

CARCERAL RESIDENTS' RESPONSES TO INCONSISTENT POLICY
ADHERENCE

by

Chelsea Foudray
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LIST OF ABBREVIATIONS

Correctional Officer CO
Department of Corrections..... DOC
Pennsylvania Department of CorrectionsPA-DOC

ABSTRACT

CARCERAL RESIDENTS' RESPONSES TO INCONSISTENT POLICY ADHERENCE

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With high rates of incapacitation in the United States, policies and procedures are a major aid in managing day-to-day prison operations. However, organizational research notes that policy and practice implementation often differ significantly from formal written procedures/practices/rules. This has potential detrimental effects to the functioning of an organization and to the perceptions of those living/working within that organizational environment. This thesis explores carceral residents' responses to perceived inconsistent policy adherence through secondary, qualitative analysis. Merton's anomie and strain theory supplemented by Maier and Seligman's learned helplessness theory frame this work. Findings suggest carceral residents perceive a great deal of inconsistent policy adherence. To adapt to these misalignments, more than half of residents adapt their behavior. The majority of these adaptations are consistent with learned helplessness and tempered conformity. Implications of this work include advancing knowledge about the

formal/informal systems in place in carceral environments and recommendations for remedying some of this gap. Implications also include modernizing prior criminal justice theories such as strain and including cross-disciplinary theoretical framing from learned helplessness into today's carceral environments as a way of understanding current practices and resident response.

INTRODUCTION

Over the last 30+ years the punitive mindset in the U.S. within criminal justice policies/practices grew increasingly normative (Kang-Brown, Hinds, Heiss, & Lu, 2018). While the incarceration rate in recent years declined slightly, the popular ‘penological’ way of thinking still views incapacitation as an appropriate form of punishment. Despite some research suggesting incarceration yields criminogenic effects (Nagin, Cullen, & Jonson, 2009), incarceration remains a relatively common way of separating individuals who violate social norms, rules, and laws from broader society (Garland, 1991). The rise and continuation of punitiveness is a leading factor contributing to what may call the era of mass incarceration (Kang-Brown et al., 2018). This is evidenced by the prison incarceration rate, which increased by 400% between 1970 and the early 2000s (Kang-Brown et al., 2018) and the large number of individuals currently under some form of correctional supervision (Bronson & Carson, 2019; Zheng, 2019). Even with the slight decline seen in recent years, approximately 1.5 million individuals remain in U.S. prisons, with an additional approximately 750,000 individuals in jails (Bronson & Carson, 2019). While the problems associated with mass-incarceration garner increased attention and incarceration rates are slowly declining, the problem remains unsolved. Among a host of other social problems associated with mass incarceration, prison

overcrowding, lack of programs/services, and under-funding are ever-present (Bronson & Carson, 2019; Kang-Brown et al., 2018; Zheng, 2019).

To combat space and workload issues within carceral institutions, policies and procedures guide and assist staff with managing an immense crowd of people. For example, policies and procedures in prisons instruct both residents¹ and staff regarding how to behave, what is punishable within the penal institution, how individuals move within the space, and what sanctions ensue if/when either group commits rule violations. Not or miss-adhering to these policies and procedures causes challenges for individuals, both staff and residents, and affect both the effectiveness and efficiency of the institution overall. However, policies and procedures emerging from top administration within an institution or even within the broader system (e.g., Department of Corrections (DOC)), may not always produce policies and procedures that staff execute as intended within organizations (Baier, March, & Sætren, 1986). This includes Correctional Officers (COs) whose decisions within day-to-day operations represent the implementation of policy at the practice level.

Organizational research suggests a gap between policy and practice; a gap that prisons are not immune to. Given the vast number of individuals in prison, it is not surprising that residents perceive policies and procedures are often not implemented with

¹ In keeping with the growing and important person-first language tradition, I opt to use the term “residents” to refer to individuals confined to prisons. I choose this term because it denotes a particular locale rather than acting as a label or judgement on an individual the way words like “inmates,” “prisoners,” and “convicts” do. I could have used “individuals who are incarcerated” or some variation—in true person-first style. However, this language is in passive voice and adds many more words to the manuscript. Thus, I opted for the term residents. Whenever other scholars, residents, or staff use the terms “inmate” or “prisoners,” however, I include that term as it is an in vivo representation of the language used by prior researchers and our prisons and the individuals within them.

fidelity (adherence to intent/design). Wherever individuals act within a policy environment, particularly when policy may be interpreted in different ways, discretion exists. This is even more prevalent in areas where immediate direct oversight is not present, like in carceral environments (Baier et al., 1986; Feldman, 1992). Having to manage a large facility such as prison is a complicated job. This makes it understandable that variation in day-to-day policies exists. Combining the importance of policy and procedure in corrections with the high potential of discretion has a tremendous effect on the individuals under correctional supervision. As a result, residents suffer consequences from incarceration *and also* from inconsistency in policy implementation. This thesis examines residents' responses to the inconsistencies present during rule and policy application within carceral spaces. Two theories--learned helplessness and original strain theory—frame residents' responses to this inconsistent policy/practice implementation (Merton, 1938; Seligman, 1972).

This thesis builds on limited prior research on responses to policy and procedures in prison and emphasizes how the day to day operations of a prison are imperative to the functioning and survival of the people who live there. The focus of this thesis is on the individuals who are dependent on the way the facility runs and their perceptions of the implementation of policy and procedure, rather than the cause of inconsistent policy adherence. It is important to note the emphasis on perception, because *perceived* inconsistent policy adherence may have as great of an effect as *confirmed* inconsistent policy adherence. Residents may bend or break rules when they perceive COs treat them unfairly, even if this is not the case. According to Tyler (2003), subjective judgments on

fair and equal treatment are a cornerstone of cooperative behavior. A simple belief of unfairness may have as much of an effect on adaptive behavior. This thesis limits analysis of adaptive behaviors to two types of behaviors. The first behavioral adaptation is *learned helplessness* (Seligman, 1972). Learned helplessness is a feeling of defeat in what is considered a hopeless situation. This feeling of defeat then leads to giving up. The second type of behavioral adaptation comes from Merton's original *strain* theory (1938).

Prior explorations of responses to policy and procedure by residents is fairly limited. To add to the existing literature on this topic, I explore the following three research questions. First, do residents perceive a gap between policy and implementation, as indicated by inconsistent policy adherence? Second, what areas of resident life are most impacted by inconsistent policy adherence? Finally, how do residents respond to perceived inconsistent policy adherence? This final question is of particular interest, because residents have relatively limited means at their disposal to cope with strain.

Below, I provide an overview of the current organizational research concerning the policy-practice gap in corrections to help foster an understanding of how residents might perceive inconsistent policy adherence. I then provide an overview of the link between perception and behavior, to explain how the perception of inconsistent policy adherence can provoke stress responses just as well as other outward behavior. Next, I outline Seligman's theory of learned helplessness and Merton's strain theory to guide the understanding of the research questions as well as clarify which aspects of the research are included in analysis. Finally, I outline the methods of data collection and analysis,

present the findings, and conclude with a discussion of the findings and possible future research directions.

LITERATURE REVIEW

Policy and Discretion

Policies and procedures are integral to the functioning of an established organization (Baier, March & Sætren, 1986). Policies and procedures establish guidelines, provide alternatives for constant monitoring by supervisors, and provide individuals within the organization with the ability to make necessary, split-second decisions whenever necessary (Feldman, 1992). At the same time, a common organizational issue is the gap between policy as written and policy as implemented (Baier et al., 1986; Reiter & Chestnut, 2018; Rudes, 2012). Upper management, middle management, and front-line workers do not always have a similar interpretation of formal policy and thus regularly implement policy informally. Organizational misalignment between policy and practice emerges from several internal and external sources. Internally, limited resources (Baier et al., 1986), differentially interpreting policies at different management levels (Reiter & Chestnut, 2018; Rudes, 2012), and mismatched goals (Kifer, Hemmens, & Stohr, 2003) potentially account for differences between formal policy and informal implementation. Externally, politics plays an important part in shaping policies. As Portillo and Rudes (2012) point out, policy and organizations exist in a larger context, where societal and personal views influence how organizations execute the rules and procedures. Legislation put forth by US Congress (Reiter &

Chestnut, 2018) and the public calling for policies attempting to solve societal issues (Baier et al., 1986, Reiter & Chestnut, 2018) causes mismatched policy and implementation as well. In this case, external pressures for policy emerge via the political sphere with little/no regard to what is possible for organizations to do. A great example of public opinion driving policy is the war on drugs. Starting in 1986, more police and prison efforts focus on curbing the distribution and use of illegal drugs (Moore & Elkavich, 2008). In reality, police are limited in their ability to continually focus all attention on drug crime, leading to unequal enforcement in certain demographics and contributing to mass-incarceration (2008).

Authority structure is deemed highly important in an organization, particularly in an organization where the individuals with the best insight into policy work on the line (Etzioni, 1959). The significance of authority structure becomes even more important in an organization that functions based on compliance with authoritative structures. This compliance is needed when authority helps make facilities manageable (Tyler, 2003). The result of formal policy and informal practice misaligning is a lack of trust, and therefore a loss of legitimacy in the authoritative figures helping the facility run (Tyler, 2003). An area where this loss of legitimacy is particularly detrimental is in carceral institutions. In a later publication, Tyler reiterates that use of fair procedures establishes legitimacy in COs authority and minimizes the negative implications of incarceration (Tyler, 2010). Inconsistent adherence to policies by COs in prison is consequential for resident behavior while incarcerated, and potentially after release. This last point in particular is important, since one of the goals of the correctional system is successful

rehabilitation and reintegration (Kifer, Hemmens, & Stohr, 2003). Anything internally keeping correctional management and staff from successfully adhering to policies may then have wide-spread and long-lasting effects.

There are several reasons why employees in carceral institutions struggle with adhering to policy and procedures. Britton (2003) notes that COs are individuals performing a conventional service worker job in a highly unique situation. The issue in performing a service job in a total institution (as defined by Goffman (1961)) is the presence of inflexible and sometimes confusing rules in the workplace (Britton, 2003). Correctional Officers are required to adhere to policy directives of several organizational levels; some of which might be competing with each other. With the potential for different courses of action, it is natural discretion is part of the daily work experience of COs (Feldman, 1992). Correctional Officer discretion is then defined as the opportunity to make a choice based on what the CO decides the best course of action is in a given situation. Direct contact with residents, the inability of constant oversight, and the inability to constantly rely on supervisors creates even more of a high discretionary environment in prisons (1992). The many demands, few resources, and unique environment then naturally requires improvisation.

An additional problem occurs when COs do not agree with correctional policies and procedures. The overarching goals of carceral institutions include (broadly): retribution, deterrence, incapacitation, and rehabilitation (Kifer et al., 2003). However, CO support varies for these goals, and they might not accept certain policies as appropriate (Kifer et al., 2003). This, in turn, may lead to different COs implementing

policies in different ways. Depending on circumstances, it may even lead to a CO implementing the same rule in a different way in various situations and/or with various individuals. Correctional Officer discretion may disrupt residents' daily routines as the residents may not know how or in what way certain policies/practices work because they change frequently. Little research assesses the effects inconsistent policy adherence on residents. However, with an organization reliant on policy to structure the day, inconsistency potentially causes a great deal of strain for residents.

Strain Theory

Merton's anomie and strain theory (1938) are well-considered within social science research (see Agnew, 1992; Blevins, Listwan, Cullen, & Jonson, 2010; Morris, Carriaga, Diamond, N. Piquero, & A. Piquero, 2012). Despite its' popularity, the application of strain theory is rarely considered in carceral settings. This thesis uses strain theory, supplemented by Maier and Seligman's theory of learned helplessness (1976), as the theoretical framework for understanding reactions to perceived inconsistent policy adherence among residents within penal institutions. The particular area of strain theory considered is Merton's strain typology (1938). The theory of learned helplessness is even less often considered in carceral institutions (see Goodstein, Mackenzie, & Shotland, 1984; Schill & Marcus, 1998). Based on its description and traditional application in psychology, it is a theory worth further exploring in prison.

Merton's variation of strain theory was first composed as an explanation for why certain societies are more crime-prone than others (1938). This theory states that if cultural goals are unattainable through society's conventional methods, strain develops.

Strain according to Merton (1938) is particularly robust when there is strong focus on achieving specifically denoted cultural goals. Since *achieving* these goals often overpowers the idea of *working towards* a goal, individuals may thwart the system, in various ways, to achieve their preferred outcome (1938). Merton pairs the strain of unattainable cultural goals with the development of anomie (1938). Anomie refers to the breakdown of one's common standards and values and causes an instability in either society as a whole, or individuals (1938). An example of this may be a person embezzling money because the goal of monetary gain is more important than the feeling of having earned the money through legitimate work. The strain produced via wanting money may lead individuals to create alternative pathways to make money faster, even if it means circumventing the conventional methods of doing so. Merton proposed five modes of adaptation for individuals under strain. These include conformity, innovation, retreatism, ritualism, and rebellion (1938). These adaptations apply to the situation at hand and are not internalized per se. Instead, they serve to relieve strain from the adverse situation.

The first behavioral adaptor is the *conformist*. The conformist adapts completely to the goals at hand and society's appropriate means of attaining them (Merton, 1938). This means that the conformist adheres to the rules and regulations and will not try to break or bend any rules to reach goals. The second adaptor is *the innovator*. The innovator accepts the goals but rejects the means of attaining these goals (1938). Rule-bending behavior is common with innovative individuals who adhere to this adaptation. Here, the goals are still important, but the legitimate ways of attaining them may appear

impossible. The third adaptor is the *ritualist* who decides the goals are unacceptable but conforms to the institutionalized means anyway (1938). In other words, the deviance in this typology is internal, but the outward response is following the rules. Fourth, the *retreatist* completely separates themselves from the institutionalized goals and means of achieving those goals. In this instance, the individual has a positive understanding of the goals and the means to get them but has no actual way of attaining those goals through legitimate and effective means. The illegitimate ways of reaching the goal conflict with the idealization of the legitimate methods. This leads to high levels of frustration and may lead to escapism (1938) (i.e., possibly through substance use). The final method of adaptation is *rebellion*. Rebels reject the common goals of society and reject the way to reach them. Instead of succumbing to defeatism they substitute traditional goals and methods with their own (1938).

Merton's methods of adaptation to stressors are situation specific. In other words, certain adaptations are more suitable in certain situations than others. This means that in the case of inconsistent policy adherence in prison, some of Merton's adaptations may not be prevalent/present. However, since prison is a society (a total institution per se; Goffman, 1961) with unique institutionalized goals and means of achieving them, it is likely adaptation occurs within resident behavior. This thesis uses the descriptions of Merton's strain adaptations as a typology for potential action or inaction among residents.

Prior work applying strain theory in penal environments is limited, dated, and tends to focus on violent responses to strain (Agnew, 1992; Blevins, Listwan, Cullen, & Jonson, 2010; Morris, Carriaga, Diamond, N. Piquero, & A. Piquero, 2012).

Additionally, the prior research is limited to general strain theory (Blevins et al., 2010; Morris et al., 2012). In other cases, the application of general strain theory proposes an adaptation of existing theoretical models in prison research. A study conducted by Blevins et al. (2010) argues for an integrated model to explain resident behavior. How individuals respond to strain differs in everyday life (Agnew, 1992), which means that responses to strain in prison are situationally dependent (Blevins et al., 2010). Responses to strain depend on limitations imposed by institutional norms and society's standards. Prison's institutional norms are particularly restrictive, which means residents need to get creative their adaptation strategies (Merton, 1938). Expanding prison research by applying general strain theory provides an explanation for how residents adapt (Blevins et al., 2010).

In other work, Morris et al. (2012) applied general strain theory to violent misconduct. These scholars considered how the environment in a prison might lead to strain and if general strain theory was an appropriate explanation for coping techniques. The results suggest that prison strain was positively associated with violent prison misconduct (Morris et al., 2012). While there is other research pointing to general strain theory's validity in prison, there are limited studies on strain and anomie in prison that go beyond general strain theory. Overall, however, support for general strain theory in prison is positive.

Theory of Learned Helplessness

In addition to Merton's anomie and strain theory (1939), this thesis considers learned helplessness as a supplemental mode of adaptation for carceral residents. Learned

helplessness theory emerged as a response to realizing that humans and animals in uncontrollable situations tend to develop characteristics associated with depression. Maier & Seligman (1976) then delved deeper into uncontrollability and its effects on behavioral responses. Learned helplessness is defined as what happens when an individual (human or animal) learns that the outcome of a situation is uncontrollable by their response and is then severely incapacitated by this knowledge (Maier & Seligman, 1976). Severely incapacitated in this instance means completely giving up, dominant feelings of helplessness and depression, and a general lack of motivation to better the situation. Uncontrollability means that no matter the response, nothing will change the outcome (1976).

Learned helplessness within uncontrollable situations causes three primary deficits: motivational, cognitive, and emotional. Motivation reduces significantly when faced with an unpleasant situation that cannot be controlled (Maier & Seligman, 1976). A debilitating effect on motivation also occurs when someone simply states that efforts made to change a situation are fruitless (1976). Additionally, tests of generalizability show that reduced motivation as a result of learned helplessness is transferable to other situations that seem adverse (Maier & Seligman, 1976). Thus, any instance of learned helplessness in prison may transfer to life after prison. Learned helplessness may thus have long-term effects leading to a vicious cycle of reoffending (1976). The deficit in cognition shows a reduced learning ability in people who experience learned helplessness. Previous exposure to uncontrollable situations shows that the expectancy for change in outcome reduced significantly, even after a success (Maier & Seligman,

1976). This suggests that individuals' learned helplessness has a future demoralizing effect that may impair individuals in their subsequent motivational efforts as well. Finally, the emotional deficits experienced by learned helplessness are significant. Tests on animals showed that uncontrollable adverse situations lead to significantly more emotional distress than controllable adverse situations (1976). Exposure to uncontrollable situations leads to more strain and has bigger cognitive effects than controllable ones. Since carceral residents may consider all/most situations in prison uncontrollable, presence of strain and a learned helplessness response is likely unavoidable.

Aside from causing feelings of learned helplessness, the strains of prison life can lead to resident misbehavior in various degrees (Morris et al., 2012). So, in addition to residents adapting to strains by not doing anything, it is possible that residents adapt to strain by rule-breaking or rule-bending behavior. One can wonder what happens when institutional practice (such as inconsistent policy implementation of uncontrollable situations) stands in the way of the conventional method of achieving these goals. This is particularly relevant, because traditional methods of coping are often unavailable to carceral residents. The absence of these methods may lead to the cumulation of strains, which potentially leads to a method of adapting consistent with learned helplessness (Maier & Seligman, 1976; Schill & Marcus, 1998). This thesis evaluates the ways carceral residents respond to the strains of perceived inconsistent policy adherence through the lens of Merton's strain theory and Seligman's learned helplessness theory by analyzing secondary qualitative data (Merton, 1938; Maier & Seligman, 1976).

METHODS

Data Collection

Data for this thesis comes from a larger study conducted within six of the 26 institutions located in the Department of Corrections (DOC) within the Pennsylvania Department of Corrections. A team led by Dr. Danielle Rudes collected the data in six institutions during years 2014 to 2015. Participants consisted of both residents and staff. While the study initially employed a mixed-method design of surveys and interviews with staff and residents, this thesis uses only the qualitative interview data. I elected to use only the qualitative interview data because my research questions concern active responses and interpretations which would not be sufficiently answered using traditional quantitative methods. Additionally, the analysis yielded a set of findings from open-ended interview questions that were not the primary focus of the data collection, and thus were not captured by the survey in this study. Because connections with previous experiences are imperative, the narrative form of interviews provides more insight than quantitative methods of data collection. The theories employed in this thesis require identification of a potential correlational relationship between nuanced behaviors, thoughts, and feelings, for which interview data is more suitable (Gerring, 2017).

At the study's initiation, each prison provided a list of current residents to the research team. This served as the sampling frame for the residents of each institution.

Each randomly selected resident (approximately 25% from each housing unit) received a survey and a request for an interview (until 10% of each housing unit were interviewed). Participation was entirely voluntary, and participation was not incentivized. The sample for this thesis consists of residents who consented to both survey and interviews. In total, the sample for this thesis includes 99 male and 31 female residents. Additionally, 146 staff members responded to interview questions; however, this thesis only focuses on the residents' responses.

Researchers conducted interviews between September 2014 and April 2015 within the six institutions incorporated in this sample. Since confidentiality, safety, and security are paramount, the interviews took place in small offices, classrooms, or in meeting rooms in places where there was no risk of anyone overhearing the conversation. Interviews occurred at varying times of the day, Monday through Friday, to capture residents during different correctional staff work shifts. Interviews lasted 30 to 45 minutes and served as an extension of the survey questions. Questions were open-ended and interviewers encouraged participants to answer the questions as best as they could in their own words. Interviewers used a guided notetaking form with typed out keywords to ensure each interview covered the same focal areas during each interview. Interviews focused on several key topic areas including trust, relationships, policies and procedures, procedural justice, the prison environment overall, and any changes the residents would like to see. Wherever something was unclear, interviewers asked clarifying questions. Because of the informal, narrative structure of the interviews, it was possible the residents just talked about things on their mind for a while. Whenever that happened,

interviewers listened attentively and then redirected respondents by asking questions related to the interview protocol/foci.

The interview questions posed by the research team focused on a multitude of topics, including relationships, procedural justice, and organizational climate. From these three major topics, questions of policy and practices flowed organically. Questions of policy and practices included both implementation and changes, however, residents were allowed to speak freely on other aspects of policy and procedures if they wished. Doing this allowed for unanticipated discussion points that might otherwise be missed if interviewers stuck solely to question-answer format. These questions concerning policy and practices form the basis of this thesis.

Since, for various reasons, it is difficult to record interviews in prison, the interviewers received extensive training on detailed notetaking with emphasis on quotes and accuracy. During the interviews, interviewers took notes on a notepad. Immediately after the interview, interviewers went to a quiet space where they took meticulous care to transcribe and complete the notes as accurately as possible. The interviewers filled in any gaps in the notes from memory. The interviews are supplemented with fieldnotes, comprised of interviewers' observations of the prison environment collected via walking around and tours, as well as conversations with support staff, to understand as many aspects of prison life as possible. At the end of the day, interviewers transcribed these field- and interview notes into digital files where identifying information and interviews are separated to ensure complete anonymity.

After typing the interview notes and fieldnotes into a word processing program, interviewers link notes to Atlas.ti for data management. Atlas.ti is a data analysis and management program specifically designed for qualitative data. After linking the interviews, I got the hermeneutic unit (HU, Atlas' term for the full project file) with all the documents anonymized and ready for coding.

Data Analysis

I open coded the data initially to illuminate patterns in the data. This adheres to a semi-grounded theory approach, where patterns in the data emerged from the data itself. I consider this thesis semi-grounded because the interviews were guided by questions based on the survey rather than just being an entirely open interview without pre-conceived foci. However, this thesis also adheres to grounded theory, in the way that the coding sought out responses to conditions prone to change (Corbin & Strauss, 1990). I noted all patterns in a separate file to keep track of emergent themes. Coding was not limited to responses about things asked in the interview; anything discussed in the interviews was considered. The interview data showed a pattern in policy and procedure issues that was not limited to one gender or institution. Further coding and consideration showed potential for analyzing residents' responses to policy and procedure, mainly focused on perceived inconsistent policy adherence.

During the preliminary coding stage, the data suggested a common feeling of inconsistent policy adherence among the interviews. Residents regularly commented on submitting grievances without receiving a response, having to ask specific individuals (staff) for things because others deny them needed items, and feeling useless because

residents perceived nothing changes with regards to their grievances, issues, and other areas of concern. In reviewing prior literature on policy and procedure, it appeared little information exists on the policy adherence side. Strain theory and learned helplessness are suitable frameworks for responses to inconsistent policy adherence because they both focus on a reactionary relationship relatively common to people. A further search provided no prior literature on Merton's strain theory or learned helplessness in regard to policy and procedure in carceral environments.

Once perceived inconsistent policy adherence and residents' response to it emerged as a key theme within the data, I re-coded the interview data within these theoretical frameworks. This second round of coding focused on specific instances of perceived inconsistent policy adherence and residents' responses. I focused specifically on instances where residents mentioned inconsistent policy adherence, and on any description of how residents feel and/or respond in these situations.

The final sample consisted of 129 interviews, with 31 female and 98 male residents. I excluded one male resident's interview because the interview was tough to follow. For the sake of clarity and consistency I decided to exclude this particular resident. I also excluded the 146 staff members as they are not the focus of this research. While coding the interviews, I attempted to identify cases where residents discussed instances where they perceived inconsistent policy adherence or strain related to inconsistent policy adherence. Additionally, I coded instances where residents discussed actions regarding the rules, such as filing grievances, venting to other residents or staff,

or instances where they abstained from any action. In coding the interviews, I was interested in three main questions:

1. Do residents perceive a gap between policy and implementation?
2. Are residents strained by this perceived inconsistent policy adherence?
3. How do residents respond to this perceived inconsistent policy adherence?

My first round of coding attempted to identify all instances where a resident felt policy adherence was inconsistent. In analyzing the results, I separated out how often inconsistent policy adherence was mentioned to assess the weight, as well as how many different people mentioned inconsistent policy adherence to assess the spread. To be certain inconsistent policy adherence is a perceived problem, I identified contraindications in the data. I coded all instances where residents mentioned they considered policies to be adhered to very strictly and in a consistent manner.

To effectively and consistently code, it is important to have uniformity in coding. To ensure I coded similar patterns the same way, I created specific definitions of all theoretical codes. I listed these definitions in an Excel spreadsheet as a reference. See table 1 for the operationalization of my variables.

Table 1. Operationalization of Key Variables

Operationalization of Key Variables		
Variable	Definition	Example quote
Inconsistent Policy Adherence	COs creating own rules/enforcing rules differently on a daily basis; COs not sticking to rules as defined in residents' handbook; Different COs enforcing the same rule differently.	“Every staff member abides by different rules that they like to apply and they do not follow the written policy (only go by their own interpretation of the rules). They do not go by the book.”

Learned Helplessness	Resident does not fight inconsistent policy adherence because it is perceived as useless, after trying and failing before.	“You know staff will always say no to anything you ask, so just don’t even say anything to begin with.”
Tempered Conformity	Residents follow outlined procedures to get needs met, regardless of previous failure.	“Especially if you write a grievance, they don’t write you back. I keep all of these records in my cell too, like when I write to them and they don’t respond.”
Innovation	Residents employ rule-breaking/-bending behavior.	“There’s a request box and a mailbox. What I do is I put the requests in the mailbox and then the mailman will think by accident and forward it. That’s how I get my request answered. If I put my request in to the request box nobody ever gets back to me.”
Retreatism	Residents actively break rules to find relief on an individual level.	“The only way you can be heard/express yourself is to hurt somebody. When you hurt somebody, they (the administration) will ask you, “why did you do this?” and when you tell them why, they will listen.”
Ritualism	Residents do not attempt to change anything; abandon/adjust goals due to strain.	“It doesn’t matter if policies are fair or unfair. Inmates do not have the power to change any policies, so you should just go with it and not waste time by arguing about the policies.”

Rebellion	Residents actively break rules on an institutional-wide level.	“I was at [institution name] during that huge riot that was a long time ago.”
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The first round of coding separated learned helplessness and vicarious learned helplessness. However, because vicarious learned helplessness elicits an equally strong reaction as personal experiences (Seligman, 1972), I merged these two codes into one general *learned helplessness* code. Codes related to strain theory used the typology of *conformity, innovation, retreatism, ritualism, and rebellion* (Merton, 1938). Instead of conformity, I coded for tempered conformity because residents still try to get what is needed.

It is important to note that not all variations of the typologies of strain theory may be applicable, and that certain behaviors might be difficult to define. It is therefore of great concern that the codes are clearly defined. This guarantees consistency across interviews and makes sure I code everything the same way. This way any findings are drawn from consistent data coding/analysis.

FINDINGS

A primary finding of this work suggests most residents interviewed (71%) perceive regular and continual inconsistent policy adherence/implementation by staff. This gap between policy-on-the-books versus policy-in-action creates a fair amount of stress or strain for most residents with two particular types of strain occurring most often: the unfairness of inconsistency generally and the challenges with delivery in terms of timing. As a result of these strains, residents adapt to their environment by employing a variety of attitudinal and/or behavioral responses including learned helplessness, tempered conformity, innovation, ritualism, retreatism, or rebellion.

Inconsistent Policy Adherence

Policies in prison shape the daily experience of residents. Correctional staff are in charge of enforcing the rules in a consistent manner but may not always be able to do so. In total, residents discussed inconsistent policy adherence 133 separate times over 91 interviews. Inconsistent policy adherence is thus grounded, with approximately 71% of the residents identifying it as a problem. In a representative quote, one resident described the situation as, “The one thing that’s consistent is that there is no consistency.”

In contrast to the 91 residents identifying an issue with policy adherence, only ten quotations identified *consistent* policy adherence. In total, seven residents considered policy to be well-adhered to, making up approximately 5% of the sample. Residents

identified consistent policy adherence mainly by stating things like “All rules are enforced” or “I don’t think the staff inappropriately practices those policies.” This consistent policy adherence was sometimes caveated by residents stating they felt the policies were too restrictive, while at the same time making a personal revelation of being in prison and therefore having to handle the consequences of their actions. Considering the relatively low number of residents agreeing with the way policies are enforced versus the relatively high number of residents perceiving policy is inconsistently adhered to, it appears that residents perceive a gap between policy and implementation.

Strain

The analysis shows residents perceive inconsistent policy adherence on a regular basis, with feelings of strain as a result. Most expressions of strain paired with specific examples of cases where the resident personally experienced strain related to inconsistent policy adherence. Strain in these instances mostly related to feeling stressed because of a particular situation, or general feelings of exasperation because they felt a policy was defunct. One resident provided a particular example of when he personally experienced strain due to inconsistent policy adherence:

I was on the honors block (vet service unit) [two different prisons] and neither of them thought a promotional transfer would accommodate honors blocks. When I got here and asked my unit manager, I first wrote her a grievance asking about being transferred to the honors block. She never responded. When I ran into her I thought I would ask her to her face and get a straight answer and she told me I could go to the honors block. That was frustrating because they want you to use a

system and follow the policies (e.g. grievances), but they don't even use their own system or practice policies appropriately. I understand staff has a job to do, but they are not very efficient or effective.

This resident followed the policy by writing a grievance, but never received a resolution to the grievance. Only by directly approaching an individual he was able to receive an answer, which is not how things are supposed to operate. The quotation above perfectly reflects the feeling of inconsistency several other residents experienced as well. In total, a little over 50% of the residents discuss feeling strain related to inconsistent policy adherence. These feelings of strain occur on several levels, ranging from individual to facility-level. One resident notes, "It would be a relief for the policies to be more stable. Daily operations need to be improved – everything would be more efficient and you could accomplish more while in prison." Another resident states,

Yeah, you can submit grievances for policy issues but that process is useless.

Your grievance goes to the person you are grieving about for review. They don't have an impartial third party reviewing the issue. It goes to the staff member's peers. Obviously, they [the review board] aren't going to take your side.

These quotes reflect a deeper, underlying issue. Residents are trying, but not getting anywhere. Residents attempt to improve their situation and reduce their feelings of strain by following the proper procedures, but in doing so the feeling of strain intensifies because the process is part of the problem. Residents' efforts to follow policy prove mostly unsuccessful. Combining this with feeling a need to circumvent formal policies to see results warrants a deeper look at adaptive behavior.

During analysis, several themes emerged as the main sources of strain related to inconsistent policy adherence. The quotations classify into six different categories, with two categories standing out in proportional volume compared to the others. For a full overview of categories and their respective number of residents discussing them, see table 2². The most prominent categories are correctional enforcement and the institution running late, followed by problems with the grievance system, cancelling programs and activities, requests not being honored, and perceiving prejudiced treatment with rather limited discussion from residents.

² One resident had no age or race information available. Percentages are rounded off as percentages of n . The n equals the number of residents who complained about the particular category. These categories are not mutually exclusive; one resident can fit in multiple categories.

Table 2. Inconsistent Policy Adherence Categories

	Inconsistent Policy Adherence Categories					
	CO Enforcement <i>n=63</i> 48%	Late <i>n=19</i> 14%	Grievance <i>n=8</i> 6%	Cancelled Events <i>n=6</i> 5%	Requests <i>n=4</i> 3%	Prejudiced Treatment <i>n=3</i> 3%
Age						
21-30	21%	32%	25%	33%	25%	33%
31-40	27%	21%	25%	13%	50%	33%
41-50	30%	26%	13%	33%	N/A	33%
51-60	17%	16%	38%	13%	25%	N/A
61-70	5%	5%	N/A	N/A	N/A	N/A
Sex						
Female	27%	5%	N/A	N/A	25%	33%
Male	73%	95%	100%	100%	75%	67%
Race						
Asian	2%	N/A	N/A	N/A	N/A	N/A
Black	49%	58%	75%	33%	50%	100%
Hispanic	8%	16%	N/A	13%	N/A	N/A
White	41%	26%	25%	50%	50%	N/A
Location						
CBS	16%	5%	N/A	N/A	25%	33%
COA	11%	26%	13%	33%	25%	33%
GRN	25%	11%	50%	13%	50%	N/A
MAH	30%	53%	25%	50%	N/A	N/A
MUN	11%	N/A	N/A	N/A	N/A	N/A
SMI	6%	5%	13%	N/A	N/A	33%

Table 2 highlights an equal distribution in the category CO Enforcement with the highest volume of complaints. The findings spread fairly consistently across different resident demographics; the main differences occur across racial and gender lines. However, the sample consisted of 76% males and 24% females. The proportion of residents for CO enforcement (f: 27%, m: 73%) and problems with requests (f: 25%, m:

75%) holds up perfectly for this. Perceptions of prejudiced treatment (f: 33%, m: 67%) is close to these parameters. Problems with the facility running late (f: 5%, m: 95%), problems with the grievance system and with events being cancelled deviate from these parameters (f: 0%, m: 100%). Particularly for the last two, the *n* is comparatively small, which might account for the deviation. Combining all the complaints together, 20 out of 103 categorized complaints come from women, making up a little under 20% of the complaints. Because the proportion holds up overall, there is no real difference across gender lines. The same goes for the difference across race, where 50% of the sample is black and 39% of the sample is white, with the vast minority consisting of Asian or Hispanic racial groups. In the individual categories, CO enforcement (b: 49%, w: 41%, o: 10%) holds entirely true to this distribution. Complaints about the facility running late (b: 58%, w: 26%, o: 16%) runs close to this. Grievances (b: 75%, w: 25%), cancelled events (b: 33%, w: 50%, o: 13%), requests (b: 50%, w: 50%), and prejudiced treatment (b: 100%) deviate most from this distribution, but all have a low individual *n*. The low volume of these individual categories might account for these differences. Combining all complaints together, 53% of the categorized complaints come from black residents, 37% come from white residents, with 10% coming from other races. This distribution also does not convince me of a real difference across race lines; the distribution of complaints overall holds up to the distribution of the sample.

Overall, CO enforcements are the biggest category of complaints, where residents explain COs do not follow policy as its written, enforce rules seemingly arbitrarily, and certain rules that are enforced conflict with broader PA-DOC rules. Forty-

eight percent of residents mention CO enforcement is a big part of inconsistent policy adherence. Residents suggest staff members could be fair one day and unfair the next day, so residents never know what is coming. Interestingly, one resident denotes that it is better for COs to be consistently bad, because then at least there is consistency. This brought up an interesting insight, where residents prefer conditions that are less than desirable while maintaining consistency over situations where individuals do not know what might happen on a daily basis. Uncertainty as a stressor has been discussed in psychological research before. The vast majority of this research is in relation to mental illness, physical illness, and family life. However, uncertainty as a stressor seems to fit fairly well in carceral institutions; particularly when it concerns inconsistent policy adherence.

The second highest factor residents observe as inconsistent policy adherence is the timing of their respective institutions. Lower than the mentions of CO enforcement, but still relatively important, approximately 14% of the residents claim a major source of strain is that the count, activities, and other line movement runs late a lot. According to residents, this often leads to cutting yard time or education, leaving residents to spend more time in their cells feeling unproductive. While things running late can be a major source of stress on its own, certain residents feel it is an extra source of punishment adding more frustration. Closely related to the institution running things late is the mention that things are often cancelled. This seems to be a direct result of the prison running things late, as established by this resident, “It is frustrating that education classes

are often cancelled because block count is called late. It is very rare that you will have a week where all of your classes are actually held.”

Aside from problems with CO enforcement and the timing of the institution, other sources of strain related to inconsistent policy adherence are difficulties with the grievance and request systems. Issues with the grievance system creates a source of strain because residents are meant to bring their problem to officers’ attention through grievances. Residents’ hesitance to file grievances may be understood through statements such as, “You only really write grievances if you feel like putting a target on yourself” and “Any grievance you file is ignored and denied.” In terms of requests, residents complain that sometimes it is not possible to get the request procedures started. A resident explains:

There are procedures in place for when you need to make a request for something. I think that makes sense. I respect that. The beginning of the procedure is that you need to contact the staff in your unit first by placing a request at the desk, but you better hope your CO is in the mood to listen to your request. You’ll get ‘why you bothering me, come back later.’ So, you come back later and ask him again to start the request process. Then they get even madder that you’re nagging them. I’m just following the procedure and you can’t go around them because the request starts with them.

Another resident continues this train of thought by saying that even if a request gets filled out, it still depends on circumstances if the request gets fulfilled. “You fill out a request to go and when you get there, you’re supposed to get your name on the list for the next

week. But that's really hit or miss." This relates closely to the issue at hand, since accepted methods of finding relief from strain are unavailable. Grievances and requests do not yield results. Aside from these specific instances of inconsistent policy adherence causing strain, residents spoke about associated strains in more general terms.

It could be difficult to understand the strain associated with inconsistent policy adherence. However, the difficulty experienced by the residents to get what they need reveals the magnitude of strain a perhaps inconspicuous thing such as inconsistent policy adherence can carry. Living every day reliant on rules and procedures to break up the monotony of the day means that anything unexpected there turns an already difficult situation into something so much more unbearable. The general consensus among residents suggests they understand policies and procedures are there for a reason. Policies keep residents and staff safe, among other things. However, if COs do not adhere to these policies/procedures, there is a question regarding the fairness of in-adherence leaving residents wondering: why should they follow policies/procedures if staff do not? Or, even more importantly, what do residents do to get what they need, if the policies and procedures do not provide?

Behavioral Adaptations

My final research question concerns residents' responses to inconsistent policy adherence and the strain associated with this. The actions and attitudes aimed at relieving strain were classified as either learned helplessness, tempered conformity, innovation, ritualism, retreatism, or rebellion. While the same quotation could not be classified as a different type, one interview could contain multiple different adaptations. In total, 75

residents employed some form of behavioral adaptation to cope with the strain. In other words, 58% of the residents who participated in the interview modified their behavior to either get what they needed or abandoned their goals entirely. Of these residents, 14 were female and 61 were male. See table 3 for the entire breakdown of behavioral adaptations³.

Table 3. Behavioral Adaptations to Strain

	Behavioral Adaptations to Strain					
	Learned Helplessness <i>n</i> =30 23%	Tempered Conformity <i>n</i> =28 22%	Ritualism <i>n</i> =13 10%	Retreatism <i>n</i> =13 10%	Innovation <i>n</i> =12 9%	Rebellion <i>n</i> =1 1%
Age						
21-30	23%	29%	15%	23%	17%	N/A
31-40	23%	25%	38%	38%	33%	100%
41-50	37%	21%	15%	31%	25%	N/A
51-60	17%	18%	15%	8%	25%	N/A
61-70	N/A	4%	15%	N/A	N/A	N/A
Sex						
Female	7%	14%	23%	23%	25%	N/A
Male	93%	86%	77%	77%	75%	100%
Race						
Asian	N/A	N/A	N/A	N/A	N/A	N/A
Black	67%	43%	46%	54%	58%	N/A
Hispanic	7%	7%	8%	8%	8%	N/A
White	27%	46%	46%	38%	33%	100%
Facility						
CBS	3%	7%	8%	15%	17%	N/A
COA	13%	29%	N/A	23%	17%	N/A
GRN	33%	29%	23%	23%	25%	N/A
MAH	33%	29%	46%	23%	33%	100%
MUN	3%	7%	15%	8%	8%	N/A
SMI	13%	N/A	8%	8%	N/A	N/A

³ One resident had no age or race information available. Percentages are rounded off as percentages of *n*. The *n* equals the number of residents who exhibited behavior in line with the definition for these adaptations. These categories are not mutually exclusive; one resident can fit in multiple adaptations.

In total, 30 residents mentioned adaptations most identifiable with learned helplessness, comprising about 23% of the mentioned adaptations. Of these 30 residents, two were female and 28 were male. Learned helplessness manifested itself in ways as residents stating, “I do not really try to explain myself because I know I will not be listened to and guards will always expect the worst from me.” Feelings of learned helplessness relate to realms of attempting to defend oneself against accusations, attempting to get requests filled (i.e., for commissary and medical), and fighting misconducts. An example of a resident experiencing learned helplessness relates to receiving misconducts. One resident, in particular, discusses rather receiving a misconduct, because fighting with staff over it does not make a difference. It is pointless to fight misconducts because “I’m never going to win.” In other words, the resident states it is better to just get the misconduct and deal with it than to mention the injustice of receiving the misconduct because it will not do any good.

The resident response most closely related to learned helplessness is the type explained as ritualism. Approximately 10% of the residents adapted through ritualism; not necessarily agreeing with the way things are but adhering to it. In one representative quote, a resident notes, “I don’t like most of the way they run it, but I live by it.” This seems a defining trend in the ritualism adaptations. Unwillingness to find alternative methods of relief might be intrinsically or extrinsically motivated, but regardless of where the unwillingness comes from, it all seems related to strain.

Continuing the line of Merton’s typology structure (1938), tempered conformity considers instances where residents attempt to get relief from strain through traditional

methods such as filing grievances, or non-rule breaking/bending methods such as venting to fellow residents or support staff. In total, approximately 22% of the residents exhibit some sort of behavior defined as tempered conformity. Out of all adaptations, tempered conformity has a slightly more occurrence rate.

Where tempered conformity might not be sufficient anymore, residents potentially exhibit rule-breaking or rule-bending behavior. In this case, it is possible for residents to avoid misconducts or weigh the risks against the benefits to decide whether or not the strain is great enough for innovative behaviors. With 12 residents mentioning innovative behavior, it makes up for 9% of the interviews. Innovative residents do break the rules, but in such a manner that is easily explained or excused in order to reach their goals. For one resident, education is highly important:

I have gotten accustomed to just breaking the rules. I leave my cell when they call for the workers to leave even though I'm not working so that I can get over to my class early. If the class doesn't start on time, which is likely because most people leave when education is called--which is last, I just sit and read or talk to my teacher.

In this case the resident moves when he is not supposed to, but utilizes a loophole to get relief from the strain of not getting the full class-time. The resident, therefore, is not disruptive, but still bends the rules to his favor.

When simply bending the rules in an inconspicuous manner is insufficient, full-on rule-breaking behavior classified as retreatism is the next option. Slightly more individuals report rule-breaking behavior to escape the strain, with 10% of the cases

adopting this method. Retreatism can manifest itself in various ways, such as yelling at guards to get what the resident needs. In more extreme forms, it can result in physical violence, as one resident states, “There’s a lot of violence taken against staff here by inmates.” Violence can also occur between residents, with one resident stating, “There is too much testosterone on the blocks and when classes and activities are cancelled, the tension of the block builds up and fights constantly break out.”

When physical violence escalates, it becomes rebellion. Rebellion was coded as the maximum effort to get what is needed, rallying other residents into the effort. In this instance, only one resident made any mention of anything resembling rebellion. This resident mentions an instance where the strain in an institution was so great, the residents rallied together to stage a riot. Instances where the strain gets to that magnitude might not occur as frequently but are certainly indicative of a bigger issue.

In the findings presented here, 75 residents (58%) explicitly discuss behavioral adaptations to handle the strain. Of these 75 residents, 54 (72%) chose at least one of the strain typology adaptations, while 21 residents adapted through just learned helplessness (28%). Because adaptations according to Merton are situation-specific, it is entirely possible one individual exhibited more than one behavioral adaptation (1938). In fact, 19 individuals, making up 25% of the people who adapted their behavior combined at least 2 different adaptational methods. These combinations comprise of any of the strain adaptations and learned helplessness.

DISCUSSION

This project examines carceral residents' strain experiences resulting from inconsistent policy adherence, and their subsequent adopt rule-breaking or rule-bending behaviors to find relief from strain. Prior literature establishes that inconsistent policy adherence is a challenge facing many organizations and carceral environments are no different (Baier et al., 1986; Feldman, 1992; Reiter & Chestnut, 2018; Rudes, 2012; Tyler, 2010).

The findings suggest that approximately 71% of carceral residents from this data perceive inconsistent policy adherence, while only 5% of the residents agree with the manner policy is enforced. Additionally, the study finds residents employ learned helplessness and strain adaptations as methods of coping with perceived inconsistent policy adherence. The main areas of concern for residents are the way COs enforce the policies. One primary source of strain emerges from residents feeling the facility is constantly running late. This leads to frequent cancellation of programs and classes. The formal, procedural outlet (the institutional grievance process) provided to residents to deal with the strain of inconsistent policy adherence also receives many complaints and is itself a source of strain. Residents denote frustration when trying to file grievances and discuss requests and complaints going unanswered.

Since inconsistent policy adherence strains residents and the formal, institutional avenues of coping yields limited/no results, residents sometimes employ other methods of reducing/eliminating strain and getting their needs met. This primarily includes either abandoning their goals entirely, so the strain is relieved, or finding an alternative avenue in the form of rule-bending or rule-breaking behavior. The findings show that 58% of the residents employ a behavioral adaptation, with the distribution proportionate to the sample. To cope with strain, residents generally adopt a level of learned helplessness, find non-rule-bending or rule-breaking ways to cope, or attempt to bend the rules to their favor.

Theoretical and Conceptual Implications

The findings provided valuable insights in sometimes unexpected directions. One interesting consideration is that many residents prefer a consistently bad CO over an inconsistent CO. This suggests residents prefer to know what to expect. Psychological research previously considered the effects of uncertainty on individuals. Particularly fitting is research by Hirsh, Mar, and Peterson (2012). Hirsh et al. (2012) proposed an entropy model of uncertainty, where a similar model to entropy from information systems is adapted in ways that are relevant to humans. Entropy, in simplified form, is uncertainty associated with a certain variable (Hirsh et al., 2012). High levels of entropy affect interacting parts of a mechanism – in this case a human mechanism – where the amount of uncertainty poses a challenge to adaptation. The entropy model of uncertainty affects an individual's perception of their ability to successfully perform and achieve goals (2012). In other words, overloading the mind with uncertainty shifts residents'

perceptions of how to successfully relieve strain and get their needs met. This then ameliorates the effects of inconsistent policy adherence by not only forcing residents to adapt to particular situations, but also needing to adjust expectations and behaviors while searching out clues for what may be coming next. Residents might then perceive more inconsistent policy adherence than is actually the case.

Prior research on organizational processes suggests a disparity between policy-as-written and policy-as-performed (Baier et al., 1986; Reiter & Chestnut, 2018). These differences in policy implementation have unexpected consequences and bigger repercussions than expected; particularly in an environment as strictly governed by policies and procedures as a prison (Tyler, 2010). Residents are dependent on prison policies for their daily functioning. Inconsistent adherence, or even simply the *perception* of inconsistent adherence, to these policies leads to strain with a possible extreme level of learned helplessness. This project does not dispute prior findings in organizational research discussing inconsistency between policy and implementation (Baier et al., 1986; Reiter & Chestnut, 2018; Rudes, 2012). The findings point out that residents perceive a great deal of inconsistent policy adherence. The residents confirm this perception even more when considering how few residents agree with the way policy is adhered to. With the many opportunities for discretion COs have, these perceptions are unsurprising (Feldman, 1992)

Merton's anomie and strain theory (1938) provides an opportunity to explain incarcerated individuals' responses to the strain of inconsistent policy adherence. Additionally, extreme variations of strain adaptations lead to learned helplessness (Maier

& Seligman, 1976). The findings suggest no difference in adaptation across age, race, gender, or institution that exceeds the expected differences based on sample composition. Instead, the variation is found between adaptations, where learned helplessness and tempered conformity (adhering to the rules and accepting how things are run, while finding relief from strain through passive methods, e.g. venting to cellies, bringing problems to unit managers' attention, etc.). occur nearly twice as often as other adaptations. These findings suggest that residents do initially try to get their needs met through alternative methods, and subsequently fail to do so. This explains the high volume of learned helplessness. Comparing this to ritualism, which is where residents simply abide by the rules because the strain is too great, shows that residents try before giving up completely, rather than simply giving up right away. Residents who showed ritualist behavior stated policies were implemented inconsistently but conformed anyway.

Contrary to expectations, innovative behavior was not as prevalent compared to other adaptive behaviors. Responses to strain are dependent on the limitations imposed by institutional norms and society's standards. Because prison norms are very restrictive by design, it seemed logical that residents would have to get more creative in their adaptations. While the volume might not match up with expectations, the types of innovative behavior certainly do. The residents who did show innovative behavior were very creative in their adaptations. Adaptations were reminiscent of Terry's research on humor in prison (Terry, 1997), where residents cope through the use of humor. In Terry's research, residents were able to show vulnerability, uncertainty, and fear through humor; a coping mechanism in line with innovative behavior. While the findings in this thesis do

not show an abundance of innovative behaviors in coping with inconsistent policy adherence, the findings are indicative of innovative behavior such as using humor being present. One major indication of this is that the innovative behaviors discussed are mainly rule-bending rather than rule-breaking. The residents do still break the rules, but in such a manner that could be explained as a mistake on their part or breaks the rules in a minor way. It is possible that the number of residents showing innovative behavior is low because the questions asked were not geared towards this. Future research will have to determine if this is the case. The amount of people exhibiting learned helplessness behavior however suggests that more residents exhibited adjustment behavior such as innovation before resorting to learned helplessness.

The difference between learned helplessness and the strain typology as adaptations is highly important. As evidenced by the finding that residents sometimes employ different behavioral adaptations for different situations, the five modes of adaptation proposed by Merton are situation-specific and not necessarily internalized (1938). Residents sometimes employ more than one adaptation for different complaints. It is important to note that strain adaptations showed to be situation-specific because this shows the ability to move away from these adaptations once the strain is gone. However, learned helplessness does not necessarily change. Learned helplessness is described as transferable. Maier and Seligman (1976) showed that learned helplessness continues in different adverse situations, beyond the initial event that triggered learned helplessness. This means there is chance that the 21 residents who adapted through learned helplessness learned to associate adverse situations with any action being futile. This can

then have serious implications for their lives beyond incarceration, since any adversity in life tasks (i.e. finding a job) can be taken in a similar manner. It would then be a lot more difficult to break the offending cycle and achieve the goal of rehabilitation and reintegration.

Policy Implications

The relative high volume of learned helplessness has important policy implications because individuals who have learned that their attempts to get out of an adverse situation are useless are essentially stuck in a loop of unfortunate circumstances. The cognitive deficit of reduced motivation combined with the reduced learning ability in people who experience learned helplessness (Maier & Seligman, 1976) potentially interferes with the ability to break the offending cycle both inside carceral institutions and perhaps upon release. Since one of the goals of the correctional system is rehabilitation (Kifer et al., 2003) this finding shows the functioning of carceral institutions might directly work against accomplishing this goal. One policy recommendation then is to restructure the grievance and request systems, so residents do not fall within the learned helplessness spectrum. One common complaint regarding grievances and requests was that many of them go unanswered. Considering staff probably have a high volume of grievances and requests to handle, this is understandable. However, streamlining this process could help avoid long-term consequences that conflict with the goals of the correctional system and reduce the staff workload since issues could potentially get reasonably resolved. If anything, guaranteeing a response to

grievances and requests can make residents feel heard, reducing the strain of the situation.

One way the process of grievances and requests could be streamlined is through expanding the use of peer mentors. Since one of the major complaints is that grievances and requests disappear and are never heard from again, expanding the amount of people that can communicate the actual problems to COs and other staff. Peer interventions and peer support has been increasingly prevalent in carceral institutions, with the majority of peer support occurring in mental health, education, and mentoring (South, Bagnall & Woodall, 2017). Peer support has many different variations and implementations (2017), which means there is space to adjust the type of support offered. Since correctional environments are considered difficult to staff, there simply is not room to allow complete focus on resident grievances and requests, meaning these can go unattended (Cook, McClure, Koutsenok & Lord, 2008). Peer counseling is an effective method for substance abuse treatment (Cook et al., 2008), and shows promise for other areas such as self-injury (Griffiths & Bailey, 2015). Implementing peer support workers who can collect grievances and requests, compile them, and relay them to the people who can deal them can at the very least improve the lines of communication and make residents feel heard. The same could work in reverse, where staff members can relay responses to the resident working the grievance system, who can then pass on the message to other residents. Since it is likely grievances and requests surround similar topics, it saves the staff member in charge of handling grievances time of sorting through them all and allows the staff member to get it taken care of best as possible.

Limitations

While the findings are informative in terms of adaptive behavior, the data has some limitations. The data provided information on behavioral adaptations but is lacking in specific detail. The interview questions were not specifically geared towards discovering behavioral adaptations to strain because of inconsistent policy adherence. This has the consequence that individuals might exhibit more or different behavioral adaptations than discovered in these interviews. The second limitation is in the number of male residents and the number of female residents. While the distribution of residents is in line with the general demographics of residents in prison (BOP Statistics, n.d.), a cross-demographic comparison is not possible given the few women in the sample.

An additional limitation is that the data comes from six of over 25 correctional institutions within one state's correctional system. While the demographics in this sample are fairly representative of the general prison population in Pennsylvania, it does not reflect the entire United States' prison population. To generalize these findings to more of the United States, I would have to collect more data from other institutions. To achieve even higher external validity, I would like to include jail population as well. A little over 745,000 residents were confined to jails rather than prisons at the end of 2017, which means that this thesis is not representative of about one third of the entire US incarcerated population.

Recommendations for Future Research

Future research should consider asking carceral residents direct questions about policy inconsistency and ways the residents deal with this challenge. Researchers need

narratives/stories about residents' experiences with trying to follow institutional rules and the results they experienced via the grievance process. Specific emphasis on what residents do to get what they need and/or if/how they develop new, recrafted goals or abandon prior goals is necessary. Based on the findings with non-guided questions on this topic, the application of strain theory and the theory of learned helplessness is highly relevant in carceral institutions. Future researchers can expand upon behavioral adjustment research in prison, beyond the outright studying of prison violence as prior work has often done. Strain adaptations are nuanced. Researchers should reflect these nuances just as accurately as they do attention-seeking behavior.

Researchers also need greater understanding of which situations warrant a particular type of behavioral adaptation. As pointed out earlier, behavioral adaptations are situation specific. Aligned with that, researchers must examine whether residents adapt their behavior through trial and error, and cycle through adaptations to get what they need. It is possible residents attempt different adaptations when dealing with inconsistent policy adherence, and if nothing works, they resort to learned helplessness behavior, which suggests the residents feel any change is out of their control. According to Maier & Seligman (1976), uncontrollable situations have a tremendously bigger cognitive effects than controllable ones. This means that strains of inconsistent policy adherence have a bigger effect on residents' adaptational behavior than inconsistent policy adherence in a different situation might have. If future research can indicate which part of inconsistent policy adherence causes the most strain—strain that residents cannot adapt to—that is a starting point for recommendations that can have widespread, real-life consequences.

Finally, additional data would help answer the uncertainty question. Residents regularly suggest that uncertainty about what to expect on a given day is worse than bad policies or unfair COs. Research does not yet understand how this leads to or contributes to learned helplessness in penal institutions.

CONCLUSION

Based on these findings, perceived inconsistent policy adherence is a legitimate problem in prison that highly affects residents' behavior. The high volume of resident mentioned disparities between how policies are explained and written versus how they are enforced highlights how residents believe they are negatively affected. This creates strain for residents, which makes an already highly unpredictable environment even more stressful, without much/any chance of relief. It is only natural that individuals in this situation have to adapt their behaviors as a pathway toward coping. The findings outlined above aid in understanding certain adaptational behaviors and serve as a starting point for further exploration of how residents adapt to policy-related strains in prison. Learned helplessness as an adaptational method provides the largest potential problem for future functioning of a resident. Finding ways to keep residents from getting discouraged to try and ameliorate their situation and accomplish what they want to accomplish is perhaps the first step towards a successful post-release life.

Prior application of strain theory in prison research provides a solid background for the application of the strain typology in this project. Prior work on strain theory mainly applies to explaining prison violence, but is limited to general strain theory, and is dated (Agnew, 1992; Blevins, Listwan, Cullen, & Jonson, 2010; Morris, Carriaga, Diamond, N. Piquero, & A. Piquero, 2012). Moving away from prison violence and

applying strain theory to what might be the root of the overarching problems in prisons illuminates where to start in ameliorating detrimental prison conditions. On the other hand, researchers apply learned helplessness in a wide variety of settings, however, not as broadly in prison settings (Goodstein et al., 1984; Schill & Marcus, 1998). This thesis combines both theoretical frameworks to explain residents' behavioral adaptations to strain related to inconsistent policy adherence. Since the consequences of residents' adaptations are disruptive to the daily prison operations and have long-lasting consequences for residents and staff, it is imperative research is directed at what happens within penal institutions. These findings highlight valuable focus points for continuing this research.

Further exploration of resident adaptations to inconsistent policy adherence will provide better insights to inform both theoretical development/expansion and policy/practice. In finding out what residents do to make life bearable it is possible future research and policy can be directed at finding a solution to or moderator of these strains. It is in the best interest of correctional systems, prison administrators, and employees as well as residents to ensure smooth prison operations. Broader insights into residents' behavioral adaptations might go a long way into accomplishing this.

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BIOGRAPHY

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