## **BOOK REVIEW**

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Decarceration: Community Treatment and the Deviant – A Radical View (2nd edition) by Andrew Scull, Cambridge, MA: Polity Press, 1984. Submitted to Allan Borowski, PhD Senior Lecturer Department of Social Work La Trobe University Bundoora Victoria, 3083

In Decarceration, Andrew Scull provides an account of the contemporary rise of the movement to deinstitutionalize "deviant" populations in the United States and England. His primary focus is upon the deinstitutionalization of psychiatric hospital patients but he also gives considerable attention to the deinstitutionalization of adult and juvenile offenders. The distinguishing feature of Decarceration, according to Scull, is that it brings "... an historically informed macrosociological perspective [to bear] interrelationships between on the deviance, control structures, and the nature of the wider social systems of which they are both a part and an essential support" (p.11).

Decarceration is a highly readable book. It is well-written and particularly engaging. Scull goes to such great efforts to carefully guide the reader through the book that the development of his argument has an almost seductive quality about it. The extensive footnotes at the end of each chapter (many of which are as fascinating as the chapter themselves) and the diverse sources drawn up by Scull, initially at least, appear to leave little room for doubting anything that he says.

Inexplicably, however, the second edition contains only the bibliography relating to the 1983 afterword. The unfortunate omission of the general bibliography obviously makes it very difficult indeed for the interested reader to follow-up on the literature referred to in the rest of the book. Decarceration is divided into three parts plus the afterword. Part One provides the foundation for Parts Two and Three. The first chapter of Part One provides an interesting critique of labelling theory, a body of theory which attempts to account for society's reactions to social problems. The basic point of Scull's critique is that this guite widely accepted body of theory largely ignores "the overarching structural context within which ... agencies of social control operate" (p.10). Chapter 2 traces

the beginnings of the move away from the old informal (family and communal) methods for dealing with the deviant population and the rise of institutions as the State, its attendant bureaucracy, and the helping professions began to assume direct responsibility for social control of groups. various deviant Scull fundamentally attributes the rise of institutionalization to the growth of the capitalist market system and its impact on economic and social relationships. Chapters 3 and 4 describe the extent to which adult and juvenile offenders and the mentally ill have been deinstitutionalized. Part Two is devoted to debunking some of the generally accepted reasons why deinstitutionalization has taken place. In Chapter 5. Scull examines the development of psychotropic drugs in the post-war era and their use in the treatment of psychiatric patients. Much to this reader's surprise, he seeks to demonstrate that the availability of drug therapy cannot account for the decline in psychiatric hospitals' populations. In the afterword, he provides a rejoinder to critics of his view that the role played by psychotropic drugs in deinstitutionalization was largely irrelevant. In the next chapter, Scull dismisses the contention that deinstitutionalization and advocacy of community-based the alternatives may be seen as a response to the growing disenchantment during the 1950's and 1960's, spurred on by social scientific research, with the adequacy of institutions. Not only does he provide a scathing indictment of what community treatment has actually meant for the deinstitutionalized (lack of after-care, higher mortality, "ghettoization" in depressed urban areas, either lack of standards for community facilities in the first instance or lack of standards

enforcement, etc.) but he also points out profound reservations that about institutions, similar to those advanced today, were vociferously expressed a century ago. The question that arises, therefore, is why the "reformers" of the twentieth century were "listened to" while those of the nineteenth century were not? In Part Three, Scull provides his answer to this question. The core of his response is that the fiscal crisis of the state kaleidescopic increases in welfare state expenditures which threatened to outpace revenues – demanded alternative. cheaper ways of dealing with society's deviants than institutions. Hence. "community supposedly cheaper treatment" emerged as the solution to this essentially financial problem, a solution which, however, was cast in terms of the rehabilitative aspects of community care, humanitarianism, concern for the rights of the mentally ill, the retarded, delinquents, etc...

What are we to make of Scull's argument? An initial reaction might be that it leads itself to easy dismissal on the grounds that his apparent radical political perspective inexorably and inevitably leads him to the conclusion that the factor animating deinstitutionalization was the fiscal crisis of the capitalist state. However, such a view assumes that policy analysis, whether historical or contemporary, can be value free or ideologically neutral and undertaken by a Mannheim-type "socially unattached intelligentsia". Without doubt, such analysis is impossible.

There are, however, substantive grounds for criticizing Decarceration. First, Scull provides a mono-causal explanation (the fiscal crisis of the capitalist state) for a complex policy shift. A mono-causal explanation does not appear to be sufficient. Indeed, Scull acknowledges the limitations of a mono-causal explanation. at least implicitly, in the afterword. Critics of the first edition pointed to the inapplicability of his argument to other capitalist countries, notably those of continental Western Europe, which did not experience the rapid deinstitutionalization of the United States while supposedly confronting a similar fiscal crisis. Although Scull maintains that the fiscal crisis provides a crucial part of the explanation for deinstitutionalization even in these countries (p. 166), it is evident that other factors must also be considered in order to provide a complete explanation. Indeed, these other factors may have also been operative in the United States, something which Scull overlooks.

Second, Scull fails to demonstrate that the fiscal crisis so central to his argument actually existed when deinstitutionalization efforts began. As far as psychiatric hospitals in the United States are concerned, Scull shows that patient numbers began to decline in the 1950's and continued into the 1960's. At the same time, however, the welfare state was expanding. Indeed, by the end of the 1960's the United States, long considered a welfare state laggard, had massively expanded its income support and health care programs (Zald and Hasenfeld, 1985:9). And as Lerman (1985) points out, these health care programs pumped even more money into traditional psychiatric hospitals even though patient numbers were decreasing. It seems difficult to reconcile the notion of a fiscal crisis during a period of welfare state expansionism. A major source of concern about

Decarceration is Scull's failure to consider both sides of the deinstitutionalization picture. While some traditional institutions were, to be sure, being "depopulated", this was being offset by the increased use of new institutional forms such as halfway houses, nursing homes and psychiatric wards of general hospitals (Lerman, 1985). And these new institutional forms, although increasingly operated under private (non-profit and proprietary) auspices, nevertheless placed great demands, both directly and indirectly (e.g., revenue foregone through the tax deductibility of employer-made health insurance payments for employees), on the public purse. This lack of savings must surely have been evident even in the early stages of deinstitutionalization. But perhaps more importantly. Scull's argument cannot accommodate the development of these new institutional forms, that is, the continuation of institutionalization but in a different guise.

A fourth ground for criticizing Scull's work is inaccuracy in at least one respect. Scull points to the overcrowding being experienced in American adult prisons. He suggests that while absolute numbers of prisoners may be up, the <u>rate</u> of incarceration has actually declined. This is a contentious point as many would argue that both the numbers of prisoners <u>and</u> the rate of imprisonment have been increasing in the United States.<sup>1</sup>

A disconcerting aspect of *Decarceration* is that it is strong on diagnosis but weak on prescribing remedies – although Scull is in good company with other social critics in this regard. Scull is critical of both institutions and community treatment alternatives. But he offers no solution. Since those of a radical persuasion do not see community treatment as representing a "benevolent relinquishment of state power over [people's] lives" (Hogg and Brown, 1985:402), more adequately resourced and monitored community



treatment (assuming, of course, the absence of a fiscal crisis) does not present as a viable solution. Scull does not even call for the disbanding of the capitalist state. In sum, he provides no guidance of a new direction.

A final criticism of Decarceration is his depiction of the deinstitutionalization of the mentally ill into "community treatment" as a de facto abrogation of state social control over this deviant group. Scull makes much ado of the "imperative" for capitalist states to control their deviant groups. He suggests, however, that a financial reason (the fiscal crisis) is sufficient to explain a lessening of control over a group which the community at large has traditionally been threatened by (even though this threat is typically more imagined than real). If social control is indeed an imperative, why has the capitalist state been willing to weaken its control over deinstitutionalized psychiatric patients who now find themselves in the community?

The above criticisms of Scull's book notwithstanding, Decarceration remains a significant publication. It provides an alternative (radical) "lens" through which to view the development of deinstitutionalization in the post-war period. His "expose" of the realities of community treatment for the deinstitutionalized serves as an excellent case example of how social policies are not only the solutions to social problems but very often their causes as well. And whether or not one accepts the central role assigned by Scull to the fiscal crisis of the state, his critique of the conventional rationales for deinstitutionalization are powerful and certainly present a challenge to policy-makers who have invoked these rationales to justify deinstitutionalization. As an exercise in social historical analysis, Decarceration makes for intriging reading. In sum, it is certainly worthy of purchase and careful study.

## Footnotes

1. I am indebted to Dr. Kenneth Polk, Department of Criminology, University of Melbourne, for bringing this to my attention.

## References

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