prisons capable of reforming the wayward. The dangerous classes—the destitute, the immigrant, the uneducated—were not to be warehoused on the grounds that they were supposedly incurably defective. Rather, they were seen as all being God's children, and the mandate was to save them from a life in crime. It took a while, but their

- move corrections in a fresh direction;
2. To take advantage of current opportunities, correctional workers must seriously proclaim that they are part of a *profession* marked by a strong ethic of care and by scientific expertise; and
3. Making corrections work requires that we take rehabilitation seriously—that we understand that effective intervention requires the invention of what I call "*treatment paradigms*."

### A Special Time

Since 1975, corrections has been in what Todd Clear (1994) calls a "penal harm movement" and what I might call a "mean season" in corrections. I will not belabor the numbers, because they are repeated so often as to have a banality about them. But they show a deep commitment to the practice of mass incarceration—about 2.4 million individuals behind bars on any given day, and 1 in 100 adults incarcerated—with the ratios far more disquieting for minorities

(Pew Center on the States, 2008). This level and harshness of incarceration, which admittedly has complex sources, is in large part due to a choice that policymakers made to make prisons the linchpin of our nation's approach to crime control. But again, I believe that we sit at an especially propitious moment—a time when real change is possible. There are three factors that make this an important time

**A Tipping Point.** First, we have reached a "tipping point" when it comes to imprisonment. In his book by this title, Malcolm Gladwell (2000) notes that when a tipping point occurs, ideas can surface that make changes occur "in a hurry"—much like a contagious disease sweeping across a population. My contention is that we have, indeed, reached a point where the embrace of mass incarceration is no long fashionable.

For the first time in nearly 40 years, state prison populations have declined (Pew Center on the States, 2010). And from news reports I have been collecting, I have an expanding folder of articles describing how governors across the nation are seeking ways to reduce the numbers of inmates behind bars. Mostly, of course, this new-found embrace of deinstitutionalization is due to the financial crisis that has led governors of all political stripes to want to harness prison population numbers. Importantly for our concerns, this openness to alternatives to incarceration makes community corrections—including reentry programs—more important than ever!

**The Limits of Punishment.** Second, the research is now clear in demonstrating the limits of punishment. This is especially the case with prisons. For the past three years or so, I have been involved with Daniel Nagin and Cheryl Jonson in a project to track down every study that compares the effects of a custodial sentence versus the effects of a noncustodial sanction. We have subjected this body of evidence to narrative review and to meta-analysis, which is still ongoing (Cullen et al., 2011; Jonson, 2010; Nagin et al., 2009). The results are clear: Prisons have few, if any, specific deterrent effects; that is, they do not reduce recidivism. Their impacts are limited to whatever crime savings are achieved simply through temporary incapacitation.

Our assessment of the research has shown two other things beyond the finding that prisons do not deter more than community-based sanctions. The first of these is that placing inmates in harsher or more painful prisons either has no effect or actually

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increases recidivism (see also Listwan et al., in press). The second of these is that longer prison sentences likely have no more specific deterrent effects than shorter sentences. In brief, more punishment does not lead to lower recidivism.

But we should be clear that punishing offenders in the community is also of limited effectiveness. Recall, for example, the classic study by Joan Petersilia and Susan Turner (1993) evaluating intensive supervision programs (ISPs). The authors examined ISPs across 14 sites. In no case did a control-oriented program produce lower recidivism than a comparison group of those sentenced to routine community supervision. In fact, across all sites, the ISP group has a higher rate of official arrest (36%) than the non-ISP group (33%). Notably, more recent studies of supervisory styles show the same thing. Unless a human services component is included, offender supervision does not reduce recidivism and might actually increase criminal involvement (Bonta et al., 2008; Lowenkamp et al., 2010).

The point is that the criminological evidence is steadily mounting that a sanction that is exclusively punitive or control-oriented tends not to work well. My own view on this matter became cemented some time ago—by two experiences. The first experience was a lengthy essay I coauthored on control-oriented programs for the 1993 ICCA meeting in Philadelphia (then called IARCA). Alan Harland of Temple University asked if I wanted to review all of the control-oriented community corrections programs for a presentation at the conference and for a chapter in a book he would edit. This volume subsequently appeared under the title *Choosing Correctional Interventions That Work: Defining the Demand and Evaluating the Supply* (Harland, 1996). I was about to say “no,” because although I knew a lot about rehabilitation, I knew nothing about control. Then Allan proposed to pay me \$6,000 to undertake this task; suddenly, I became a leading expert on control-oriented correctional programs that emphasized close supervision and deterrence!

As my colleagues and I read through tens of evaluation studies, I was struck by how few of these programs worked. There was an occasional success with some offenders, but, overall, they simply were ineffective. It made me realize that these punitive interventions likely failed because they simply were not targeting for change the factors that led offenders into and then back into crime (Cullen et al., 1996).

The other experience I had, more an epiphany, involved my dog Bartlett. I had always been told growing up that if a dog poops on the rug, you should rub his nose in it. But one day, I was thinking about this while taking Bartlett for a walk. As we encountered a pile of poop on a lawn, what do you think Bartlett did? And as we encountered a dog further up the street, where do you think Bartlett smelled? It dawned on me that “rubbing people’s noses in it” probably was not the best way to change their behavior.

**Public Support for Rehabilitation.** Now, I have not lost my place. We are discussing why this is a special time—a time when a new corrections might be possible. I have mentioned that two factors are relevant: first, the declining support for mass imprisonment by policymakers, and second, the growing evidence showing that punishment is of limited value in

rectional goal.

- When asked whether “it is a good idea to provide treatment for offenders who are in prison,” more than nine in 10 respondents—92%—agreed (Cullen et al., 2002, pp. 136–137).

I first started studying public attitudes in the late 1970s and early 1980s. In that context—when commentators regularly asked: “Is rehabilitation dead?”—I expected to find almost no support for rehabilitation. But, alas, in every poll I have conducted since that time—and in every reputable poll that I have read—the same finding always occurs: Although Americans want offenders punished and want to be kept safe from dangerous criminals, they nonetheless strongly support efforts to rehabilitate offenders—whether in prison or the community.

This finding—this remarkable fact—is not a small thing. It suggests to me that rehabilitation is a “habit of the heart”—a

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reducing recidivism. I now want to share a third factor: the public’s strong support for rehabilitating offenders. I have called this a “remarkable criminological fact” (Cullen, 2006, p. 665). Why? Well, after about 40 years of get-tough rhetoric, the popularity of the nothing works doctrine, and criminologists themselves abandoning the rehabilitation ship, opinion polls show that the American public’s strong faith in rehabilitation remains unshaken. They want the correctional system not just to punish or warehouse but also to correct—to move offenders to avoid crime and live more productive lives (for a summary of research, see Cullen et al., 2002). To illustrate this point, let me list some statistics drawn from a national survey that I led:

- When asked what should be the “main emphasis” of prisons (in a forced-choice question), 55% selected the goal of rehabilitation versus only 25% who chose “protect society” and 14% who chose “punishment” (6% were not sure).
- When asked to evaluate the value of “trying to rehabilitate the individual,” so that the offender “might return to society as a productive citizen,” 87% stated that “rehabilitation” was an “important” cor-

phrase first used by Alexis de Tocqueville, the famous French commentator who traveled to the United States to study our penitentiaries but used his time in the nation also to research his classic work *Democracy in America*. What Tocqueville meant by this phrase was that there were certain cultural beliefs that were so ingrained in a society—in this case, America—that they would endure across time and space. Rehabilitation is one of these habits of the heart. Likely rooted in our religious traditions and belief in equality of opportunity, it is why we called our original prisons “penitentiaries” and continue to call today’s prisons “correctional” institutions. What this means is that the American public is open to a corrections that seeks not only to protect citizens’ well-being, but also to improve offenders’ lives. The public does not want less from corrections but more (Cullen et al., 2007).

### Challenge to Practitioners

In this context, the special challenge to those working in the field is to take advantage of this moment to push forward a “new penology”—a “new corrections”—that

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warrants the support of the public and of policymakers. If we fail at this challenge, then we will open the door to a return to a nothing works era. That is, the time has come to ensure that every effort is made to reform offenders in the most effective way possible.

To do this, we need a clear sense that *corrections is a profession and that those working in corrections are professionals* (Latessa et al., 2002). Many occupations have sought to be called a “profession” because it accords them greater prestige—and, I might add, more money. Wouldn’t that be nice! But something more than this is needed—as I will note shortly. Embracing professionalism is, I believe, essential to developing a corrections that will work. Two core aspects are relevant to any profession, including corrections.

First, a profession has a code of ethics.

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**We can stand against any practice that is wantonly mean and that needlessly jeopardizes the well-being of offenders and those they might victimize.**

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At the core of this code would be a commitment to an *ethic of care*—a commitment to engage in correctional practices that do no harm, either to the offender or to the public. Recall the Hippocratic Oath in medicine, with its core mandate to always “prescribe regimens for the good of my patients according to my ability and my judgment and never do harm to anyone.” Of course, matters are more complicated in corrections because public safety must also be a concern. But I think we can embrace the idea of a *Correctional Hippocratic Oath*, one that:

- Prescribes regimens for the good of my supervisees;
- Does so according to my ability and judgment; and
- Never does harm to anyone—which would include the public.

This does not mean that no harm will ever occur. We are not miracle workers. But we can stand against any practice that is wantonly mean and that needlessly jeopardizes the well-being of offenders and those they might victimize. This is our professional responsibility.

Second and related, the hallmark of a profession is *expertise*. If correctional staff have no special expertise, they lose legitimacy;

they cannot claim that they can work with offenders better than anyone else. Worse still, those with no expertise are playing a treatment lottery—simply guessing at what might help an offender recidivate less often. In such cases, they risk engaging in correctional quackery—of doing things that will not work or may even be counterproductive and criminogenic (Latessa et al., 2002).

Thus, those working with offenders—if the goal is to be a professional—have an obligation to do two things: First, it is essential that they become correctional experts. They need to *know what works*. ICCA has been invaluable in what is known as “technology transfer”—of sharing best practices. The Office of Justice Programs is also assisting in this way with its new website on effective programming called *CrimeSolutions.gov*. [Editor’s note: See Laurie Robinson’s article in this issue of *JCC* for more on *CrimeSolutions.gov*.]

Second, it is essential that correctional staff *do what works*. Having a vague idea

about what programs are supposedly effective does not translate into the ability to deliver an effective treatment service. This task requires human services skills. To acquire these talents, staff members need to have access to high quality training so as to master the intricacies of delivering appropriate interventions. I will leave it to others—such as my younger colleague Paula Smith—to figure out how this might be done. But a first step in this direction is recognizing the fact that training is a key element of expertise and should become an essential element of our profession.

**The Next Step**

If the embrace of professionalism is a first step, what should be the very next step to make corrections work more efficaciously? Here, I am not so much challenging those who deliver services as those who create them—who propose to tell you how to reform offenders. In a way, I am suggesting what it is that you, as *consumers* of correctional programming, should demand. In this context, there are three approaches to correctional programming that I will briefly mention—only the last of which merits our allegiance.

The first approach is something I call “the good-idea approach.” In this approach, advocates of an intervention strategy—for example, boot camps—come up with what seems to be a good idea of what to do with offenders. But the unfortunate thing is that the field of corrections is littered with good ideas—seemingly plausible interventions—and we now wonder: “What the hell were we thinking when we tried that stupid idea?” (Cullen et al., 2005).

A good or plausible idea is not enough. As a consumer, you need to say: “Show me the data!” Much as pharmaceutical companies must do with drugs, those marketing new offender-change models should be required to run treatment trials. They should have to show that their intervention does no harm—has no iatrogenic effects—and that it can achieve promised reductions in recidivism. Remember, the choice of a new, untried treatment model can impose important opportunity costs—offenders are subjected to an ineffective intervention when others exist that have been shown to work.

The second approach is something I call “the modality approach.” In this approach, the goal is to pick out some service—maybe counseling or job training or even a cognitive behavioral program—and deliver it to an offender. This is not a bad thing, especially if the modality is effective. But this approach can devolve into a style of “cafeteria corrections,” where we go through the line and I pick out a counseling program and you pick out an education program. If this is all we do, I am not persuaded that, in the long term, we will arrive at a coherent approach to offender reform that can be replicated and achieve success across settings.

The third approach—and the one that I favor and believe is the pathway to a genuinely new corrections—is something that I call “the paradigm approach” (Cullen & Smith, in press). Let me be clear: By “paradigm,” I do not mean that the field would have a single correctional model that everyone must follow (as can be the case in scientific fields; see Kuhn, 1970). And in corrections today, there are undoubtedly multiple treatment models or, in my terms, “paradigms.” One, for example, would be multisystemic therapy (MST).

That said, at the present time, there is one paradigm that, in my view, has the most legitimacy and should be the exemplar to be followed if we truly wish to make corrections work. This is the risk-need-responsivity paradigm—the RNR model—developed by Don Andrews, Jim Bonta, Paul Gendreau,

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and other Canadian colleagues (Andrews & Bonta, 2010). I want to emphasize that RNR is not just another treatment modality. Instead, it is an overarching strategy for making corrections work effectively. It is a model that its proponents spent more than 30 years developing. In so doing, Andrews and colleagues understood that rehabilitating offenders was a challenging task and was something that had to be taken very seriously (Cullen, in press).

I call RNR a “paradigm” because, as my mother used to say, it goes “from soup to nuts”—it is a coherent, comprehensive approach for the delivery of treatment services. It thus has three essential components.

**An Empirically Supported Theory of Conduct.** First, it is based on an empirically supported theory of human conduct and of the psychology of criminal conduct—essentially a cognitive social learning perspective. As a result, the RNR model is able to clearly identify the proximate causes of recidivism and thus to tell us what should be targeted for change if offenders are to make noncriminal choices in the future.

**A Clearly Defined Set of Treatment Principles.** Second, the RNR model has a clearly defined set of treatment principles—the principles of effective correctional intervention. This involves the three principles of risk, need, and responsivity as well as a set of secondary principles (Andrews & Bonta, 2010). The model thus gives direction to practitioners. The model, by making a clear prediction, also opens itself up to empirical investigation. It argues that programs that follow the RNR principles will reduce recidivism and that programs that use inappropriate intervention—especially punitive approaches—will not. The data largely confirm these predictions, thus giving credibility to this paradigm (Andrews & Bonta, 2010; Gendreau et al., 2006; Smith et al., 2009).

**The Technology Needed to Carry Out the Intervention.** Third, the RNR model provides practitioners with the technology needed to carry out the intervention. Andrews and his colleagues spent much time developing and testing various versions of the Level of Service Inventory (LSI), which could be used for offender assessment, and the Correctional Program Assessment Inventory (CPAI), which could be used to help agen-

cies become more conducive settings for service delivery.

### Conclusion: Making Corrections Work

Let me conclude by reiterating the theme that we are at a special time in corrections and, in particular, in community corrections. We thus have a special opportunity to move forward and to reaffirm rehabilitation as the guiding theory of corrections. Doing so will demand that we do what we say we can do: Change offenders.

To achieve this daunting goal—often in difficult circumstances—we will need to do everything in our power to make corrections work. I have suggested that two ingredients are essential to this undertaking; they are worthy of reemphasis. First, we must step up and proclaim that corrections is a profession that has as its hallmarks both a deep ethic of care for offenders and

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for our communities and a commitment to treatment expertise—to knowing and doing what works. Second, as consumers of treatment services, it is essential that we demand from service inventors a higher standard of intervention. At a minimum, we should consume those treatment services that have reached paradigmatic status—that is, that are based on sound criminological theory and evidence, that have a clearly defined set of treatment principles that can be followed, and that provide us with the technology to implement treatment effectively.

It is a time, in short, for all of us to take rehabilitation seriously—to demand more of ourselves in accomplishing the important challenge of advancing a new corrections.

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