

# HAKOMI IN JAIL: A PROGRAMMATIC APPLICATION OF THE TECHNIQUE OF "TAKING OVER" WITH GROUPS OF PSYCHOTIC, DISRUPTIVE JAIL INMATES

by Tom Whitehead

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Tom Whitehead is a Certified Hakomi Therapist with a rich clinical background, currently living and working in Austin, Texas. He sees both individuals and couples in his private practice, and specializes in abuse recovery issues. His article here is a creative and brilliant application of Hakomi principles to working with a difficult client population, one not often dealt with in a mindful, compassionate fashion.

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For several years I worked for a psychiatric treatment facility within a large urban jail. My job there involved creating, implementing, and supervising treatment programs for the inmates. During the latter part of my tenure I became involved with Hakomi, first in workshops and later as a student in the therapist training. I applied on the job parts of what I was learning. Some of the applications involved straightforward use of Hakomi methods and principles. However, other applications were more unusual. Their recounting may be of interest not only to therapists engaged in or contemplating similar work, but to others who may enjoy seeing some of the methods stretched to accommodate unusual circumstances. For this reason I am detailing one such application here.

## ABOUT JAILS

The jail where I worked is one of the largest in the country, housing about 8,000 inmates. Jail inmates are a diverse and special group. For the most part, these are people who have been formally charged with offenses of one sort or another, but who have not yet passed fully through their court proceedings. "Inmates" are different in legal status from "convicts," those convicted of offenses and sentenced to prison. Jails exist basically to keep folks from running off before they can be brought to trial.

The offenses with which inmates are charged are of all types, ranging from the preposterous, through the criminal, and into the horrendous. To illustrate the preposterous end of this spectrum, a young schizophrenic woman with whom I worked was evicted from a hotel after behaving bizarrely. She left the building peacefully, but refused to step from

the curb onto the street as instructed by the police. Because some legal charge was necessary in order to remove her from the hotel grounds, she was at that point charged with trespassing. This woman was taken to jail, and remained there for six months awaiting trial. Such cases are far from unusual, and serve to dispel the stereotypical notion that jails are for "criminals". In fact, the spectrum of personalities in jails is quite broad, and defies any simple categorization.

Unappreciated by the general public are the great many practical problems in keeping large numbers of people cooped up. For one thing, about 5 percent of any large jail population is psychotic. The reasons for this are straightforward. First, about two percent of any random collection of human beings is psychotic at any given time — roughly one percent for the schizophrenias, and another one percent for psychoses due to mood and organic factors. But these disorders are more common in jails. Psychotic persons tend to be "concentrated" there because persons with poor judgment and impaired self-control are more likely to get into trouble with the law. This is not to imply necessarily that they commit crimes more often, but rather that they botch the job more often.

Second, and more sadly, in many communities the jail functions as a default psychiatric facility, a place which receives mentally ill persons who are "causing problems." The courts have ruled that inmates are entitled to treatment for their disorders while they await disposition of their charges. For this reason, it is legally mandated that psychiatric services of one sort or another be provided inside jails.

## TREATMENT SETTING AND CLIENTS

The psychiatric unit for which I worked was charged with providing such services. The treatment unit was located within the jail itself, and had up to 50 inpatient beds and 150 outpatient beds. The mission of the unit was to provide short-term services geared toward interrupting psychoses. Treatment was thus very much slanted toward crisis intervention rather than personal growth. To this end, the program used psychotropic medication, casework, and group activity therapy. My job was to develop and oversee the group therapy program, whose function was to support the stabilization and re-socialization of our clients.

It was obvious from the beginning that some creative thinking would be required in order to pull this off. We were sure that "traditional" group therapy (where the group carries most of the responsibility for the group process) would be impossible with the majority of our clients. Group therapy with psychotic persons is a questionable undertaking at best, but this population was truly special. They were more angry, aggressive, and disruptive than a typical psychiatric population.

Both my boss and I believed that some form of group program would be our best shot at rapid treatment, and we wanted to make it work. We decided on an approach based on the varying levels of integration of our clients. Here's how it would work: After sorting our clients according to how "together" they were, we would use different group treatment strategies with the clients at different levels. As the level of integration and stability of a given client improved, the client would be "promoted" to the program at the next higher level.

We divided our people very roughly into three subgroups. The first was made up of those at higher levels of integration, persons whose psychoses were already under control. This subgroup could function reasonably well in traditional group therapy. That is, they could pay attention, could understand that the therapy group was working on something together, and could participate in and support the group process.

The second subgroup was a notch lower in level of integration. They were those who were still actively psychotic, but who were not acting out a whole lot. Although they were less capable than the first subgroup of contributing to a group process, we

decided they might do OK in a modified group program in which the leaders provided most of the structure, and in which tasks were very concrete.

The third subgroup is the focus of this article. These people were acutely psychotic, and were acting out in bizarre and disruptive ways. The disruptive behaviors encountered were quite varied. Examples are: screaming, threatening others, hyperventilation, bizarre gesturing, weird noises, incoherent babbling, throwing furniture, eating small articles, pacing, sexual acting out, etc.

This subgroup was the "creme de la creme" of our clients, the most impossible of a generally difficult crowd. Traditional group therapy was out of the question here, because there was in these individuals little apparent capacity to support a group process. To the contrary, their behavior had the effect of undermining safety and continuity, and so preventing the emergence of a coherent group process.

Over the course of a couple of years, we did succeed in developing a specialized type of treatment group which was fairly effective with these clients. It helped us to make contact with them, dramatically reduced angry acting out, and served to familiarize them with group treatment in general. Just as important, our clients typically had a really good time here, leaving them with a readiness to respond well to the rest of our program.

The way it worked is probably best illustrated before it is talked about. The sketch which follows is a post-facto recreation of critical parts of a meeting which actually occurred.

### VIGNETTE

(A class is in progress. A Teacher in suit and tie stands at the front of the room near a blackboard. The teacher's dress contrasts with the jail coveralls of the students, six disruptive clients. An Assistant sits alongside the clients who are in chairs lined up facing the board. The Teacher has already explained that this is a special class. Its purpose is to help clients learn about Disruptive Behavior. The Teacher has begun a lecture. He is pacing rapidly at the front of the class, and using energetic, dramatic, sweeping gestures as he talks.)

Teacher: "... so disruptive behavior is anything you do that stops something that

is going on. Kind of like throwing a monkey wrench into the works, you know. Or knocking the train off the tracks. Anything you do that messes up something that's happening.

(Teacher writes "It stops things" on the blackboard in large script. Some of the class are paying attention. Others are not. Several are chain-smoking cigarettes, and a heavy tobacco haze hangs in the air. Michael, a large bearded man, is pacing slowly back and forth at the side of the room, gesturing to himself occasionally, and seemingly oblivious. The Assistant is watching Michael, but is silent.)

Teacher: "And we all do it. Every one of us. Each of us has to be able to stop things we don't want. What would happen if every time a salesman came to your door and tried to sell you a vacuum cleaner, you couldn't stop him? Pretty soon you'd have twenty vacuum cleaners, right? And no money. (Someone laughs.) You have to stop that guy somehow, or he's gonna sell you another vacuum cleaner. Yeah. We all need to stop some things. If we couldn't, we wouldn't live long. That means we all have to disrupt something at times.

(Teacher writes "Everybody disrupts" on the board. Michael has switched positions, and is now pacing in the front of the room, back and forth between the class and the Teacher. The Assistant continues to watch him.)

Teacher: "Yep. We all do it. And everybody does it a little differently. Everybody has his own particular style. I do what works for me, and you do what works for you. We spend our whole lives getting better and better at stopping things in our own particular way. And then, nobody can do it better than we can.

(Michael is standing alongside the Teacher. The Teacher writes "You do it your own way" on the board. Michael picks up a piece of chalk and begins to make strange markings on the board. The Teacher stops speaking in mid sentence. Turning slightly so that his face can be seen by the class, the Teacher adopts an expression of shock and disbelief. His mouth drops open. He watches with bulging eyes as Michael's scribbling moves from the blank part of the board to his notes. Michael writes over the

Teacher's notes with his own marks. The class is watching with interest. This goes on for a few seconds.)

Teacher: (brightly) "Hey! This is fabulous! This is great! Hey Michael! Is it OK if I use what you're doing as an example of something?"

(Michael looks at him blankly.)

Teacher: "I mean, can I talk to the class about what you're doing?"

Michael: "Yes."

Teacher: "Good. Go ahead and write if you want to while I talk to the class a minute. (Turns to the class.) See, when Michael comes up and starts writing on the board, he just stops me dead in my tracks. I mean, there's nothing I can do then. Everything just stops. So this is an example of what?"

(The class looks attentive, but nobody says anything.)

Teacher: "It's Disruptive Behavior! See? That's what we're talking about here! It stopped me cold! It's brilliant! Nobody but Michael could do it that perfectly in just that way! That's his own particular style. He just came right up and took over. He pulled the plug on my whole lecture! (Turning again to Michael) Michael, that's terrific! That's a perfect example of what we're learning about here. (To the class) And examples like this really help to make things clearer. We couldn't do this class very well without them. Class, let's give Michael a hand!"

(The Teacher and Assistant begin to applaud loudly. The rest of the class follow suit. The Teacher whistles and hoots, as do some of the class. Michael looks confused, but quite pleased with all the attention. He has a big smile on his face. Some of the others are smiling too.)

Teacher: "This reminds me of something I forgot to tell you guys. Michael, how does it feel to be standing up here with everybody paying attention to you?"

Michael: (Still smiling.) "It feels good."

Teacher: "Right! It feels really good to get attention.

That's something we all need. And that's the next point I was going to make: Disruptive behavior gets attention! (To Michael) - You can keep writing if you want while I go on with the lecture."

(The lecture continues. Michael does keep writing for awhile. The Teacher continues the lecture too, using Michael's behavior to illustrate his points. After a while, Michael goes back to pacing. Others disrupt from time to time. But each disruption is incorporated into the lecture, and so does not really disrupt. The Teacher makes sure that each is labeled as both a disruption and as a contribution, and acknowledged with energetic applause. As the meeting careens chaotically onward, clients seem to become more energized. It gets noisier. The leader is forced to speak more loudly, and to use more dramatic gestures to keep the class's attention. A feeling akin to cohesion begins to develop. As it does, Michael's disruptions begin to predominate, as if he is in some sense taking on the role of spokesperson for the group.)

Teacher: "... so you see, disruptive behavior isn't good, and it isn't bad either. Not good or bad. It's just a skill that you can use for any purpose you want. Kind of like you can use riding a bicycle or playing the piano for any purpose you want."

(The Teacher notes the point "It's a skill" on the board. Several points are already listed there. While his back is turned, the Assistant gets up from his seat, and begins in an exaggeratedly sneaky way to approach the Teacher. The Teacher is seemingly unaware of this.)

Teacher: "Everybody disrupts a little differently, and it takes a lot of practice to get it just right. I've been doing it my way since I was a little kid, so I'm the champ at doing it my way by now. And you're the best at doing it your way."

(The Teacher begins to write again. The clients are watching with mild interest. The Assistant suddenly snatches the chalk from the Teacher's hand.)

Teacher: (Startled.) "What? What are you ..."  
(The Teacher has an expression of shock on his face. With a devilish smile, the Assistant scribbles in large loopy strokes over the notations on the board.)

Teacher: "Hey! Stop that! You can't ..."

(The Assistant scribbles furiously, completely obliterating the Teacher's notations.)

Teacher: (loudly.) "Stop it right now!"

(The Assistant stops, but continues to smile smugly. The group members have fallen into a tense silence, their attention riveted on this confrontation.)

Teacher: "Just what do you think you're doing!? It took me a long time to write that stuff, and you messed it all up! What's going on?"

Assist: "Um ..."

(The Teacher grabs his chalk back from the Assistant.)

Teacher: "There's no excuse for this! You put us way behind schedule! We weren't going to get finished as it was! That was a very immature and inappropriate thing to do. You're acting like a child."

Assist: "I ..."

Teacher: "We're supposed to be setting an example for these people, you know. We're the leaders, for chrissake, the teachers! What kind of example do you think you're setting? What are they gonna think about us now? What are they gonna think about YOU? Why did you do that?"

(The Assistant's smile is gone. It has been replaced with an expression of utter stupidity.)

Teacher: "Well? Why did you do it?"

Assist: "Do what?"

Teacher: "You know very well what! You messed up my notes and you messed up the class! Now, why did you do it?"

Assist: "Um ... I dunno."

Teacher: "What?"

Assist: "I dunno ... I'm sorry."

Teacher: "You don't know. You're sorry. Just great."

Well, go sit down and let me get finished here, OK?"

Assist: "OK."

(The Assistant returns to his seat. Mumbling irritably, the Teacher begins to erase the blackboard. As soon as his back is turned, however, the Assistant begins to sneak up again. Some of the clients titter nervously. One whispers "NO!" The Assistant conspiratorially puts a finger to his lips to quiet them. Back still turned, the Teacher picks up the chalk.)

Teacher: "As I was saying ..."

(The Assistant again snatches the chalk, and scribbles over the newly erased surface. The Teacher's mouth is open again in exaggerated dismay. Some of the class are laughing. The interaction takes on a more clearly farcical tone, like a burlesque comedy. The atmosphere now has a "pretend" quality similar to that at pro wrestling matches. The Teacher is an excellent dupe. He is rigid, authoritarian, and easily flustered, making him easy pickings for the Assistant. The Assistant's disruptions appear to be out of his control. Each of the Teacher's questions about reasons is met with blank looks or denial from the Assistant. The Teacher repeatedly criticizes the Assistant for not being a better role model. But among the clients it is apparent that there is much tacit support of the Assistant. The meeting continues.)

Teacher: "You're supposed to be helping me here, not screwing everything up! You're my assistant. That means you assist me, get it? It's not all that complicated! What I want to know is, what's got into you?"

Assist: "You don't really want to know."

Teacher: (Irritated) "I'm telling you, I DO want to know. That's why I'm asking you."

Assist: (To the clients, pointing his thumb at the Teacher) "He doesn't really want to know."

(Some of the class laugh.)

Teacher: (Angrily) "Now look!" (Sighs and pauses, apparently collecting himself.) "OK. Listen. I'm sorry I got mad at you. But I want you to know that I really am interested in what's

going on with you. If I've done something that made you mad, tell me. I promise I'll listen."

Assist: "Mmm. You won't like it. Are you sure?"

Teacher: "Yes."

Assist: "All right. I'll tell you. You're always hogging the spotlight, and I'm sick of it. You're always getting all the attention. Everything is always about you. Other people want to have some air time too, you know. (To the class.) Am I right?"

(A couple of clients agree.)

Teacher: "Oh. Um ..."

Assist: "You love to hear yourself talk, talk, talk, and it pisses me off! You think we want to listen to you ALL the time?"

(The class are watching intently. The Teacher is silent for a moment, and appears to be thinking about what the Assistant has said.)

Teacher: "I didn't know you felt that way."

Assist: "Well you know it now."

Teacher: "I didn't mean to be stealing the show. I was trying to be helpful. (To the class.) And I didn't mean to be making any of you mad either. It's OK with me if you, any of you, have a turn up here. Anybody who wants to."

Assist: "You're kidding!"

Teacher: "No. I mean it. I'm glad you told me you were mad, because I didn't know it. I couldn't figure out what the hell was going on around here. I like it better knowing what was behind all that stuff. I don't want you to be unhappy. I want this to be a good class for everybody. I'll share the spotlight, if that's what you guys want."

Assist: "You mean it?"

Teacher: "Yeah. Don't be mad, OK?"

Assist: "OK."

Teacher: "Friends now?"

Assist: "Friends."

(Assistant and Teacher shake hands and smile at each other. The Assistant sits down, and the class continues. There are many more disruptions, but they have a more playful quality now. Members are invited to take a turn at teaching if they want. Some of them do. Everybody has a real good time. When time for the class is over, people don't seem to want to leave.)

## DISCUSSION

It is important to remember that this specialized activity is just one part of a larger program. It is designed to serve a single purpose within the larger program. That purpose is to make contact with psychotic and disruptive clients. Here is the rationale:

The word "abuse" crops up quite often in connection with jails. Of course, the offense which led to the inmate's incarceration and legal charges may have been abusive to others. But the inmates are not the only abusers here. Examination of the personal histories of inmates very commonly reveals their own severe childhood physical, sexual, and/or emotional abuse. The atmosphere of a great many jails is itself abusive, a consequence of the built-in disparity in status and power between jailers and inmates. Legal and societal abuse is obvious as well. For example, the lower socioeconomic classes are much over-represented in most jail populations. This is not primarily because they are charged with more crimes. Rather, the built-in inequities of our legal system guarantee that people with more money, power, or cunning can bail themselves out, leaving those with meager resources behind.

The bottom line is that there exist in many inmates characterological strategies which serve to help them cope with abusive authority. Often there is a large store of anger and mistrust which is expressed indirectly. Presumably this is because direct expressions have in the past been severely punished. In the individuals we sometimes label as psychotic, these expressions are likely to have a bizarre flavor. Often they take the form of disruptive behavior. That is, it happens that when persons in authority try to engage the client, the client deflects and defeats the effort in a strange but effective way. As a result,

these clients are quite difficult to reach. The efforts of the therapist, even if he or she has only the best of intentions, are repaid with an experience of frustration.

This is the context within which the methods of the "disruptive group" were developed. The goal is to get through the disruptive behavior to make contact. The Hakomi technique of "taking over" makes sense as an approach. That is, to the extent that clients can be assisted with their protective disruptions, they will be free to experience whatever is underneath. They may also feel more understood and accepted.

Taking over the disruption is the plan, then. In a more traditional group setting the leaders might let differentiation of the group proceed until a subgroup carrying the disruptions emerged. At that point the disruptions might be taken over by the leaders. But our early attempts to work this way with our population bombed badly. The disruptions were so powerful that the groups self-destructed before they differentiated. And members were often so disoriented that they could not correctly interpret what was going on in this "therapy group." In one early meeting I was punched squarely in the nose by a young man who thought I was a customs agent arresting him at the border. For these reasons we had to conduct the groups in two stages.

In the first stage, the leaders' efforts are directed toward keeping things from blowing up long enough for group process to get started. Specialized techniques are used. The meeting is presented as a class. Because almost everyone there has had experience with school, this is a setting which can be grasped even by very disoriented clients. The "Teacher" presents a lecture on disruptive behavior. The facts presented are quite relevant to the lives of class members. But information is not really the point. The lecture serves as a means of deflecting disruptions by reframing them paradoxically as cooperative contributions. Thus the lecture is used as a tool to temporarily protect the emerging group process. The points of the lecture are such that they can be presented in any order and still make sense.

Because disruptions are consistently deflected, there is a tendency for members to emerge from the cover of their automatic defensive behavior to regroup. In a sense, they have to "come out and take a look around." When this begins to happen, the leaders sense that they are more present.

Clients are alive now. So is their anger and mistrust. It's time for the second stage to begin. Now the group's disruptiveness is taken over by the Assistant. The Assistant will have been observing the primary disruptors carefully to get a reading of both the behaviors and their function. The time comes when the Assistant judges that there is enough information to proceed. Then the Assistant begins disrupting in the same way, taking over the disruptive behavior.

In the vignette above, the judgment of the Assistant was that client Michael was both angry about the intrusiveness of the Teacher's lecture style, and jealous of the attention that the Teacher was getting. In scribbling on the board Michael was caricaturing the teacher, as well as usurping the group's attention. And because the group was allowing him to serve as a spokesperson, it followed that to some degree they shared his sentiments.

The leaders play out the disruptive behavior, being careful to minimize threat by keeping the atmosphere playful. Then the Assistant models a more direct expression of anger for the clients. The Assistant is conveying the message, "See? It's safe to say it in words, too." Finally, resolution of the conflict is modelled by both leaders.

## LIMITATIONS AND CAUTIONS

The methods outlined worked well for the purpose for which they were designed. Clients tend to be more cooperative and open after a positive experience with the "disruptive group." But some things should be noted by the therapist anticipating working with such a population.

### 1. Physical danger.

There is undeniably some risk in working with people who are, by virtue of their mental condition, unpredictable, especially when some have documented histories of violence. The best protection against mishap is to know each individual with whom you are working. This means knowing both their histories and their current condition. The disposition of an acutely psychotic person can change quickly. It is quite important to screen all members just before each group meeting. There is no joy in discovering when your meeting has already started that one of the members is violent.

### 2. Stress.

It is also true that the inherent risk creates much stress for some people. Those for whom this poses a serious problem shouldn't do this kind of work.

### 3. Energy requirements.

Running a group like this is at times like riding a bucking bronco. If the leader expects to stay in the saddle, he or she will have to out-produce the clients. The group won't work if one of the disruptive members gets control. When that happens, safety goes out the window, and nothing good will come out of it. This work is draining on the leaders. One-hour sessions can seem like forever.

### 4. Staff objections.

The paradoxical methods involved may evoke objections from staff overinvested in control. Staff who object are generally those who favor an authoritarian stance toward problem clients. Behaviorally oriented staff may see the applause for disruptions as "reinforcing" problem behavior. (Ask them what was "reinforcing" it before the applause started.)

## REFERENCES

Kurtz, Ron. *Body-Centered Psychotherapy: The Hakomi Method*. LifeRhythm Press, 1990.