Correctional Education  
An Integration of  
Andragogy, Counseling,  
& Therapy

He who opens a School Door   
Closes a Prison

~Victor Hugo 1802-1885

To Educate a Man in Mind  
and Not in Morales is to  
Educate a Menace

~Theodore Roosevelt 1858-1919

Introduction

For many decades there has been a systemic, subtle, implicit, cultural and personal unwarranted Bias fostered within the criminal justice system by teachers and correction’s personnel towards offenders with disabilities. Emotional, behavioral and mental health problems can affect a student’s learning. There is an urgent need to familiarize the Criminal justice practitioner with the knowledge and an understanding of using a different and more effective approach of instructing and supervising offenders within the criminal justice system.

In 2004 the UCLA School of Public Policy and Social Research stated, “One million dollars spent on correctional education prevents about 600 crimes, while that same money invested in incarceration prevents 350 crimes. Correctional Education is almost twice as cost-effective as crime control policy.” In 2007 Former US Secretary of Education Arne Duncan stated, “Correctional Education programs provide incarcerated individuals with the skill and knowledge essential to their futures and investing in these education programs helps released prisoners get back on their feet and stay on their feet – when they return to communities across the country.”
**Adverse Childhood Experience/ Co-occurring Disorders**

Many of the students enrolled in educational programs have encountered Psychological or Emotional induced Traumatic Lifestyles or un-diagnosed Behavioral Disorders prior to incarceration known as ACE (Adverse Childhood Experiences) or Co-Occurring Disorders.

Between 1995 & 1997 a study known as Adverse Childhood Experience (ACE) was conducted by the Kaiser Permanente and Center for Disease and Prevention, an American health maintenance organization. The study describes a traumatic Experience in a person’s life occurring before the age of 18 is remembered as an adult and the experiences have a tremendous impact on probable future violence and victimization. A Co-Occurring Disorder is defined by the DSM (Diagnostic Statistical Manual) as an individual experiencing 2 or more disorders relating to the use of alcohol and other drugs of abuse as well as mental health issues and or behavioral disorders.

**ACE and Co-occurring Experiences**

- Fetal Alcohol Syndrome
- Attention Deficit Hyperactive Disorder (ADHD)
- Neurobehavioral Disorder Associated with Prenatal Alcohol Exposure (ND-PAE)
- Oppositional Defiant Disorder (ODD)
- Conduct Disorder (CD)
- Drug Addiction (abuse of):
  - Alcohol
  - Prescription medication (legal or illegal)
  - Amphetamine
  - Opioids
- Possible child abuse
- Molestation
- Rape or Incest
- Prostitution
- Human Trafficking
• Living homeless
• Forced gang affiliation
• Domestic violence
• Verbal and Physically abusive family
• Stealing or selling drugs prior to puberty
• Having anxiety or depression (social, emotional or both)

**Maladaptive and Addictive Behaviors**

• Petulance
• Narcissistic
• Rude
• Disrespectful
• Impatient
• Impulsive
• Inconsiderate
• Make excuses rather than take responsibility
• Exhibit a temper and express anger
• Exhibit negative attitudes and character
• Express intolerance of others
• Lack dependability and trustworthiness
• Lack clear focus
• Lack clear goals or sense of purpose
• Lack flexibility
• Unwilling to listen, learn or change behavior
• Lack initiative and self-motivation (low self-esteem)
• Lack reasonable interpersonal communication skills

These are some of the emotional and behavioral life skill problems that many offenders bring with them into the criminal justice system. They have become a significant, interwoven part of correctional education and prison reform.
According to the 2006 Bureau of Justice Statistics:

76% of jail offenders, 74% of state prisoners and 63% of federal prisons are reported having a Mental Disorder. In addition, their report states that 49% of jailed offenders and 42% of state prisoners have both a mental and substance abuse disorder. The report also showed that 30% of juveniles display co-occurring disorders.

Correctional Education

Some of the goals of today’s correctional educator involves:

➢ Adapting and using Andragogy vs. Pedagogy an evidence based approach for teaching and supervising adult and juvenile offenders within the criminal justice system.
➢ Evaluating and promoting the rehabilitation of students with behavioral, psychological and emotional problems.
➢ Integrating literacy and life skills to a population of offenders embracing criminal and addictive thinking.

By using an integrative approach of Andragogy, Counseling and therapy the instructor or criminal justice personnel can assist in facilitating an offender’s successful reentry into society and hopefully reduce the probability of their returning to prison.

Andragogy vs Pedagogy

Pedagogy (the art and science of helping children to learn) is a teacher-directed method of instruction. This didactic approach originally developed in the monastic schools of Europe in the Middle Ages where boys went to monasteries and were taught by Monks. This approach of instruction places the student in a submissive role requiring their obedience towards their teacher. This method creates a teaching and learning situation that promotes dependency on the instructor.
Pedagogy is based on the assumption that learners need to know only what the teacher teaches them. **Andragogy** *(the art and science of helping adults learn)* is a term that was theorized by Dr. Malcolm Knowles, in 1980. He stated that people become adults psychologically when they arrive at self-concept, being responsible for their lives and of becoming self-directed.

By adapting and using Dr. Knowles theory, the criminal justice professional needs to have a knowledge and understanding of the following 6 theoretical Assumptions:

1. **Self-concept**
   - Becoming more self-directed and independent as he or she matures
   - Directs learning goals with the guidance of their instructor
   - Important for instructor to facilitate the process of goal-setting
   - Students need to be given the freedom to assume responsibility for their own choices.

2. **Experience**
   - Adults have a wealth of life experiences that is brought into new learning experiences
   - Some experiences though may cause misinformation or biases related to new learning and must be clarified to avoid barriers to the new learning
   - Educators encourage learnings to connect their past experiences with their current knowledge-base and activities
   - Educators need to be well-versed in how to help students draw out relevant past knowledge and experiences
   - Educators must know how to relate the sum of learners’ experiences to current learning.

3. **Readiness to learn depends on needs**
   - Whether or not an adult is ready to learn depends on what they need to know in order to deal with life situations for changing their thinking and behavior
   - Motivation to learn is increased when the relevance of the “lesson” through real-life situations is clear, particularly in relation to the specific concerns of the learner
Adult learning is characterized as goal-oriented and intended learning outcomes that should be clearly identified.

Align the learning activities with these objectives to be fulfilled within a certain period of time.

4. **Problem Centered Focus**
   - Adults need to see the immediate application of learning.
   - They seek learning opportunities that will enable them to solve problems.
   - Best learning method is by relating the assigned tasks to their own learning goals.
   - Activities must clearly and directly contribute to achieving their personal learning objective.
   - Student will be inspired and motivated to engage in projects and successfully complete the assigned tasks.

5. **Internal motivation**
   - Adults will seek learning opportunities due to some external motivators (ex. Children, family, job).
   - Educators need to identify appropriate ways to convert theoretical learning to practical activities so that real life situations are made clear and understandable to them.

6. **Adults need to know why they need to know something.**
   - Adults need to know *what’s in it for them*. How will this new knowledge solve a problem or be immediately applied?
   - They also thrive in collaborative relationships with their instructors.
   - When learners are considered by their instructors as equals, they become more productive.
   - When their contributions are acknowledged, then they are willing to put forth their best work and begin to change their thinking and behavior.

*Andragogy* becomes a more effective and innovative approach of teaching and supervising offenders than *Pedagogy* within the correctional classroom and the Criminal Justice System.
Integrating Counseling into a correctional program amounts to guiding a student towards the understanding of life and its challenges. Counseling also helps a student (an offender) to regain his or her lost confidence (self-esteem).

The integration of Group Classroom Therapy is the final method that should be used in all criminal justice programs. By adapting and integrating Dr. Irvin David Yalom’s, approach to Treatment, it is evident that group therapy Influences a behavioral Change in an individual. This approach offers the opportunity for a student to both receive support from other students and give support to their peers. This forms a part of bonding and allows for positive and productive growth while learning. This approach assures individuals that they are not alone and that other students share similar problems and struggles.

It also provides a broad safety net for hesitant students to discuss their feelings and overcome fear of being perceived as weak. Group classroom therapy helps students develop Communication skills, Socialization skills and accepting criticism from others. Through group classroom therapy, students can model the successful behaviors of other students and learn by imitating the actions of their peers within the classroom.

In the mid-1950’s clinical psychologist Dr. Albert Ellis introduced Rational Emotive Therapy (REBT); and, in the 1960’s psychiatrist Aaron Beck introduced Cognitive Behavioral Therapy (CBT). These two concepts formed the basis that:

*Thoughts control feelings; Feelings DO NOT control thoughts*

*And Human Emotions or Behaviors Are the results of what people think.*

*A lasting change in an individual’s belief system and behavior is to help them change the way they think.*

*The correctional educator and criminal justice professional should Always ACT and not REACT to and offender’s disruptive or problematic behavior.*
Biographical H.T. Lee, Sr.

Mr. Lee is a Correctional Andragogist (adult educator) with over 4.5 decades of experience within the Illinois Department of Corrections School where he has taught ABE, ESL, GED and Life Skills (Substance Abuse and Reentry) classes. In 1982 he authored a 148-page manuscript titled, *A Handbook for Teaching Adult Basic Education in the Department of Corrections*. This process manual became the school district’s Adult Basic Education Language Arts Curriculum. Mr. Lee has also had the opportunity to teach at community colleges and the university level. Mr. Lee has been presenting papers at regional, national, and international educational conferences for more than 3 decades. In 1983 he was recognized as the Illinois Region III Correctional Education Association Teacher of the Year. As an Addiction Counselor, Mr. Lee provided individual, and group, therapy at a Comprehensive Mental Health Center. He is an appointed member of the Illinois Advisory Council on Alcoholism and Other Drug Dependency. Mr. Lee is a Licensed Professional Educator with a B.S. Ed. (K-12), and an M.S.Ed. (Educational Administration). Mr. Lee is a Certified Alcohol and Other Drugs of Abuse Counselor, Certified Criminal Justice Addictions Professional, and Certified Co-Occurring Substance Use and Mental Health Disorder Professional in the state of Illinois.
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