

# Asylums

*Essays on the social  
situation of mental  
patients and other  
inmates*

**ERVING GOFFMAN**

*with a new introduction by William B. Helmreich*



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## INTRODUCTION TO THE ALDINETRANSACTION EDITION

### THE ENDURING SIGNIFICANCE OF ERVING GOFFMAN'S WORK

Erving Goffman was born on June 11, 1922 in Canada and died in Philadelphia on November 19, 1982. A professor of anthropology and sociology at the University of Pennsylvania, he had just completed his term as president of the American Sociological Association. An expert on human interaction, Goffman wrote many books, the most prominent of which were perhaps *Asylums*, *Encounters*, *Stigma*, *Behavior in Public Places*, *Interaction Ritual*, and *Frame Analysis*.

Our focus here is on *Asylums*. The book is divided into four essays, each designed to stand on its own, even as they are based on Goffman's study of a large, 7,000-patient institution, St. Elizabeth's Hospital in Washington, D.C., in 1955-56. The Laboratory that supported his endeavors was led by the sociologist John Clausen. Other sociologists who worked there included Melvin Kohn, a past American Sociological Association president, William Caudill, Morris Rosenberg, and Leonard Pearlin.

The first essay deals with total institutions, as an "ideal type" in the Weberian sense and has become a classic on the subject. It is followed by a piece on "the moral career of a patient," namely how he/she moves from the

status of a pre-patient to that of an in-patient. In the third essay, the author turns his attention to the daily regimen of an institution for the mentally disabled, or, as he puts it, its “underlife.” The concluding section takes up the “medical model” of a hospital, especially patient-physician relationships.

Fifty years have passed since Erving Goffman did his field work in St. Elizabeth’s and it seems fair to ask: What is the long-term importance of *Asylums*? What can it teach us about human behavior that we do not already know from other works? Can today’s students relate to it? To answer these questions, it is necessary to turn to the book itself.

Although he titled the book, *Asylums*, even a cursory glance at the first essay reveals extensive references to all types of total institutions, ranging from the military, to convents, to prisons, to boarding schools, and to institutions for the mentally disabled. Goffman understood that there were characteristics common to all of these, but also important distinctions between them. It was his gift to use examples from the literature that were both representative and insightful, whether it was an excerpt from Katherine Hulme’s *The Nun’s Story*, Eugen Kogon’s *The Theory and Practice of Hell*, or Gresham Sykes’ *The Society of Captives*.

By freely acknowledging the limitations of his work, Goffman was able to blunt serious criticism regarding these shortcomings. They are worth noting in any event since they enable us to understand his overall analysis in its proper perspective. Most important perhaps is that when he did his field work he presented himself as “an assistant to the athletic director,” adding, if questioned closely, that he was also “a student of recreation and community life.” Management knew what he was doing but he avoided contact with the staff so as to gain the patients’ trust. Had Goffman posed as a patient, as some researchers have done in recent years, he might have

gained greater insight into their lives, but doing so would also have seriously affected his mobility.

Because he was looking at the patient's social world for the most part, he did not have the input of other crucial actors who significantly affected the patients *from their perspective*—namely nurses, physicians, and other staff, except superficially. This deficit is somewhat exacerbated here because the split between staff and patients is more pronounced in a total institution.

In his defense, Goffman observed at the time that almost all prior research had evaluated mental patients from the viewpoint of the medical profession. He also noted, almost parenthetically, that he did not have great respect for the practice of psychiatry and consequently, for their perspective, which he eschewed in his own work. Goffman viewed himself as a structuralist, not a psychologist and he was as critical of psychiatry as were his contemporaries, R.D. Laing and Thomas Szasz. This may, or may not, account for the fact that Goffman never focused to any serious extent on the subject of mental illness. Notwithstanding the acclaim which greeted the publication of *Asylums*, he pretty much ignored the subject afterwards, both theoretically and empirically. Rather he chose like, Michel Foucault, in *Madness and Civilization* (1965), to concentrate on social control in its many contexts.

One of the most lasting contributions of Goffman's study is his finding that the patients were not as "crazy" as commonly thought. This stereotype, in Goffman's view, was largely due to the fact that staff, and certainly outsiders were unfamiliar with patient life and culture. Goffman freely admitted to having the biases of a typical middle class person. Of course, he would have had other biases had he been upper or lower class. The virtue of such admissions is not one of eliminating bias but rather, one of acknowledging—and thereby perhaps lessening—its possible impact on one's work.

In examining the social life of total institutions, Goffman demonstrates how they strip the individual's former identity and then re-socialize him. This is an example of one of Goffman's trademark contributions—his persistently unique and perceptive insights that sharpen or reshape our understanding of an ostensibly familiar social context. An additional example is his related observation that mental hospitals are often aware of a patient's most intimate secrets, particularly the circumstances that have brought them to the institution. To establish their authority, staff will ask patients questions that they know the patient will try to lie about (162). They will then expose the lie, saying with a smile: "That's not the way I heard it." or "Didn't it start when you claimed you were God?" In this manner they force the patient to acknowledge the hospital's supremacy, the error of their ways, and the fact that they cannot control their situation.

In a similar vein, Goffman tells us about the many ways inmates try to beat the system, how they scavenge for various items, how they perform certain types of personal work for staff in order to obtain privileges unrelated to the actual work they do. All of them are shown to be part of a system in which everyone tacitly accepts the fact that they do things that are improper and even illegal in order to function effectively *within* the system. The net effect is to demonstrate how adaptable and resilient human beings are even in institutions whose hallmarks, even *raison d'être*, are authority, control, and inflexibility.

Almost everything that goes on in total institutions happens on the outside too. The form and intensity may differ, but the substance is the same. Social interactions occur, rules are promulgated and enforced, a hierarchy is established and functions, and people adjust to it. Influence is peddled, bribes are offered and accepted. People intimidate and exploit and are, in turn, treated in like fashion. They form alliances and they scheme and plot. They display favoritism and they struggle against author-

ity even as they conceal their true feelings and intentions. An economic system also exists where both goods and services are bartered and sold. The key difference is that life in total institutions is more easily controlled by those in charge and, because of the rigidity of life there, such control is felt more intensely by those in them. Here the skills of individuals can mean the difference between life and death. Here they can be practiced without any freedom of choice, often in a twisted way. This has the unintended benefit of allowing the patterns of behavior to stand out more starkly, thereby making them easier to analyze.

Goffman focused primarily on the interactions between patients and staff. Missing from his work is the critical question of the impact these total institutions have upon the larger society. While we cannot know the answer without having done the research, it is clear that it is through these “messengers,” namely the staff, that total institutions are likely to have the greatest influence on the outside world. Were these institutions merely places where no one ever left, they would be curiosities, lacking in critical importance. But they are not and it is this radiating effect that makes *Asylums* such a significant work. For if we are to understand the effects that those who are in total institutions have on society, it is imperative that we learn all that we can about the institutions themselves. Only a few of these influences can be enumerated in an introductory essay, but they will give the reader an idea of what is meant.

The staffers and administrators of total institutions, be they military personnel, prison authorities, or hospital officials, interact with and function in the outside world. They will, for example, inculcate in their children the values they hold dear. These children attend local schools, where other children are exposed to their behavior and attitudes. Are these children less tolerant? More authoritarian? More manipulative and cynical? And to what de-

gree do they transmit these views to their classmates and playmates and how are they, in turn, affected?

Priests and nuns spend years in total institutions, where their outlook on life is irrevocably molded and determined. When the priest communicates with his parishioners does the harsh discipline to which he himself was exposed shape the way in which he counsels them? Most likely it does. When nuns assume positions as teachers, does the authoritarian structure of the convent play a role in how they socialize and treat their students? Most assuredly, it will.

Not all outcomes are necessarily negative. As Goffman has noted, convents are also places where novitiates see cleaning and cooking as doing God's work (91). Those who run them instill in their charges altruistic values which can then be transmitted to those on the outside, where the reward system is often determined by crass materialistic considerations.

And what about prison guards? Are we to assume that the repressive environment in which they function has no effect on how they conduct themselves in the communities in which they live? Manifestly it must, and the degree to which they become insensitive to the rights of others makes itself felt in a myriad of ways. Possibly, those who work in a prison or an institution for the mentally disabled are apt to become somewhat rigid and obsessed with rules in general and to extend that perspective to society in general. This may, for example, cause them to maintain greater social distance from others.

Total institutions and their leading decision-makers also profoundly affect the outside world in their institutional capacities. For example, when we turn to the military we can see outcomes of an even greater magnitude. There is perhaps no total institution with greater impact on society than the armed forces, all of whom re-socialize their troops into a system reflecting its outlook. Those who lead it are entrusted with major decisions affecting

all of society, ones with enormous implications. Do we occupy another country or not? Do we declare all out war? Do we use nuclear weapons? The perspective of the military is developed in a total institution context. And yet, the decision-making processes of our country, or any other country for that matter, necessitate its involvement with other agencies and the various branches of government. It follows, therefore, that a proper comprehension of how total institutions function is paramount. And it is Goffman's work that has given us the ability to study and evaluate them.

Equally crucial are the patients, inmates, or military draftees. Most of those who end up in total institutions are not permanent residents. They enter and, after a period of time, they leave and re-enter society. But what happens when they do? Have they not been changed or at least affected by their experiences? How are these experiences processed? While Goffman does not answer these questions directly, we can more easily grasp the consequences by studying his analyses of life inside these places.

For instance, a patient learns the importance of deference as a survival mechanism. He returns to society. Do her/his encounters result in a heightened concern regarding deference, one that affects their performance in the workplace or possibly their relationships with their families? An institutionalized person often learns not to reveal his/her true feelings to anyone lest they become vulnerable. Can they ever be trusting of others upon their release even as they are pronounced clinically healthy? Here again, Goffman's work shows us how profoundly human beings are affected by the lack of power they feel while incarcerated.

Prisoners are released into the general population. Life behind bars often leaves them ill-prepared to assume responsibility for their own destiny. The infantilizing effects as described by Goffman provide ample material for devising ways to smooth the re-entry process. The inge-

nious adjustments to life in prison described by Goffman, also have much to teach us about how those released will view parole, work, and family obligations and how they will respond to the demands engendered by them.

Sometimes the effects of the institution are felt after the re-socialization has occurred, but before the individual returns to civilian life. Soldiers are charged with abusing civilians while on active duty. Is it possible that something in their training caused them to respond in a particular manner? Sometimes things can go wrong in an hour or a day. Goffman refers to a program called “town parole” where people can leave the institution for a day. Today, we have work release, where inmates spend their days outside prison. Clearly, such programs need to take into account what the participating inmates are exposed to on a daily basis while incarcerated.

Goffman’s descriptions of life in these institutions—even apart from its impact on the larger society—sensitize us to those aspects of life on the outside that resemble them. A good case in point is temporary role reversal (98-104). In mental institutions, the staff and patients become equal when participating in Durkheimian “ceremonies” such as a play put on for the benefit of the institution. In a summer camp it might be “camper/counselor day, where roles are reversed. Another example would be a basketball game in a school between teachers and students.

One of the most salient points made by Goffman is in portraying the many openings that systems provide which allow human beings to circumvent them. He cites numerous cases of how people volunteer for jobs simply to create opportunities to socialize with those whom they are normally not allowed to be with (224-226). Parallel to this, there are fascinating discussions of how people use the mental hospital for all sorts of unintended activities—looking out certain windows with particular views; impromptu ping-pong tournaments in a disused sub-basement; and locations for illicit sexual activity (238-242).

When all is said and done to what degree are the principles Goffman enunciated and expanded upon still valid? No doubt, much has changed in such institutions. Recent trends in mental health treatment have emptied many hospitals, but quite a few remain. Patients today have more rights and are more aware of their existence, but patients are still treated in an infantile manner, as well as abused.

While doctors still rely heavily, as they did a half century ago, on patients' reporting of their symptoms, there is a growing sense that they are being treated more as a unit than as individuals. In addition, Goffman could not have foreseen the tremendous increase in paperwork that physicians confront on a daily basis, a phenomenon which has greatly reduced the amount of time that doctors can and/or are willing to spend with those whom they see and treat. Concomitant with this is the perception by many that hospitals are only concerned with profitability and efficiency, as opposed to compassion. At the very least, Goffman's *Asylums* is a model of what to avoid when diagnosing, treating, and interacting with patients.

Certainly, the view of our prisons and their effectiveness has not been much altered. Does anyone seriously think of them as rehabilitative institutions as opposed to "graduate schools" for criminal behavior? Goffman's work on how these institutions dehumanize those incarcerated while at the same time developing group solidarity against society in general, is exceedingly valuable because he breaks down the institutional components for us, thereby allowing us to trace their origins.

Most interesting is the fact that Goffman's work, be it *Asylums* or, say, *Behavior in Public Places*, remains relevant for a variety of sociologists. Indeed, there are at least eight books devoted exclusively to analyses of his works. A major reason for this interest is that even as he presents us with unusual stories, Goffman remains focused on their larger theoretical implications. His

accounts of those who violate norms tell us more than anything about the importance society attaches to norms in the first place. His stories about how people beat the system serve to remind the reader of the centrality of social systems. His field observation techniques and the way in which he unerringly captures for us the things people do but are embarrassed to discuss, are of inestimable value to today's ethnographers. In fact, ethnographic works that fail to cite one or more of Goffman's works are rare indeed.

Books and their authors are judged in the long run by how often they are referred to. Goffman's books have easily sold more than a million copies. While Goffman passed away in 1982, he is, in that sense, still very much alive. He is read and studied carefully and his works retain a vitality characterized by both lucidity and complexity. For this reason, *Asylums* remains and probably always will be a classic.

William B. Helmreich

## PREFACE

From Autumn 1954 to the end of 1957 I was a visiting member of the Laboratory of Socio-environmental Studies of the National Institute of Mental Health in Bethesda, Maryland. During those three years I did some brief studies of ward behavior in the National Institutes of Health Clinical Center. In 1955-56 I did a year's field work at St. Elizabeths Hospital, Washington, D.C., a federal institution of somewhat over 7000 inmates that draws three quarters of its patients from the District of Columbia. Later additional time for writing up the material was made possible by an NIMH grant, M-4111(A), and through participation in the Center for the Integration of Social Science Theory at the University of California at Berkeley.

My immediate object in doing field work at St. Elizabeths was to try to learn about the social world of the hospital inmate, as this world is subjectively experienced by him. I started out in the role of an assistant to the athletic director, when pressed avowing to be a student of recreation and community life, and I passed the day with patients, avoiding sociable contact with the staff and the carrying of a key. I did not sleep in the wards, and the top hospital management knew what my aims were.

It was then and still is my belief that any group of persons—prisoners, primitives, pilots, or patients—de-

velop a life of their own that becomes meaningful, reasonable, and normal once you get close to it, and that a good way to learn about any of these worlds is to submit oneself in the company of the members to the daily round of petty contingencies to which they are subject.

The limits, of both my method and my application of it, are obvious: I did not allow myself to be committed even nominally, and had I done so my range of movements and roles, and hence my data, would have been restricted even more than they were. Desiring to obtain ethnographic detail regarding selected aspects of patient social life, I did not employ usual kinds of measurements and controls. I assumed that the role and time required to gather statistical evidence for a few statements would preclude my gathering data on the tissue and fabric of patient life. My method has other limits, too. The world view of a group functions to sustain its members and expectedly provides them with a self-justifying definition of their own situation and a prejudiced view of non-members, in this case, doctors, nurses, attendants, and relatives. To describe the patient's situation faithfully is necessarily to present a partisan view. (For this last bias I partly excuse myself by arguing that the imbalance is at least on the right side of the scale, since almost all professional literature on mental patients is written from the point of view of the psychiatrist, and he, socially speaking, is on the other side.) Further, I want to warn that my view is probably too much that of a middle-class male; perhaps I suffered vicariously about conditions that lower-class patients handled with little pain. Finally, unlike some patients, I came to the hospital with no great respect for the discipline of psychiatry nor for agencies content with its current practice.

I would like to acknowledge in a special way the support I was given by the sponsoring agencies. Permission to study St. Elizabeths was negotiated through the then First Assistant Physician, the late Dr. Jay Hoffman.

He agreed that the hospital would expect pre-publication criticism rights but exert no final censorship or clearance privileges, these being lodged in NIMH in Bethesda. He agreed to the understanding that no observation made about any identified staff person or inmate would be reported to him or to anyone else, and that as an observer I was not obliged to interfere in any way whatsoever with what I could observe going on. He agreed to open any door in the hospital to me, and throughout the study did so when asked with a courtesy, speed, and effectiveness that I will never forget. Later, when the Superintendent of the hospital, Dr. Winifred Overholser, reviewed drafts of my papers, he made helpful corrections regarding some outright errors of fact, along with a useful suggestion that my point of view and method be made explicit. During the study, the Laboratory of Socio-environmental Studies, then headed by its originating director, John Clausen, provided me salary, secretarial help, collegial criticism, and encouragement to look at the hospital with sociology in mind, not junior psychiatry. The clearance rights possessed by the Laboratory and its parent body, NIMH, were exercised, the only consequence I am aware of being that on one occasion I was asked to consider a substitute for one or two impolite adjectives.

The point I want to make is that this freedom and opportunity to engage in pure research was afforded me in regard to a government agency, through the financial support of another government agency, both of which were required to operate in the presumably delicate atmosphere of Washington, and this was done at a time when some universities in this country, the traditional bastions of free enquiry, would have put more restrictions on my efforts. For this I must thank the open- and fair-mindedness of psychiatrists and social scientists in government.

Erving Goffman  
Berkeley, California, 1961



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## INTRODUCTION

A total institution may be defined as a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life. Prisons serve as a clear example, providing we appreciate that what is prison-like about prisons is found in institutions whose members have broken no laws. This volume deals with total institutions in general and one example, mental hospitals, in particular. The main focus is on the world of the inmate, not the world of the staff. A chief concern is to develop a sociological version of the structure of the self.

Each of the four essays in this book was written to stand by itself, the first two having been separately published. All were intended to focus on the same issue—the inmate's situation. Some repetition is therefore involved. On the other hand, each paper approaches the central issue from a different vantage point, each introduction drawing upon a different source in sociology and having little relation to the other papers.

This method of presenting material may be irksome to the reader, but it allows me to pursue the main theme of each paper analytically and comparatively past the point that would be allowable in chapters of an integrated book. I plead the state of our discipline. I think

that at present, if sociological concepts are to be treated with affection, each must be traced back to where it best applies, followed from there wherever it seems to lead, and pressed to disclose the rest of its family. Better, perhaps, different coats to clothe the children well than a single splendid tent in which they all shiver.

The first paper, "On the Characteristics of Total Institutions," is a general examination of social life in these establishments, drawing heavily on two examples that feature involuntary membership—mental hospitals and prisons. There the themes developed in detail in the remaining papers are stated and their place in the broader whole suggested. The second paper, "The Moral Career of the Mental Patient," considers the initial effects of institutionalization on the social relationships the individual possessed before he became an inmate. The third paper, "The Underlife of a Public Institution," is concerned with the attachment the inmate is expected to manifest to his iron home and, in detail, with the way in which inmates can introduce some distance between themselves and these expectations. The final paper, "The Medical Model and Mental Hospitalization," turns attention back to the professional staffs to consider, in the case of mental hospitals, the role of the medical perspective in presenting to the inmate the facts of his situation.

# ON THE CHARACTERISTICS OF TOTAL INSTITUTIONS<sup>1</sup>

<sup>1</sup> A shorter version of this paper appears in the *Symposium on Preventive and Social Psychiatry*, Walter Reed Army Institute of Research, Washington, D.C. (15-17 April 1957), pp. 43-84. The present version is reprinted from *The Prison*, edited by Donald R. Cressey, copyright © 1961 by Holt, Rinehart and Winston, Inc.



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## INTRODUCTION

### I

Social establishments—institutions in the everyday sense of that term—are places such as rooms, suites of rooms, buildings, or plants in which activity of a particular kind regularly goes on. In sociology we do not have a very apt way of classifying them. Some establishments, like Grand Central Station, are open to anyone who is decently behaved; others, like the Union League Club of New York or the laboratories at Los Alamos, are felt to be somewhat snippy about who is let in. Some, like shops and post offices, have a few fixed members who provide a service and a continuous flow of members who receive it. Others, like homes and factories, involve a less changing set of participants. Some institutions provide the place for activities from which the individual is felt to draw his social status, however enjoyable or lax these pursuits may be; other institutions, in contrast, provide a place for associations felt to be elective and unserious, calling for a contribution of time left over from more serious demands. In this book another category of institutions is singled out and claimed as a natural and fruitful one because its members appear to have so much in common—so much, in fact, that to learn about one of these institutions we would be well advised to look at the others.

## II

Every institution captures something of the time and interest of its members and provides something of a world for them; in brief, every institution has encompassing tendencies. When we review the different institutions in our Western society, we find some that are encompassing to a degree discontinuously greater than the ones next in line. Their encompassing or total character is symbolized by the barrier to social intercourse with the outside and to departure that is often built right into the physical plant, such as locked doors, high walls, barbed wire, cliffs, water, forests, or moors. These establishments I am calling *total institutions*, and it is their general characteristics I want to explore.<sup>2</sup>

The total institutions of our society can be listed in five rough groupings. First, there are institutions established to care for persons felt to be both incapable and harmless; these are the homes for the blind, the aged, the orphaned, and the indigent. Second, there are places established to care for persons felt to be both incapable of looking after themselves and a threat to the community, albeit an unintended one: TB sanitarium, mental hospitals, and leprosaria. A third type of total institution is organized to protect the community against what are felt

<sup>2</sup> The category of total institutions has been pointed out from time to time in the sociological literature under a variety of names, and some of the characteristics of the class have been suggested, most notably perhaps in Howard Rowland's neglected paper, "Segregated Communities and Mental Health," in *Mental Health Publication of the American Association for the Advancement of Science*, No. 9, edited by F. R. Moulton, 1939. A preliminary statement of the present paper is reported in *Group Processes*, Transactions of the Third (1956) Conference, edited by Bertram Schaffner (New York: Josiah Macy, Jr. Foundation, 1957). The term "total" has also been used in its present context in Amitai Etzioni, "The Organizational Structure of 'Closed' Educational Institutions in Israel," *Harvard Educational Review*, XXVII (1957), p. 115.

to be intentional dangers to it, with the welfare of the persons thus sequestered not the immediate issue: jails, penitentiaries, P.O.W. camps, and concentration camps. Fourth, there are institutions purportedly established the better to pursue some worklike task and justifying themselves only on these instrumental grounds: army barracks, ships, boarding schools, work camps, colonial compounds, and large mansions from the point of view of those who live in the servants' quarters. Finally, there are those establishments designed as retreats from the world even while often serving also as training stations for the religious; examples are abbeys, monasteries, convents, and other cloisters. This classification of total institutions is not neat, exhaustive, nor of immediate analytical use, but it does provide a purely denotative definition of the category as a concrete starting point. By anchoring the initial definition of total institutions in this way, I hope to be able to discuss the general characteristics of the type without becoming tautological.

Before I attempt to extract a general profile from this list of establishments, I would like to mention one conceptual problem: none of the elements I will describe seems peculiar to total institutions, and none seems to be shared by every one of them; what is distinctive about total institutions is that each exhibits to an intense degree many items in this family of attributes. In speaking of "common characteristics," I will be using this phrase in a way that is restricted but I think logically defensible. At the same time this permits using the method of ideal types, establishing common features with the hope of highlighting significant differences later.

### III

A basic social arrangement in modern society is that the individual tends to sleep, play, and work in different

places, with different co-participants, under different authorities, and without an over-all rational plan. The central feature of total institutions can be described as a breakdown of the barriers ordinarily separating these three spheres of life. First, all aspects of life are conducted in the same place and under the same single authority. Second, each phase of the member's daily activity is carried on in the immediate company of a large batch of others, all of whom are treated alike and required to do the same thing together. Third, all phases of the day's activities are tightly scheduled, with one activity leading at a prearranged time into the next, the whole sequence of activities being imposed from above by a system of explicit formal rulings and a body of officials. Finally, the various enforced activities are brought together into a single rational plan purportedly designed to fulfill the official aims of the institution.

Individually, these features are found in places other than total institutions. For example, our large commercial, industrial, and educational establishments are increasingly providing cafeterias and free-time recreation for their members; use of these extended facilities remains voluntary in many particulars, however, and special care is taken to see that the ordinary line of authority does not extend to them. Similarly, housewives or farm families may have all their major spheres of life within the same fenced-in area, but these persons are not collectively regimented and do not march through the day's activities in the immediate company of a batch of similar others.

The handling of many human needs by the bureaucratic organization of whole blocks of people—whether or not this is a necessary or effective means of social organization in the circumstances—is the key fact of total institutions. From this follow certain important implications.

When persons are moved in blocks, they can be super-

vised by personnel whose chief activity is not guidance or periodic inspection (as in many employer-employee relations) but rather surveillance—a seeing to it that everyone does what he has been clearly told is required of him, under conditions where one person's infraction is likely to stand out in relief against the visible, constantly examined compliance of the others. Which comes first, the large blocks of managed people, or the small supervisory staff, is not here at issue; the point is that each is made for the other.

In total institutions there is a basic split between a large managed group, conveniently called inmates, and a small supervisory staff. Inmates typically live in the institution and have restricted contact with the world outside the walls; staff often operate on an eight-hour day and are socially integrated into the outside world.<sup>3</sup> Each grouping tends to conceive of the other in terms of narrow hostile stereotypes, staff often seeing inmates as bitter, secretive, and untrustworthy, while inmates often see staff as condescending, highhanded, and mean. Staff tends to feel superior and righteous; inmates tend, in some ways at least, to feel inferior, weak, blameworthy, and guilty.<sup>4</sup>

Social mobility between the two strata is grossly restricted; social distance is typically great and often formally prescribed. Even talk across the boundaries may

<sup>3</sup> The binary character of total institutions was pointed out to me by Gregory Bateson, and has been noted in the literature. See, for example, Lloyd E. Ohlin, *Sociology and the Field of Corrections* (New York: Russell Sage Foundation, 1956), pp. 14, 20. In those situations where staff are also required to live in, we may expect staff to feel they are suffering special hardships and to have brought home to them a status dependency on life on the inside which they did not expect. See Jane Cassels Record, "The Marine Radioman's Struggle for Status," *American Journal of Sociology*, LXII (1957), p. 359.

<sup>4</sup> For the prison version, see S. Kirson Weinberg, "Aspects of the Prison's Social Structure," *American Journal of Sociology*, XLVII (1942), pp. 717-26.

be conducted in a special tone of voice, as illustrated in a fictionalized record of an actual sojourn in a mental hospital:

“I tell you what,” said Miss Hart when they were crossing the dayroom. “You do everything Miss Davis says. Don’t think about it, just do it. You’ll get along all right.”

As soon as she heard the name Virginia knew what was terrible about Ward One. Miss Davis. “Is she the head nurse?”

“And how,” muttered Miss Hart. And then she raised her voice. The nurses had a way of acting as if the patients were unable to hear anything that was not shouted. Frequently they said things in normal voices that the ladies were not supposed to hear; if they had not been nurses you would have said they frequently talked to themselves. “A most competent and efficient person, Miss Davis,” announced Miss Hart.<sup>5</sup>

Although some communication between inmates and the staff guarding them is necessary, one of the guard’s functions is the control of communication from inmates to higher staff levels. A student of mental hospitals provides an illustration:

Since many of the patients are anxious to see the doctor on his rounds, the attendants must act as mediators between the patients and the physician if the latter is not to be swamped. On Ward 30, it seemed to be generally true that patients without physical symptoms who fell into the two lower privilege groups were almost never permitted to talk to the physician unless Dr. Baker himself asked for them. The persevering, nagging delusional group—

<sup>5</sup> Mary Jane Ward, *The Snake Pit* (New York: New American Library, 1955), p. 72.

who were termed "worry warts," "nuisances," "bird dogs," in the attendants' slang—often tried to break through the attendant-mediator but were always quite summarily dealt with when they tried.<sup>6</sup>

Just as talk across the boundary is restricted, so, too, is the passage of information, especially information about the staff's plans for inmates. Characteristically, the inmate is excluded from knowledge of the decisions taken regarding his fate. Whether the official grounds are military, as in concealing travel destination from enlisted men, or medical, as in concealing diagnosis, plan of treatment, and approximate length of stay from tuberculosis patients,<sup>7</sup> such exclusion gives staff a special basis of distance from and control over inmates.

All these restrictions of contact presumably help to maintain the antagonistic stereotypes.<sup>8</sup> Two different social and cultural worlds develop, jogging alongside each other with points of official contact but little mutual penetration. Significantly, the institutional plant and name come to be identified by both staff and inmates as somehow belonging to staff, so that when either grouping refers to the views or interests of "the institution," by implication they are referring (as I shall also) to the views and concerns of the staff.

The staff-inmate split is one major implication of the bureaucratic management of large blocks of persons; a second pertains to work.

<sup>6</sup> Ivan Belknap, *Human Problems of a State Mental Hospital*, (New York: McGraw-Hill, 1956), p. 177.

<sup>7</sup> A very full case report on this matter is provided in a chapter titled "Information and the Control of Treatment," in Julius A. Roth's forthcoming monograph on the tuberculosis hospital. His work promises to be a model study of a total institution. Preliminary statements may be found in his articles, "What is an Activity?" *Etc.*, XIV (Autumn 1956), pp. 54-56, and "Ritual and Magic in the Control of Contagion," *American Sociological Review*, XXII (1957), pp. 310-14.

<sup>8</sup> Suggested in Ohlin, *op. cit.*, p. 20.

In the ordinary arrangements of living in our society, the authority of the work place stops with the worker's receipt of a money payment; the spending of this in a domestic and recreational setting is the worker's private affair and constitutes a mechanism through which the authority of the work place is kept within strict bounds. But to say that inmates of total institutions have their full day scheduled for them is to say that all their essential needs will have to be planned for. Whatever the incentive given for work, then, this incentive will not have the structural significance it has on the outside. There will have to be different motives for work and different attitudes toward it. This is a basic adjustment required of the inmates and of those who must induce them to work.

Sometimes so little work is required that inmates, often untrained in leisurely pursuits, suffer extremes of boredom. Work that is required may be carried on at a very slow pace and may be geared into a system of minor, often ceremonial, payments, such as the weekly tobacco ration and the Christmas presents that lead some mental patients to stay on their jobs. In other cases, of course, more than a full day's hard labor is required, induced not by reward but by threat of physical punishment. In some total institutions, such as logging camps and merchant ships, the practice of forced saving postpones the usual relation to the world that money can buy; all needs are organized by the institution and payment is given only when a work season is over and the men leave the premises. In some institutions there is a kind of slavery, with the inmate's full time placed at the convenience of staff; here the inmate's sense of self and sense of possession can become alienated from his work capacity. T. E. Lawrence gives an illustration in his record of service in an R.A.F. training depot:

The six-weeks men we meet on fatigues shock our moral sense by their easy-going. "You're silly —, you rookies, to sweat yourselves" they say. Is it our new keenness, or a relic of civility in us? For by the R.A.F. we shall be paid all the twenty-four hours a day, at three halfpence an hour; paid to work, paid to eat, paid to sleep: always those halfpence are adding up. Impossible, therefore, to dignify a job by doing it well. It must take as much time as it can for afterwards there is not a fireside waiting, but another job.<sup>9</sup>

Whether there is too much work or too little, the individual who was work-oriented on the outside tends to become demoralized by the work system of the total institution. An example of such demoralization is the practice in state mental hospitals of "bumming" or "working someone for" a nickel or dime to spend in the canteen. Persons do this—often with some defiance—who on the outside would consider such actions beneath their self-respect. (Staff members, interpreting this begging pattern in terms of their own civilian orientation to earning, tend to see it as a symptom of mental illness and one further bit of evidence that inmates really are unwell.)

There is an incompatibility, then, between total institutions and the basic work-payment structure of our society. Total institutions are also incompatible with another crucial element of our society, the family. Family life is sometimes contrasted with solitary living, but in fact the more pertinent contrast is with batch living, for those who eat and sleep at work, with a group of fellow workers, can hardly sustain a meaningful domestic existence.<sup>10</sup> Conversely, maintaining families off the grounds often permits staff members to remain integrated with

<sup>9</sup> T. E. Lawrence, *The Mint* (London: Jonathan Cape, 1955), p. 40.

<sup>10</sup> An interesting marginal case here is the Israeli *kibbutz*. See Melford E. Spiro, *Kibbutz, Venture in Utopia*, (Cambridge: Harvard University Press, 1956), and Etzioni, *op. cit.*

the outside community and to escape the encompassing tendency of the total institution.

Whether a particular total institution acts as a good or bad force in civil society, force it will have, and this will in part depend on the suppression of a whole circle of actual or potential households. Conversely, the formation of households provides a structural guarantee that total institutions will not be without resistance. The incompatibility of these two forms of social organization should tell us something about the wider social functions of them both.

The total institution is a social hybrid, part residential community, part formal organization; therein lies its special sociological interest. There are other reasons for being interested in these establishments, too. In our society, they are the forcing houses for changing persons; each is a natural experiment on what can be done to the self.

Some of the key features of total institutions have been suggested. I want now to consider these establishments from two perspectives: first, the inmate world; then the staff world. Finally, I want to say something about contacts between the two.

## THE INMATE WORLD

### I

It is characteristic of inmates that they come to the institution with a "presenting culture" (to modify a psychiatric phrase) derived from a "home world"—a way of life and a round of activities taken for granted until the point of admission to the institution. (There is reason, then, to

exclude orphanages and foundling homes from the list of total institutions, except in so far as the orphan comes to be socialized into the outside world by some process of cultural osmosis even while this world is being systematically denied him.) Whatever the stability of the recruit's personal organization, it was part of a wider framework lodged in his civil environment—a round of experience that confirmed a tolerable conception of self and allowed for a set of defensive maneuvers, exercised at his own discretion, for coping with conflicts, discrediting, and failures.

Now it appears that total institutions do not substitute their own unique culture for something already formed; we deal with something more restricted than acculturation or assimilation. If cultural change does occur, it has to do, perhaps, with the removal of certain behavior opportunities and with failure to keep pace with recent social changes on the outside. Thus, if the inmate's stay is long, what has been called "disculturation"<sup>11</sup> may occur—that is, an "untraining" which renders him temporarily incapable of managing certain features of daily life on the outside, if and when he gets back to it.

The full meaning for the inmate of being "in" or "on the inside" does not exist apart from the special meaning to him of "getting out" or "getting on the outside." In this sense, total institutions do not really look for cultural victory. They create and sustain a particular kind of tension between the home world and the institutional world and use this persistent tension as strategic leverage in the management of men.

<sup>11</sup> A term employed by Robert Sommer, "Patients who grow old in a mental hospital," *Geriatrics*, XIV (1959), pp. 586-87. The term "desocialization," sometimes used in this context, would seem to be too strong, implying loss of fundamental capacities to communicate and co-operate.

## II

The recruit comes into the establishment with a conception of himself made possible by certain stable social arrangements in his home world. Upon entrance, he is immediately stripped of the support provided by these arrangements. In the accurate language of some of our oldest total institutions, he begins a series of abasements, degradations, humiliations, and profanations of self. His self is systematically, if often unintentionally, mortified. He begins some radical shifts in his *moral career*, a career composed of the progressive changes that occur in the beliefs that he has concerning himself and significant others.

The processes by which a person's self is mortified are fairly standard in total institutions;<sup>12</sup> analysis of these processes can help us to see the arrangements that ordinary establishments must guarantee if members are to preserve their civilian selves.

The barrier that total institutions place between the inmate and the wider world marks the first curtailment of self. In civil life, the sequential scheduling of the individual's roles, both in the life cycle and in the repeated daily round, ensures that no one role he plays will block his performance and ties in another. In total institutions, in contrast, membership automatically disrupts role scheduling, since the inmate's separation from the wider world lasts around the clock and may continue for years. Role dispossession therefore occurs. In many total institutions the privilege of having visitors or of visiting away from the establishment is completely withheld at first, ensuring a deep initial break with past roles and an

<sup>12</sup> An example of the description of these processes may be found in Gresham M. Sykes, *The Society of Captives* (Princeton: Princeton University Press, 1958), ch. iv, "The Pains of Imprisonment," pp. 63-83.

appreciation of role dispossession. A report on cadet life in a military academy provides an illustration:

This clean break with the past must be achieved in a relatively short period. For two months, therefore, the swab is not allowed to leave the base or to engage in social intercourse with non-cadets. This complete isolation helps to produce a unified group of swabs, rather than a heterogeneous collection of persons of high and low status. Uniforms are issued on the first day, and discussions of wealth and family background are taboo. Although the pay of the cadet is very low, he is not permitted to receive money from home. The role of the cadet must supersede other roles the individual has been accustomed to play. There are few clues left which will reveal social status in the outside world.<sup>13</sup>

I might add that when entrance is voluntary, the recruit has already partially withdrawn from his home world; what is cleanly severed by the institution is something that had already started to decay.

Although some roles can be re-established by the inmate if and when he returns to the world, it is plain that other losses are irrevocable and may be painfully experienced as such. It may not be possible to make up, at a later phase of the life cycle, the time not now spent in educational or job advancement, in courting, or in rearing one's children. A legal aspect of this permanent dis-

<sup>13</sup> Sanford M. Dornbusch, "The Military Academy as an Assimilating Institution," *Social Forces*, XXXIII (1955), p. 317. For an example of initial visiting restrictions in a mental hospital, see D. McL. Johnson and N. Dodds, eds., *The Plea for the Silent* (London: Christopher Johnson, 1957), p. 16. Compare the rule against having visitors which has often bound domestic servants to their total institution. See J. Jean Hecht, *The Domestic Servant Class in Eighteenth-Century England* (London: Routledge and Kegan Paul, 1956), pp. 127-28.

possession is found in the concept of "civil death": prison inmates may face not only a temporary loss of the rights to will money and write checks, to contest divorce or adoption proceedings, and to vote but may have some of these rights permanently abrogated.<sup>14</sup>

The inmate, then, finds certain roles are lost to him by virtue of the barrier that separates him from the outside world. The process of entrance typically brings other kinds of loss and mortification as well. We very generally find staff employing what are called admission procedures, such as taking a life history, photographing, weighing, fingerprinting, assigning numbers, searching, listing personal possessions for storage, undressing, bathing, disinfecting, haircutting, issuing institutional clothing, instructing as to rules, and assigning to quarters.<sup>15</sup> Admission procedures might better be called "trimming" or "programming" because in thus being squared away the new arrival allows himself to be shaped and coded into an object that can be fed into the administrative machinery of the establishment, to be worked on smoothly by routine operations. Many of these procedures depend upon attributes such as weight or fingerprints that the individual possesses merely because he is a member of the largest and most abstract of social categories, that of human being. Action taken on the basis of such attributes necessarily ignores most of his previous bases of self-identification.

Because a total institution deals with so many aspects

<sup>14</sup> A useful review in the case of American prisons may be found in Paul W. Tappan, "The Legal Rights of Prisoners," *The Annals*, CCXIII (May 1954), pp. 99-111.

<sup>15</sup> See, for example, J. Kerkhoff, *How Thin the Veil: A Newspaperman's Story of His Own Mental Crack-up and Recovery* (New York: Greenberg, 1952), p. 110; Elie A. Cohen, *Human Behaviour in the Concentration Camp*, (London: Jonathan Cape, 1954), pp. 118-122; Eugen Kogon, *The Theory and Practice of Hell* (New York: Berkley Publishing Corp., n.d.), pp. 63-68.

of its inmates' lives, with the consequent complex squaring away at admission, there is a special need to obtain initial co-operativeness from the recruit. Staff often feel that a recruit's readiness to be appropriately deferential in his initial face-to-face encounters with them is a sign that he will take the role of the routinely pliant inmate. The occasion on which staff members first tell the inmate of his deference obligations may be structured to challenge the inmate to balk or to hold his peace forever. Thus these initial moments of socialization may involve an "obedience test" and even a will-breaking contest: an inmate who shows defiance receives immediate visible punishment, which increases until he openly "cries uncle" and humbles himself.

An engaging illustration is provided by Brendan Behan in reviewing his contest with two warders upon his admission to Walton prison:

"And 'old up your 'ead, when I speak to you."

"'Old up your 'ead, when Mr. Whitbread speaks to you," said Mr. Holmes.

I looked round at Charlie. His eyes met mine and he quickly lowered them to the ground.

"What are you looking round at, Behan? Look at me."

. . . . .

I looked at Mr. Whitbread. "I am looking at you," I said.

"You are looking at Mr. Whitbread—what?" said Mr. Holmes.

"I am looking at Mr. Whitbread."

Mr. Holmes looked gravely at Mr. Whitbread, drew back his open hand, and struck me on the face, held me with his other hand and struck me again.

My head spun and burned and pained and I wondered would it happen again. I forgot and felt an-

other smack, and forgot, and another, and moved, and was held by a steadying, almost kindly hand, and another, and my sight was a vision of red and white and pity-coloured flashes.

"You are looking at Mr. Whitbread—what, Behan?"

I gulped and got together my voice and tried again till I got it out. "I, sir, please, sir, I am looking at you, I mean, I am looking at Mr. Whitbread, sir."<sup>16</sup>

Admission procedures and obedience tests may be elaborated into a form of initiation that has been called "the welcome," where staff or inmates, or both, go out of their way to give the recruit a clear notion of his plight.<sup>17</sup> As part of this rite of passage he may be called by a term such as "fish" or "swab," which tells him that he is merely an inmate, and, what is more, that he has a special low status even in this low group.

The admission procedure can be characterized as a leaving off and a taking on, with the midpoint marked by physical nakedness. Leaving off of course entails a dispossession of property, important because persons invest self feelings in their possessions. Perhaps the most significant of these possessions is not physical at all, one's full name; whatever one is thereafter called, loss of one's name can be a great curtailment of the self.<sup>18</sup>

<sup>16</sup> Brendan Behan, *Borstal Boy* (London: Hutchinson, 1958), p. 40. See also Anthony Heckstall-Smith, *Eighteen Months* (London: Allan Wingate, 1954), p. 26.

<sup>17</sup> For a version of this process in concentration camps, see Cohen, *op. cit.*, p. 120, and Kogon, *op. cit.*, pp. 64-65. For a fictionalized treatment of the welcome in a girls' reformatory see, Sara Harris, *The Wayward Ones* (New York: New American Library, 1952), pp. 31-34. A prison version, less explicit, is found in George Dendrickson and Frederick Thomas, *The Truth About Dartmoor* (London: Gollancz, 1954), pp. 42-57.

<sup>18</sup> For example, Thomas Merton, *The Seven Storey Mountain* (New York: Harcourt, Brace and Company, 1948), pp. 290-91; Cohen, *op. cit.*, pp. 145-47.