

PRINCIPLE-BASED CORRECTIONAL COUNSELING: TEACHING HEALTH VERSUS TREATING ILLNESS

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Principle-based correctional counseling (PBCC) is based on the assumption that all offenders have innate mental health. Thus, the primary goal of PBCC is to teach offenders how to rekindle and experience their natural capacity for psychological well-being. PBCC accomplishes this by teaching offenders: (a) how the principles of Mind, Thought, and Consciousness create their experience from the inside-out, and (b) how to use their thinking agency in accord with its natural design. According to PBCC, as offenders understand these principles and realize how to use thought in their best interest, their overall psychological functioning improves. This paper describes the principles and assumptions behind PBCC and compares this paradigm to other contemporary correctional counseling models on several key dimensions. Finally, it summarizes research findings supporting the effectiveness of PBCC-based interventions with adolescent and adult offenders.

Since the late 1970s, a completely different paradigm for understanding and addressing delinquency and criminality has been quietly spreading through the helping professions. Commonly known as Mind, Thought, Consciousness/Innate Health, this model emerged from the insights of Sidney Banks (1983; 1989; 1998; 2001), who realized that a deeper understanding of deviant behavior could be achieved by looking beyond the realm of form in which psychology had typically restricted its domain of inquiry. Banks asserted that there were principles operating to create form, and offered the time-honored concepts of Mind, Thought, and Consciousness to describe these processes. The initial research on these principles was carried out at the University of Oregon by psychologists, Roger Mills and George Pransky, through a five-year (1974-1979) NIMH-sponsored

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grant. This research ultimately led to a unique psycho-educational approach to prevention and treatment based on the assumptions that: (a) offenders have within them an innate well-spring of mental health from which to draw which contains a set of inter-related attributes including peace of mind, well-being, self-motivation, self-efficacy, wisdom, and common sense; and (b) offenders can realize, activate, and live from this healthy, wise, balanced state of mind regardless of past circumstances, present stressors, and external events encountered over time. Subsequently, these principles have been applied to criminological theory (Kelley, 1990, 1993a, 1993b, 1996), crime and delinquency prevention (Kelley, 2003a, 2003b; Kelley, Mills, & Shuford, 2005; Kelley & Stack, 2000; Mills, Dunham, & Alpert, 1988), and community revitalization (Mills, 1992; Mills & Spittle, 1998; J. Pransky, 1998).

This paper is the first to use these principles to formulate a unique approach to offender rehabilitation called principle-based correctional counseling (PBCC). It first describes the principles and major assumptions behind PBCC. It then compares PBCC to other contemporary correctional counseling models on several key dimensions. Finally, it summarizes the results of several applied research studies which support PBCC's major assumptions and the effectiveness of PBCC-based interventions in a variety of community-based settings.

THE PRINCIPLES AND ASSUMPTIONS BEHIND PBCC

PBCC assumes that all forms of deviant behavior, as well as all behavior change, can be explained by the interplay of three principles. These principles, or fundamental truths, are Mind, Thought, and Consciousness. PBCC asserts that these principles are continually working together to create the mental-emotional life experience of all offenders.

PBCC defines the principle of Universal Mind as the formless, infinite energy of all things. Mind is the intelligent force that powers up human mental functioning. Mind refers to the formless energy that constantly flows through all human beings, a field of

energy of which we are all a part and utilize continually. Every culture and religion has a name for this universal intelligence such as Divine Ground, Mastermind, Source, Great Spirit, Creator, Absolute, and God. Today, most physicists agree that a field of formless energy exists throughout the universe (e.g., Taubes, 1999; Miller and Thorenson, 2003). Banks (2001) described the principle of Mind as follows:

The Universal Mind, or the impersonal mind, is constant and unchangeable. The personal mind is in a perpetual state of change. All humans have the inner ability to synchronize their personal mind with impersonal mind to bring harmony into their lives...Universal Mind and personal mind are not two minds thinking differently, but two ways of using the same Mind. (pp. 31-34)

The principle of Thought describes the capacity of the personal mind to use the energy of Universal Mind to form an infinitely variable personal reality to express unique life. Put another way, the principle of Thought is the human power or ability to create; the mental imaging ability of human beings; the on-going creation of all experience via mental activity. The principle of Consciousness describes the human capacity to be aware of the reality being created by thought. It is the neutral energy of Mind that allows people to be aware, to be cognizant of the moment in a sensitive and knowing way. Put another way, Consciousness transforms Thought, or mental activity, into subjective experience through the physical senses. Thus, as an offender's thinking agency generates mental images, these images appear real to him or her as they merge with the faculty of Consciousness and register as sensory experience. Thus, Consciousness is the on-going sensory experience of Thought as an offender's personal reality.

The logic of the three principles behind PBCC suggests that every offender's experience is produced by the continuous Mind-powered combustion of Thought and Consciousness, and is the only experience of which offenders are capable. Thus, the mental life of every offender is the moment-to-moment product of their thinking transformed into their experience by their faculty of consciousness.

Finally, the behavior of every offender (deviant to conforming) unfolds in precise synchronization with their continually changing personal reality produced by the three principles. According to Sedgeman (2005):

These three principles combined refer to a universal dynamic of creation that is constant. Each offender's moment-to-moment thinking is variable, representing the boundless array of potential forms energy can take. The essential meaning of the principles is that thoughts are no different from any other "forms" of life, always in motion, ever-changing through an infinitude of possibilities, originating from the one formless, energy source. (p. 49)

INNATE MENTAL HEALTH

PBCC further assumes that all offenders possess the innate capacity for psychological well-being, which occurs when their personal mind is aligned with Mind. Put another way, PBCC asserts that at birth, an offender's personal mind is typically aligned with Mind and automatically receives a natural flow of intelligent, responsive thought. Subsequently, whenever an offender's personal mind quiets or clears, it automatically realigns with Mind and accesses this same effortless, intelligent thought process. PBCC proposes that this generic, responsive free-flowing thought process is the source of the experience of psychological well-being.

According to PBCC, regardless of their current circumstances, mental status or prior socialization, all offenders have the same built-in predisposition for psychological well-being and will exhibit its attributes to the degree that their minds are quiet or clear, which allows the generic, free-flowing thought process to surface. In the words of Mustakova-Possardt (2002):

Mental health is the innate capacity of every offender to return into alignment with Mind from a clear mind, and manifest fresh understanding and creative responsiveness in the moment. Principle-based correctional counseling proposes that mental health is an innate "intrinsic, natural state of well-being or wisdom arising from pure conscious-

ness and accessed via a clear mind, or from realizing the infinite capacity for formless creation of new experience via thought” (J. Pransky, 2000). In every moment, when individual mind is spontaneously or intentionally aligned with Mind, and focused away from its intensely personal memory-based world, innate mental health bubbles up, and is characterized by a natural and effortless flow of thought...as the experience of peace, contentment, larger perspective on immediate reality, detachment and a general generous, loving, and deeply moral view of life. (p. 11)

PBCC proposes that the innate design for every offender is to live typically in the experience of psychological health produced by natural thinking. Most offenders, however, not only under-utilize the generic thinking process—most don’t realize that it exists. What most offenders view as the prominent, if not exclusive thought process, is learned, deliberate, personal thinking (e.g., analyzing, processing, theorizing). According to PBCC, all deviant behavior stems from offenders’ ignorance of how their thinking agency was designed to be used. Criminality of all types is viewed by PBCC as one way that offenders cope with the distorted perceptions and insecure feelings they experience when: (a) they drift away from the innate, healthy thought process, and (b) don’t recognize that the misuse of thought is creating this unsettling experience. Mental health is seen as returning to natural thinking and regaining their emotional bearing. The severity and frequency of mental dysfunction and subsequent criminality is determined by: (a) how far and how often an offender moves away from his or her innate, healthy thought process, and (b) an offender’s level of understanding how thought works to create his or her reality. According to Sedgeman (2005):

Much correctional counseling focuses on the specific content of an offender’s thinking as though it were absolute, with no acknowledgement of the subtle variations in thinking that arise from an ever-changing state of mind or feeling state. Once the process of thinking is realized, once offenders understand how their thinking works to create reality and how powerful the transitory and illusory images of thinking appear to be, they are set free from living at the mercy of the thoughts they

think. They can see that the experience of stress and distress is merely their own thought-consciousness manifesting negative, worrisome, distressing experience, and that those thoughts have no life beyond the moment they are created and used in their minds. They see the illusory, kaleidoscopic nature of all formed thoughts. (p. 49)

In sum, according to the three principles behind PBCC, every offender's experience is created by thought enlivened by consciousness. Consciousness is a constant, bringing to life every thought that enters a offender's mind. Thus, the only variable in this paradigm is thought. *That* offenders think is not a variable because all human beings think continually. *What* offenders think, however, and *how they use their thinking agency* **are** variables ultimately under their control. Therefore, according to PBCC, the only leveraged entry point into improving offenders' psychological functioning and ultimately reducing recidivism, is to facilitate a shift in the way they relate to and use their ability to think.

Thus, principle-based correctional counselors attempt to teach offenders to look **before** thought content to the manner in which they create and then experience the products of their thinking (e.g., moods, feelings, perceptions, etc.) from the inside-out. They strive to produce lasting change by teaching offenders how to better use and relate to their thinking ability by helping them realize its natural design.

It should be emphasized that principle-based correctional counselors do not try to talk clients out of negative thoughts, ask them to replace them with more positive or rational thoughts, or emphasize thought stopping, mindfulness, or meditative techniques. Principle-based correctional counselors help offenders realize the fundamental and powerful principles that are continually at work creating their experience from the inside-out. Rather than substituting functional for dysfunctional self-cognition, in this inside-out paradigm, *the fact of Thought* is explored as a deeper independent variable. PBCC asserts that once the innate design behind human thinking is grasped by offenders, the quality of their thinking will automatically improve. As this understanding deepens, offenders

will be empowered to avoid deviant reactions to difficult circumstances, low moods, and painful feelings; to demonstrate resiliency during difficult times; and to expand the time they spend experiencing mental well-being.

PBCC VERSUS OTHER CORRECTIONAL COUNSELING METHODS

PBCC can be distinguished from other contemporary correctional therapies (e.g., humanistic, cognitive-behavioral, social-learning) in the following key areas: understanding versus awareness; memory recognition versus memory work; understanding emotions versus dealing with them; permanent change versus temporary relief; and teaching health versus treating illness. In each area, the primary difference has to do with the focus of counseling. PBCC focuses on helping offenders understand how the principles of Mind, Consciousness, and Thought combine to create their experience from the inside-out. Other contemporary correctional therapies typically address the experience itself (e.g., criminogenic needs, painful emotions, dysfunctional thought content); the after-the-fact products of the three principles in action.

Understanding versus Awareness

Principle-based correctional counselors help offenders understand that they are continually using their ability to think to create their personal experience from the inside-out. They strive to deepen offenders' understanding that thinking is an ability or agency that they use to produce thoughts, which in turn are made to look real by their faculty of consciousness. The use of the term *understanding* here is not about thought content, but rather about the ability to gain perspective on the products of thought, the fact of thought formation, or the use of thinking to produce thought.

In contrast, other contemporary correctional therapies strive to increase offenders' awareness of the products of thought (e.g., criminogenic beliefs, insecure feelings, distorted perceptions). Typically, these therapies use the term *awareness* to refer to the recognition and often the subsequent analysis or refutation of these

thought products, including how they developed historically. These approaches assume that such awareness is intrinsically therapeutic. For example, if an offender becomes aware that he reacts to his wife in the same manner that he did his mother, or that at times his thoughts about his wife are irrational, he is better off than if he were unaware of these facts. Another goal of such therapies is to help offenders explain these patterns through assumed causal factors such as deviant conditioning, learned criminogenic beliefs, and traumatic past events (e.g., child abuse).

In contrast, principle-based correctional counselors attempt to deepen offenders' understanding that their moods, beliefs, perceptions, feelings, and behavior are all created by them, from within. Their primary goal is to help offenders see their specific personal life experience within the context of generic human psychological functioning. The above offender, for example, would learn that the way he sees his wife is solely a product of his thinking, not the effect of his wife, his mother, or any other woman. Also, he would be helped to understand the temporary and illusory nature of this thinking, and how, if he stops viewing this temporary reality as "the truth," it will naturally self-correct without a need to actively work at changing it.

PBCC further proposes that increasing offenders' awareness, absenting understanding the three principles, often results in unintended negative consequences. For example, it runs the risk of discouraging offenders by making external factors, internal dynamics, and irrational thoughts appear to have more "reality" and importance than they previously perceived. Thus, instead of freeing offenders from painful feelings, distorted perceptions, and dysfunctional beliefs, it gives credibility to these experiences and can increase an offender's self-consciousness. On the other hand, when offenders understand that unpleasant or fearful "reality" is internally generated by the link between their memory and their senses, they gain adaptive distancing from these painful experiences. Put another way, offenders are considerably less disturbed by painful thoughts they perceive as coming from their own minds, than emotional pain that appears to be influenced or inflicted by conditions over which

they have limited or no control. Mills, Pransky, and Klein (2005) provide a poignant example:

A husband thinks his wife is too selfish and needs to be put in her place. He believes that this reality is a valid reason to perpetrate domestic violence. In prevention from the inside-out, the husband would be helped to call into question the “reality” he is experiencing; that the way he is seeing his wife is one of many possibilities along a vertical continuum. Seen from a higher perspective, the power would be taken out of his compelling feeling; he would no longer feel compelled to follow the “reality” that led him to violence, because he is able to see that his own thinking brought him there. No matter what outside-in intervention is attempted, if the husband’s understanding of Thought does not change, he will continue to become trapped by his conditioned view of his wife and be compelled to act on it, or have to continually fight against his compelling feelings. (p. 31)

Mills et al. (2005) goes on to emphasize that the same is true of any problem behavior: a youth growing up in a violent neighborhood who *thinks* he will be safer if he joins a gang; a sexual predator who *thinks* he must have the object of his desires and can’t live calmly again until he does; a teenage girl who feels lonely and worthless and *thinks* if she had a baby to take care of, her life would be worthwhile; a pre-teen who *thinks* the way to be cool and accepted is to drink and smoke pot with all the other cool kids; an alcoholic or heroin addict who *thinks* he can’t live without drinking or getting the next hit. Mills emphasizes that all these people *think* they are seeing true “reality,” but it is really their own thinking masquerading as reality out of which they feel compelled to act. Without realizing that other levels of consciousness exist, all are stuck acting out the “reality” they see. PBCC helps such people call into question these “realities” by helping them understand how the principles of Mind, Thought and Consciousness work within them. When offenders are helped to understand that their experience is created from within, a separation is created between their conditioned habits of personal thinking and the resulting behavior. Into this gap flows wisdom, causing habitual thoughts, emotions, and behavior to take

on less importance in their lives. Offenders are helped to understand that when their minds are clear or calm their compelling feelings weaken and they access the wisdom not to follow them. When offenders are aligned with wisdom, they are less likely to waste energy on blaming themselves, others, or the circumstances in which they find themselves. They are less likely to engage in self-defeating behavior or stay immersed in psychological distress. They are more likely to stop blaming themselves or others because it doesn't make sense in the state of clarity or common sense. As offenders' understanding deepens of how this entire process works, their lives continue to improve.

Memory Recognition versus Memory Work

PBCC views memory as stored thought that can be brought to life via an offender's thinking. Thus, rather than teaching offenders how to cope with, refute, or cleanse painful memories, principle-based counselors help offenders: (a) recognize memory as thought brought forward from the past, and (b) understand their capacity to allow these thoughts to pass through their minds in a neutral, non-reactive way which allows them to be healed naturally with minimal interference with their lives.

On the other hand, other contemporary correctional therapies typically assume that memory drives psychological dysfunction. Thus, these therapies consider memory work or memory renovation a necessity. For example, psycho-analytically-based correctional approaches attempt to work through unresolved memories. Humanistic therapies attempt, through catharsis, to clear up unexpressed feelings stored as memories. Behavioral approaches attempt to extinguish deviant responses, or reinforce pro-social response patterns to evoke painful memories. At the heart of cognitive and rational-emotive approaches is the notion that memory is linked to emotion and behavior. Thus, these approaches emphasize changing dysfunctional thought patterns and characterize many relapse prevention programs for sexual offenders and substance abusers. In contrast, PBCC emphasizes a deeper dimension of thought and wisdom as the point of intervention *without focusing on thought content* or trying to reformulate or reframe negative or distorted thoughts.

PBCC questions the effectiveness of memory renovation as a therapeutic modality. First, memory renovation seems impractical, given the myriad of painful and dysfunctional memories held by a typical offender, as well as the stubborn nature of many such memories. More importantly, however, the problem most offenders have with memory is not the particular thoughts that come to mind, but whether or not they understand what memory is, and how to relate to it in a functional manner. Offenders who relate to memory with understanding find that it causes them little or no distress. If, on the other hand, they innocently mistake and react to memory “as reality,” they will experience ongoing distress. Offenders who relate to memory with little understanding will have as many psychological problems from future painful or dysfunctional thoughts as they do from present ones. Thus, attempting to help offenders by renovating memory data is akin to placing a bucket under a leaky roof. Teaching offenders about innate health and how the three principles work to create their experience fixes the roof and empowers them to maintain their composure whenever and whatever unsettling memories happen to surface.

Understanding Emotions versus Dealing with Emotions

Many contemporary correctional therapies focus directly on offenders’ painful feelings (e.g., anxiety, depression, anger), and teach them to cope with these feelings with strategies like ventilation, systematic desensitization, and challenging their irrational beliefs. On the other hand, PBCC asserts that when offenders understand the true nature and purpose of emotions, they have no need to deal with them as if they had a life and influence of their own. Principle-based counselors help offenders understand that painful emotions are products of their own thinking, which they can readily dismiss like any unwanted memory or daydream. According to PBCC, the reason that negative emotions have a significant presence in most offenders’ lives is that: (a) they appear to them to be real rather than simply dismissible thoughts, and (b) even if they could be dismissed, negative emotions have a mystique in our culture of being important and demanding attention.

Principle-based correctional therapists view sustained negative emotions as products of learned, dysfunctional habits of thinking. The only “existence” such emotions have is in the minds of the offenders who learned them at the moment they bring them to mind. Once offenders begin to see painful emotions as insecure thoughts brought to life and sustained by their thinking, they find it increasingly easy to dismiss them.

In addition, there is a distinct set of emotions emphasized by PBCC, which is typically ignored by most correctional therapists. These are the natural or innate emotions experienced by all offenders when their minds are at peace (e.g., contentment, compassion, humor, gratitude, exhilaration). Principle-based counselors teach offenders how to access these generic human feelings by quieting their minds and allowing natural, free-flowing thinking to produce them. Interestingly, while the recent wave of correctional therapies spawned by positive psychology do focus on “positive” emotions, they view them as products of *external* factors such as engaging activities, supportive relationships, and religious faith (e.g., Csikszentmihalyi, 1999; Deiner, 1984).

Finally, principle-based counselors help offenders understand an important utility of emotions; to serve as a reliable barometer of the quality of their thinking in each moment. According to PBCC, painful emotions signal offenders that their thinking is dysfunctional and clouding their innate wisdom. The more painful the emotion, the more dysfunctional an offender’s thinking. On the other hand, natural feelings like well-being and contentment tell offenders that their thinking has perspective and common sense. Thus, rather than an entity with which to cope, contend, or control, emotions are seen by PBCC as reliable guideposts to the moment-to-moment quality of an offenders’ thinking. Sedgeman (2005) puts it this way:

Offenders realize they can navigate life using their feeling state as a reliable guide to the moment-to-moment quality of their thinking, knowing that the thinking process naturally self-corrects. Unattended thoughts pass, the mind clears, consciousness lifts, and from a quiet mind and positive feeling state, offenders increasingly

get functional ideas. The natural tendency of the human mind at peace is toward wisdom and insight, which might be called psychological homeostasis. (p. 52)

Permanent Change versus Temporary Relief

PBCC views temporary symptom relief, although intrinsically valuable, as only a step toward more permanent change, which emerges from understanding the three principles and how to use thought in sync with its natural design. Anything short of this is viewed by PBCC as incomplete treatment. While this goal is not achieved with every client, it is a principle-based counselor's definition of correctional counseling success. Temporary relief is illustrated by: (a) a violent offender managing his anger without understanding how anger is caused by the misuse of thought, and how to live life in a more healthy state of mind by correcting for troublesome thinking, or (b) an alcoholic offender who stops drinking and stays dry for several months without learning that her desire to drink originates in thought, and that she has the capability to better use her thinking agency. While these results would be preferable to no positive improvement, they would be seen by principle-based correctional therapists as temporary, although welcome for two reasons: (a) they give temporary relief, but more importantly, (b) they improve the offender's learning curve so that understanding the three principles becomes more leveraged.

Although "successful" PBCC offenders will continue to experience ups and downs in life regardless of their level of understanding the three principles, they will be buffered from dysfunctional thought processes and remain more resilient due to their increased realization of how to use thought to their advantage. This result occurs as offenders realize that thought is at the root of all their problems and that they can transcend that thinking on an ongoing basis. In sum, successful PBCC offenders come to realize they can have the satisfying feelings they desire and resolve their own life problems by accessing the wisdom in a natural, healthy thought process. Thus, PBCC would consider both the violent and alcoholic offenders cured when they were functioning at a level of understanding that allowed them to use thought in a way that would

eliminate or minimize the significance of the painful feelings that make intoxication and violence appear desirable.

Teaching Health versus Treating Illness

The prevailing correctional therapies typically strive to treat DSM-IVR-diagnosed offender illnesses. They assume that offenders are restored to their “normal” level of health (i.e., highest previous GAF) when their presenting symptoms and problems are relieved or resolved. In contrast, the primary goal of PBCC is to facilitate permanent, positive change in offenders’ overall psychological health. This improved psychological functioning is evidenced by a higher quality use of thought which naturally evolves through a deeper understanding of the three principles. PBCC views an offender’s presenting symptoms and problems as products or evidence of their innocent misuse of thought. These symptoms and problems are irrelevant to the cure, however, for principle-based correctional therapists assume that as offenders grasp the three principles and begin to use thought in an increasingly healthy way, their symptoms and problems will naturally resolve across the board.

Principle-based correctional counselors view offenders as naturally healthy thinkers who have innocently learned unhealthy uses of thought. They operate from faith in offenders’ capacity for innate health and their ability to access more wisdom as their level of understanding the three principles deepens. Put another way, mental illness in this paradigm is seen as evidence of an offender’s psychological immune system being compromised by learned misuses of thought. Therefore, principle-based counselors teach offenders how to use their thinking agency in the natural way that draws out their innate wisdom, relieves their symptoms, resolves their problems, and prevents relapse. Thus, PBCC is essentially a teaching modality rather than a treatment modality. Principle-based correctional counselors teach health rather than treat illness. J. Pransky (2003) concisely summarizes the major components of PBCC:

The components of principle-based correctional counseling are: first, the counselor has a deep understanding of the three principles—Mind, Consciousness and Thought, lives generally in well-being and remains in a

state of well-being throughout the session. Second, the counselor builds rapport and creates a good feeling, and nothing else happens unless rapport exists and is maintained; if rapport drops, all therapy stops until it is regained. Third, the counselor enters into a state of deep listening. Finally, when insights occur to the counselor about what the offender is not seeing, the counselor helps the offender see how the three principles work together to create his or her experience, with the intent that insights will occur that will unveil the offender's innate health. The principle-based correctional counselor does not take offenders back into the past, nor deeply into their feelings or problems, nor into the content of their thinking. The idea is for offenders to see the three principles operating in their lives as the creator of their experience. (p. 243)

EVIDENCE SUPPORTING THE ASSUMPTIONS AND EFFECTIVENESS OF PBCC

There is voluminous evidence in the child development literature which supports the major assumption of PBCC that offenders are born with innate mental health. Thousands of naturalistic observations of infants and toddlers raised in nurturing settings reveal unequivocally that such youngsters possess a natural curiosity to explore and to learn. The vast body of developmental research appears to conclude that, at birth, children do not have mind-sets that predispose them toward mental dysfunction and criminality. Instead, these studies point almost unanimously to an inborn state of healthy mental functioning in children, which includes a natural interest to learn, an intrinsic ability to act in mature, common sense, non-deviant ways, and a natural desire to use and expand these abilities in pro-social directions (e.g., Ainsworth, 1982; Arendt, Cone, & Sroufe, 1979; Carver & Scheier, 1990; McCombs, 1991; Mills, et al., 1988; Mills & Spittle, 2000; Sroufe, 1979; Stewart, 1985; Suarez, Mills, & Stewart, 1987; Weiner, 1990; Wilson & Hernstein, 1985).

Furthermore, there is considerable research evidence, which supports the second assumption of PBCC that this innate health

is readily available to offenders and can be re-kindled—that even high-risk offenders can access a natural capacity to think and behave in more mature, common-sense, functional ways (e.g., Dodge & Frame, 1982; Mills et al., 1988; Stewart, 1985; Suarez et al., 1987). For example, several longitudinal research studies (e.g., Benson, 1995; Bernard, 1996; Garmezy, 1974; Henderson & Milstein, 1997; O’Connell-Higgins, 1994; Rutter, 1984, 1987; Seligman, Steen, Park, & Peterson, 2005; Weiner, 1990; Werner & Smith, 1989; Wolin & Wolin, 1993) document the resiliency of individuals (including many offenders) who grew up in highly dysfunctional families and/or communities, who overcame or transcended these conditions to lead healthy, productive lives. These studies, many following large cohorts for up to 40 years, offer empirical support for the natural capacity of offenders to regain their innate mental health. Interestingly, subjects in most of the samples studied experienced no outside intervention or psychotherapy.

Also, there is considerable evidence from over two decades of applied research that the principles behind PBCC can be taught to adult offenders and at-risk youth from diverse cultural backgrounds and intellectual levels, leading to significant improvement in their psychological functioning. The principle-based psychology behind PBCC has achieved significant results in numerous clinical settings for both adolescent and adult clients displaying a wide range of DSM-IV clinical diagnoses (e.g., Bailey, 1989; Bailey, Blevens, & Heath, 1988; Blevens, Bailey, Olson, & Mills, 1992; Borg, 1997; Mills & Spittle, 2000; J. Pransky, 1999; Ringold, 1992; Shuford, 1986; Shuford & Crystal, 1988; Stewart, 1987). Furthermore, several longitudinal studies have documented the effectiveness of principle-based community empowerment projects in several of the most criminogenic urban housing projects in Florida, New York, Hawaii, Minnesota, and California (e.g., Mills & Spittle, 2002; J. Pransky, 1998). Each of these studies reported significant reductions in crime and delinquency, drug use, child abuse and neglect, and unemployment. For example, beginning in 1993, the Glenwood/Lyndale Community Center, located between two of the most crime-ridden public housing projects in Minneapolis, implemented a variety of programs based on PBCC within all of its community youth service

programs. Prior to implementation, social service and police reports of violence involving families, gangs, and other community residents were virtually constant. By 2000, reports of fighting or conflict among families, gangs, and residents were rare. Also, citizens began assisting police with information to aid in solving crimes, something unheard of in 1993. According to Mills and Spittle (2002), the former atmosphere of fear in these communities was replaced by trusting community relationships. From observing the outcomes of these programs, the Minneapolis Department of Public Safety reported that "crime within schools has dropped to next to nothing from the prior high rate more typical of public housing communities around the world" (Mills & Spittle, 2002).

In 1990 and 1991, the Comprehensive Community Revitalization Project, a \$5 million-dollar, principle-based program, was funded by a coalition of foundations in the South Bronx, and the East Bay Recovery Project in Oakland, California. In Oakland, the program was carried out in Coliseum Gardens, a 200-unit housing development with the highest homicide and drug-related arrest rates in the city. At the end of the second project year, the homicide rate had dropped by 100% (none reported in year two). In fact, the homicide rate in this community remained at zero for six consecutive years (1991-1996)! Also, violent crime rates dropped 45%, drug possession sales were down 16%, and assaults with firearms decreased 38%. Furthermore, youth involvement in boys' and girls' clubs increased 110%, gang warfare and ethnic clashes between Cambodian and African-American youth ceased, 80% of residents participated in regular meetings with housing management and community police, and 62 families went off welfare (Roe & Bowser, 1993).

The South Bronx Comprehensive Community Revitalization Project spanned a year and a half, with 70 professional staff, community residents, and resident leaders of six large community development corporations participating. Subsequently, principle-based training was expanded to all social service departments, Head Start, and HIPPIY parent programs, numerous employment and youth serving agencies, and several law enforcement and school personnel. Beginning in 1994, a youth-school ombudsman program was

funded by the State of New York to bring this principle-based understanding into community schools. O.M.G., Inc. (1994), an independent evaluation agency contracted to evaluate the South Bronx project, concluded:

the principle-based group planning sessions and programs designed to enhance self-esteem and confidence enabled community residents to become a significant part of community change, to become involved in shaping their own future and that of their communities in a meaningful way, and also helped community service personnel to extend their roles beyond that of “landlord” to have more positive relations with community residents. (O.M.G., 1994, p. 13)

Finally, educational programs with at-risk youth based on the principles behind PBCC have resulted in significantly higher reading levels (Stewart, 1985), self-esteem (Cherry, 1992), and GPA (Mills & Spittle, 2002), as well as significant reductions in school discipline referrals, truancy, suspensions, and drop-out rates. For example, community empowerment projects in Dade County, Florida, and Oakland, California, targeted youth fitting each school district’s profile of youth at risk for dropping out. These projects were funded through federal drug-free school zone grants to work with at-risk youth, teachers, school counselors, youth agencies, and parent groups in all twelve high school feeder patterns. Over the three-year pilot program, 275 students in grades 7-12 were served directly, while 36 teachers, 5 guidance counselors, and 40 parents received training in the principles behind PBCC. Pre- and post-grade point averages were compared and found to have increased significantly in all three years of the project. The mean increase was 64% for year one, 56% for year two, and 57% for year three. Interestingly, students ending instruction after year one continued to show additional GPA improvements of 24% during both the second and third project years. Furthermore, absenteeism and discipline referrals decreased significantly in each year of the project. By the end of the program, participants’ rates of absenteeism and discipline referrals were significantly below county school norms. By the third project year, participants displayed an overall 58% decrease in absenteeism, and an 81% decrease in discipline referrals. Finally, significant

pre-post test differences on the Pier-Harris Self-Esteem Scale were found for youth on both the positive cognition and self-worth subscales (Cherry, 1992).

IMPLICATIONS FOR OFFENDER REHABILITATION

The inside-out paradigm behind PBCC proposes that the principles of Mind, Consciousness, and Thought comprise the root cause of all deviant behavior. Thus, whether or not offenders realize it, all their behavior, as well as their potential for behavioral change, stems from their moment-to-moment use of these principles. A major implication of this fact for offender rehabilitation is all offenders continually behave in ways that make sense to them based on how their thinking makes life appear to them at each moment. Most offenders don't realize that their every experience (e.g., feelings, perceptions, moods) is coming directly from them, that they continually behave based on how they see themselves and their lives, generated by the myriad of thoughts they've accumulated about themselves, other people, their life circumstances, and situations. Although born with the capacity to experience natural happiness and common sense, most offenders typically contaminate this experience by innocently misusing their ability of thought. Only when offenders realize how the principles work to create their experience from the inside-out can they regain the capacity to see beyond their conditioned habits of thinking. Although they can never erase their thoughts entirely, most offenders can see them for what they are (merely habits of thought) and, in so doing, access their inner wisdom. Mills et al. (2005) put it this way:

When offenders realize they are inadvertently creating their experience internally at each moment, they find hope through knowing the experience of life they are having and thus their future can change, simply because their thinking can change. With such realization, offenders no longer tend to expend energy wastefully on recriminations, anger, or thoughts of revenge. Increased energy is now available to them as they consider their options, make decisions, and act on behalf of themselves and others from wisdom. When they don't realize the nature of

the principles behind this process, offenders are at the mercy of their own thinking, which often leaves them feeling disempowered and unable to cope effectively. (p. 29)

It is apparent that the three principles behind PBCC can be used successfully to draw out the natural, healthy psychological functioning of which even the most chronic offenders are capable. When offenders are exposed to these principles in ways that relate to their own experiences, and responded in ways that engage their healthier states of mind, the results appear to have a cumulative reciprocal effect that can reverse the process leading to alienation, violence, drug use, and other deviant behavior. Hopefully, the field of correctional counseling will take time to reflect on the principles behind PBCC and consider the possibility that this unique counseling paradigm can contribute to its noble mission of offender rehabilitation.

REFERENCES

- Ainsworth, M. P. (1982). Attachment, retrospect, and prospect. In C. M. Parkes & J. Stevenson (Eds.), *The place of attachment in human behavior* (pp. 3-30). London: Tavistock.
- Arendt, R., Cone, F. L., & Sroufe, A. L. (1979). Continuity of individual adaptation from infancy to kindergarten. A predictive study of ego-resiliency and curiosity of pre-schoolers. *Child Development*, 50, 950-959.
- Bailey, J. (1989). *New hope for depression: A study in neo-cognitive therapy*. Paper presented at the 8th Annual Psychology of Mind Conference, St. Petersburg, Florida.
- Bailey, J., Blevens, J. K., & Heath C. (1988). *Early results: A six-year post-hoc follow-up study of the long-term effectiveness of neo-cognitive psychotherapy*. Paper presented at the 7th Annual Psychology of Mind Conference, Coral Gables, FL.
- Banks, S. (1983). *Second chance*. Tampa, FL: Duval Bibb.
- Banks, S. (1989). *In quest of the pearl*. Tampa, FL: Duval Bibb.
- Banks, S. (1998). *The missing link*. Vancouver, BC: Lone Pine.
- Banks, S. (2001). *The enlightened gardener*. Vancouver, BC: Lone Pine.
- Benson, P. L. (1995). *What kids need to succeed: Proven, practical ways to raise good kids*. Minneapolis, MN: Search Institute.
- Bernard, B. (1996). Fostering resiliency in communities: An inside-out process. *Resiliency in Action*, Summer, 9-14.
- Blevens, J., Bailey, J., Olson, P., & Mills, R. C. (1992). *Treatment effects of neo-cognitive therapy: A formative evaluation*. Minneapolis, MN: Foundation for the Advancement of Mental Health.
- Borg, M. B. (1997). *The impact of training in the health realization model on affective states of psychological distress*. Unpublished doctoral dissertation, California School of Professional Psychology, Los Angeles, CA.
- Carver, C. S., & Scheier, M. F. (1990). Origins and functions of positive and negative affect: A control process view. *Psychological Review*, 97, 19-35.
- Cherry, A. (1992). *Assessment of effectiveness using the informed families outcome evaluation systems*. Unpublished doctoral dissertation, Barry University, School of Social Work. Fort Lauderdale, FL.
- Czikszentmihalyi, M. (1999). If we are so rich, why aren't we happy? *American Psychologist*, 54, 821-827.
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95, 542-575.
- Dodge, K. A., & Frame, C. M. (1982). Social-cognitive biases and deficits in aggressive boys. *Child Development*, 53, 620-635.
- Garnezy, N. (1974). The study of competence in children at risk for severe psychopathology. In E. J. Anthonj & C. Koupernik (Eds.), *The child in his family: Children at psychiatric risk* (Vol. 3, pp. 77-98). New York, NY: Wiley.
- Henderson, N., & Milstein, M. (1997). *Resiliency in schools: Making it happen for students and educators*. Thousand Oaks, CA: Corwin Press.

- Kelley, T. M. (1990). A neo-cognitive model of crime. *Journal of Offender Rehabilitation, 16*, 1-26.
- Kelley, T. M. (1993a). An advanced criminology based on Psychology of Mind. *Journal of Offender Rehabilitation, 19*, 173-190.
- Kelley, T. M. (1993b). Neo-cognitive learning theory: Implications for prevention and early intervention strategies with at-risk youth. *Adolescence, 28*, 439-460.
- Kelley, T. M. (1996). A critique of social bonding and control theory of delinquency using the principles of Psychology of Mind. *Adolescence, 31*, 321-327.
- Kelley, T. M., & Stack, S. A. (2000). Thought recognition, locus of control, and adolescent well-being. *Adolescence, 25*, 531-550.
- Kelley, T. M. (2003a). Preventing youth violence through Health Realization. *Youth Violence and Juvenile Justice: An Interdisciplinary Journal, 1*, 359-387.
- Kelley, T. M. (2003b). Health Realization: A principle-based psychology of positive youth development. *Child and Youth Care Forum, 32*, 47-72.
- Kelley, T. M. (2004). Positive psychology and adolescent mental health: False promise or true breakthrough? *Adolescence, 39*, 257-278.
- Kelley, T. M., Mills, R. C., & Shuford, R. (2005). A principle-based psychology of school violence prevention. *Journal of School Violence, 4*, 47-73.
- McCombs, B. G. (1991, October). *Metacognition and motivation for higher level thinking*. Paper presented at the Annual Meeting of the American Educational Research Association, Chicago, IL.
- Miller, W. R., & Thorenson, C. E. (2003). Spirituality, religion, and health: An emerging research field. *American Psychologist, 58*, 24-25.
- Mills, R. C. (1992). *Substance abuse, dropout, and delinquency prevention: The Modello/Homestead Gardens public housing project*. Paper presented at the 10th Annual Conference on Psychology of Mind, St. Petersburg, Florida.
- Mills, R. C., Dunham, R. G., & Alpert, G. (1988). Working with high-risk youth in prevention and early intervention programs: Toward a comprehensive wellness model. *Adolescence, 23*, 643-660.
- Mills, R. C., Pransky, J. B., & Klein, D. C. (2005). *Prevention from the inside-out: A new theoretical framework of prevention*. Unpublished Monograph.
- Mills, R. C., & Spittle, E. (1998). *The health realization community empowerment primer*. Long Beach, CA: Health Realization Institute.
- Mills, R. C., & Spittle, E. (2002). *The understanding behind health realization: A principle-based psychology. Summary of clinical, prevention and community empowerment applications—documented outcomes*. Long Beach, CA: Health Realization Institute.
- Mustakova-Possardt, E. (2002). *Three basic principles of psychological functioning: Exploring the possibilities of Mind, Consciousness and Thought ecology*. Unpublished monograph, available from elemam@west.edu.

- O'Connell-Higgins, G. (1994). *Resilient adults: Overcoming a cruel past*. San Francisco, CA: Jossey-Bass.
- O.M.G., Inc. (1994). *Final annual assessment report: Comprehensive community revitalization program*. Philadelphia, PA: The OMG Center for Collaborative Learning.
- Pransky, G. (1997). *The renaissance of psychology*. New York, NY: Sulzburger & Graham Publishing.
- Pransky, J. (1998). *Modello: An inside-out model of prevention and resiliency in action through health realization*. Cabot, VT: NEHRI Publications.
- Pransky, J. (1999). *The experience of participants after health realization training: A one-year follow-up phenomenological study*. The Union Institute, Cabot, VT: NEHRI Publications.
- Pransky, J. (2003). *Prevention from the inside-out*. Cabot, VT: 1st Books.
- Ringold, C. (1992). *Changing hearts, changing minds: the usefulness of psychology of mind in the treatment of paranoid schizophrenia—two case studies*. Unpublished doctoral dissertation, Minnesota School of Professional Psychology, Minneapolis, MN.
- Roe, J., & Bowser, B. (1993). Health Realization/community empowerment project: Evaluation of First Year Activities: Submitted to East Bay Community Recovery Project.
- Rutter, M. (1984, March). Resilient children. *Psychology Today*, 57-65.
- Rutter, M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry*, 57, 316-331.
- Sedgeman, J. A. (2005). Health Realization/Innate Health: Can a quiet mind and positive feeling state be accessible over the lifespan without stress relief techniques? *Medical Science Monitor*, 11, 47-52.
- Seligman, M. E. P., Steen, T. A., Park, N., & Peterson, C. (2005). Positive psychology progress: Empirical validation of interventions. *American Psychologist*, 60, 410-421.
- Shuford, R. J. (1986). *An exploratory study to determine the effectiveness of a neo-cognitive treatment approach when utilized in a clinical setting*. Unpublished doctoral dissertation, University of Oregon, Eugene, OR.
- Shuford, R., & Crystal, A. (1988, June). *The efficacy of a neo-cognitive approach to psychotherapy*. Paper presented at the 7th Annual Conference on Psychology of Mind, Coral Gables, FL.
- Sroufe, L. A. (1979). The coherence of individual development: Early care, attachment, and subsequent development issues. *American Psychologist*, 34, 834-841.
- Stewart, C. (1987, September). *The efficacy of a neo-cognitive psychology with DUI offenders*. Paper presented at the annual conference of the Florida Alcohol & Drug Abuse Association, Miami, FL.
- Stewart, D. (1985). *Affective states as the key variance in determining student mastery of basic reading skills*. Paper presented at the fourth annual conference on Psychology of Mind, Kahaku, HI.

- Suarez, E., Mills, R. C., & Stewart D. (1987). *Sanity, insanity, and common sense*. New York, NY: Ballantine Books.
- Taubes, G. (1999). String theorists find a Rosetta stone. *Science*, 285, 512-517.
- Weiner, B. (1990). History of motivational research in education. *Journal of Educational Psychology*, 82,616-622.
- Werner, E., & Smith, R. (1989). *Vulnerable but invincible: a longitudinal study of resilient children and youth*. New York, NY: Putnam.
- Wilson, J. W., & Hernstein, R. (1985). *Crime and human nature*. New York, NY: Simon & Shuster.
- Wolin, S., & Wolin, S. (1993). *The resilient self: How survivors of troubled families rise above adversity*. New York, NY: Villard Books.

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Teaching health vs. treating dysfunction: The efficacy of three principles correctional counseling with residents in an English prison. International Journal of Offender Therapy and Comparative Criminology <https://doi.org/10.1177/0306624X17735253> Abstract: Three principles correctional counseling (3PCC) posits that people in prison have inner mental health they have innocently obscured to varying degrees with their own thinking. Method: Following several weekly group sessions of Principle-Based Correctional Counselling, 54 adult prisoners on probation completed two measures of thought recognition and the Well-Being Inventory. This lesson is aimed at students with a language level of B2 (upper-intermediate) and focuses on revising, learning and using vocabulary related to health and illnesses through a variety of engaging activities which will help them improve listening and speaking. This lesson plan works well on its own, but I have used it to complement Unit 2 of the course book New English File Upper-intermediate. Three principles correctional counseling (3PCC) posits that people in prison have inner mental health they have obscured to varying degrees with their own thinking. 3PCC further posits that people in prison can rekindle and sustain this inner health via understanding how three psychospiritual principles-Universal Mind, consciousness, and thought-coalesce to form people's psychological experience. We review the three principles and explain how exposure to these principles can lead to improved mental health and improved behavior. Then, we describe 3PCC and distinguish it from prevailing cor... Principles of Epidemiology in Public Health Practice, Third Edition An Introduction to Applied Epidemiology and Biostatistics. Section Navigation. CDC Home. Students of journalism are taught that a good news story, whether it be about a bank robbery, dramatic rescue, or presidential candidate's speech, must include the 5 W's: what, who, where, when and why (sometimes cited as why/how). The 5 W's are the essential components of a news story because if any of the five are missing, the story is incomplete. The same is true in characterizing epidemiologic events, whether it be an outbreak of norovirus among cruise ship passengers or the use of mammograms to detect early breast cancer. Positive psychology reflects the core public health principle of protecting and improving health, focusing on keeping people well rather than treating illness. More recently Seligman (2011) introduced the PERMA model of flourishing, which has five core elements of psychological well-being: positive emotions, engagement, relationships, meaning, and accomplishment. This broad definition encompasses an individual's own experience of their life, and a comparison of their life circumstances with social norms and values. Wellbeing may therefore be viewed as having two dimensions: objective and subjective wellbeing.