PROFESSIONAL-THERAPEUTIC EXPRESSIONS USED BY CRIMINALS AND THEIR CONNECTION TO THEIR WORLDVIEWS

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Abstract

The present study deals with the use of expressions from the professional therapeutic jargon by criminals in prison and in rehabilitation and the connection of their language to the worldviews of the speakers in each group. Phenomenological interview was used, interviewers encouraging talk about the topics on which the study focuses but refraining from directing interviewees. Ten prisoners and ten former prisoners in rehabilitation were interviewed. Findings indicate that the discourse of both groups contains expressions from the professional therapeutic jargon; rehabilitees chose to use more professional-therapeutic expressions than prisoners, however the meanings they attribute to these expressions is different and attests to a difference between the groups in the components of their worldview. The prisoners' group use of expressions indicates that they did not internalize nor do they identify with the meaning of theses expressions, whereas in the rehabilitees' group, the use of these expressions creates change in components of their worldview attesting to their leaning towards normative society and seeing it as a possible future avenue.

Key words: *language, criminals, worldview, therapeutic jargon*

Preface

Language and worldview

Language is most meaningful in human existence. It is a tool for communication, it helps express thoughts and it is used to achieve various goals. According to the language relativity perception based on Whorf's (1956) hypotheses, humans engage in verbal interpretations and analyze the world, language shaping their worldview (Cardozo-Freeman 1984). In other words, language determines individuals' ways of thinking and behavior patterns, thus creating their world (Johnstone 2012). Language induces speakers in a given society to reflect upon the world using similar ways of expression, to understand it through shared verbal expressions; hence societies with different worldviews will have meaningfully different languages and conceptions (Alatis 1992).

The concept of the relativity of language is widely accepted in the psychological-therapeutic world however, it is controversial among modern linguists. Linguists assume that indeed language has some influence on worldview, but they doubt the assumption that language unequivocally determines patterns of thought. According to the linguistic approach, when expressions missing in a language are needed, ways are found to express them by borrowing from a foreign language or by creating new terms (Muchnik 2002).

According to the linguistic approach, language reflects the worldview of the speakers (Halliday 1977), their values, beliefs and ideas. In fact it expresses linguistically the individuals' internal world and uniqueness (Hertzlert 1965, Dean-Brown 1992); hence linguistic research will lead to understanding individuals' worldview.

The above two approaches are opposed, but according to Deutscher (2011) they could complement each other. He argues that language reflects its' speakers culture and influences they way in which they think about and perceive the world (Deutscher 2011); there is mutual influence between the worldview of a society and its language (Schaff 1973). Furthermore language, culture and the meeting point between them are created by means of discourse; each time the discourse changes, crystallizes and creates them anew (Sherzer 1987); discourse influences worldviews and is influenced by them.

Change in language patterns

Special language patterns can be discerned among different nations as well as among different groups in a nation speaking the same language. Groups may be different and unique in certain components from other groups in the same society; they have their own needs of cohesion and cultural belonging expressed in their members' language (Bernstein 1970, Cook-Gumpertz 1973, Maurer 1981, Macleod 1993, Gideon 2003, Einat, & Livnat 2013).

It is known that when languages come in contact with each other, various linguistic components interpenetrate, since encounter between different speakers influences their language (Weinreich 1968). Often penetration of components results from imitating the others' language; in time, with recurring usage they become the speakers' own components. What starts as an imitation turns into self expression, speakers integrating borrowed language patterns into their own way of producing meaning (Bathkin 1981). The more speakers use borrowed language patterns and create a world of discourse, the easier it becomes to recreate this world time and again until the mode of perception becomes natural and right (Johnstone 2012).

Furthermore, people often join a new group, changing their beliefs, attitudes and basic perception of reality. Conversion from one society to another is expressed in change in the individuals' world of discourse and adoption of a new one (Heirich, 1977, Einat & Livnat 2013). Among changes that occur in the world of discourse when moving into a different society, change occurs in the converts' vocabulary and concepts (Sapir 1951) alongside with change in the past biography which is reconstructed to suit the new world of discourse, vocabulary and rationale of the converter (Berger & Luckman 1966, Taylor 1976, Beckford 1978). These changes are important since mastery of the language is a necessary condition for successful socialization in a new society (Cardozo-Freeman 1984, Timor & Weiss 2008).

Thus language can become a decisive tool in changing worldviews, since it is through language that society clarifies the behavior and norms it expects, its values and worldviews (Schutz & Luckman 1974, Gideon et al. 2010); furthermore it is through language that individuals undergo socialization processes and become part of the world around them.

Criminals' language patterns

Society, interested in maintaining its' values and norms, responds with hostility towards deviants. Criminals sharing a common value system and behavior patterns coalesce into a delinquent sub-culture with a group identity. As part of this group identity, they share characteristic speech patterns which strengthen belief in their values and behavior (Maurer 1981). Criminals are a threat to society which opposes them, thus engendering increased cohesion among the criminals' group and accelerating the use of their unique language (Johnson 2000) that expresses a worldview which dictates members' behavior (Maurer 1981).

When entering prison, criminals experience an oppressive framework that represents society and threatens their status. Hence they feel the need to unite vis-à-vis the establishment and get together against the prison staff (Andrews 1980). Their cohesion is expressed among others, in unique language patterns which help them communicate with each other against the prison staff (Encinas, 2001, Einat & Livnat 2013) and belong more to the prisoners' team (Einat 2005). The feeling of belonging enables prisoners to find ways of influence in prison which is their home for the time being; furthermore, it answers their need to use scathing, hurtful expressions against the establishment and its representatives, expressing their negative feelings towards them (Irwin 1985). These scathing, hurtful expressions are part of the prison discourse, built on a permanent power dialogue (Goldberg 2014).

In contrast, when prisoners enter a rehabilitation institution, their life circumstances begin to change; in this process changes occur in their worldview statements, behavior and language (Timor & Landau 1998, Timor 1998, 2006). Timor examined the process of rehabilitation of criminals in Yeshivot (Jewish institutions focusing on the study of religious texts) for Hozrim b'Tshuva (newly observant Jews, penitents); his findings point to the central role of language in criminals' rehabilitation.

Criminals become aware of their past language, of their change of language while returning to religion and its influence on their thinking, worldview and behavior. They use certain linguistic means to clarify to themselves and to others their worldview and to obtain social recognition and status equal to that of the regular yeshiva students.

When individuals enter a rehabilitation program, they are left with no meaningful social contacts; to preserve their self-image and social identity, they feel the need to create social connections in the new framework (Berger 1979). They connect with the rehabilitees around them and with the professionals accompanying them in the process. The speakers' ability to use language to suit their life-circumstances helps them in the transition and adjustment from one society to another (Heirich 1977); hence it is expected that rehabilitees' language patterns will have a similar hue.

The importance of language in the treatment process

Words are of central and unique importance in psychological treatment (Amir 2012); they are the means to reach the different experiences of the person being treated (Raufman 2015); as already mentioned by Lacan (1975), mental processes connected to language, speech, linguistic representation and understanding are of utmost importance for the person in treatment.

When in the therapeutic session the discourse of the therapist and that of the person treated and what each represents cross each other (Halevy Spero 2010) a verbal path is created, enabling the therapist and the treated person to express the essence, phenomena or ideas they wish to think about, discuss or analyze (Shefler 2011).

Furthermore, the therapist sees in increasing linguistic wealth a factor promoting therapeutic efficiency, as it enhances meaningful communication and most importantly helps illustrate thoughts and feelings of the person in treatment. Verbal expression is a kind of tool that enables to maintain for a while the activity of the mental experience; such expansion enables more efficient treatment, since mental resources involved in difficult experiences (Hadar 2001) may be released.

Moreover, speech is a way of preventing hostile, aggressive or destructive behavioral expressions. Albeit verbal expression may increase pain since it sharpens the experience involved in remembering (ibid. ibid.) it may serve growth, it may become a turning point raising the treated persons' awareness about their condition (Raufman 2015); that's how the treated person's own truth will be expressed, even created (Amir 2015).

The importance of using words is expressed also in Benisti and Ronel's (2014) study of the *Shalhevet* outreach program for prisoners' rehabilitation in which criminals construct their own personal stories using words to illustrate their condition and raise consciousness about parts of their story they wish to emphasize. Benisti & Ronel (ibid.) note that meaningful changes in criminals' worldviews occurred following the program; they moved from self-centered survival oriented perception of the world to a wider, more positive one. Project participants' quotations indicate that the people treated are aware of the importance of speech and its contribution to the therapeutic process; they are also aware of the need for clear and precise expression when, as part of the project's activities, they transmit messages in schools. Moreover, prisoners who underwent treatment mention the influence of therapists' words on them, their contribution to the therapy itself; they are aware that the elements of the therapeutic language promote the therapeutic process.

Therapeutic expressions in the therapists' language

Psychologists, criminologists and social workers are therapy agents constituting a professional group; they tend to attribute unique interpretations to words and invent new expressions which enhance their social solidarity and mutual recognition (Arnold 1990). Therapists raise the awareness of the persons they treat about their condition, are interested in and examine various ways of coping (Avissar 2011, Einy-Alhadeff 2011, Benisti & Ronel 2014). As part of this process, therapists use expressions from

the professional-therapy jargon among themselves as well as when in contact with the persons in their care; hence such expressions often seep into the language of the latter.

In this study we shall refer to expressions from the professional-therapy jargon that seeped into the language of criminals in contact with psychologists, criminologists and social workers. Among the more conspicuous expressions are *awareness, coping, normative*; concepts such as *life problem / disease*, namely the perception of criminality as part of a life problem; *baby image*, the perception of rehabilitees as babies making their first steps in the world. We shall refer to these expressions and examine their meaning and the ways in which they are uttered.

Research Goal

This study intends to examine the use of expressions from the therapeutic jargon in the language of criminals in prison and of criminals in rehabilitation. The assumption is that it is possible to compare and find differences between these two groups. The study will examine the connection between the characteristics of these expressions and the worldview of criminals in prison and in rehabilitation, how are they expressed and what is the meaning attributed to them.

Research Method

Interviewees

Twenty male criminals aged 35-47, born in Israel or immigrating up to the age of ten, were interviewed during 1998-2000. Ten were prisoners and ten were former prisoners residing in a rehabilitation hostel. All criminals were randomly chosen and all agreed to be interviewed. All were in prison for at least six months, attended at least elementary school, some even finished high-school. The socio-economic background of all interviewees is low to middle. No white-collar criminals were interviewed. According to Prison Authority's requirement, no prisoner was asked about the offense they were charged with, however quite a few willingly talked about why they were in prison.

Research Procedure

Phenomenological interview, in which the interviewer encourages interviewees to talk about the topics the study, focuses on and refrains from directing them. Each interview was conducted and recorded separately for about thirty minutes in a place specially designated for the purpose by the prison or hostel authorities. Interviewees were asked guiding questions about how they came to be criminals and about their situation in their current environment. These were but a few guiding questions intended to enable interviewees to talk as uninterruptedly as possible with a view to obtain valid data about their representative language. In this way interviewees expressed themselves freely and included experiences and emotions that attest to emotional involvement that indicates the production of natural discourse (Labov 1972). When interviewees felt the need to talk about certain experiences they underwent, they talked in any way they wished, without being interrupted by the interviewer. Each interviewee decided about the contents of his story, revealing in the process hidden contents that would not have been uncovered in a structured interview (Kvale 1996). The texts' lengths and the duration of recordings were similar for all interviewees. The whole text produced by each interviewee was recorded, including stops which were marked by three dots, repetitions and inaccuracies characteristic of spoken language. Interviewees did not know in advance what will the questions be, hence they could not prepare answers beforehand. As mentioned, all interviewees agreed to be interviewed; their names were changed in order to preserve their privacy and prevent identification.

Findings

In this part we shall refer to therapeutic expressions in the context of the interviewees' words in order to establish the difference in the discourse of criminals in prison from that of criminals in rehabilitation and their meaning for their worldviews. Expressions examined included all forms and verbs connected to them.

Awareness

Awareness helps individuals direct their behavior and overcome obstacles on their way (Addad 2008); hence people in the caring professions, like psychologists, criminologists and social workers, emphasize the importance of awareness in the therapeutic and healing process. The verbal expression attributed to experiences creates a lingual net through which subconscious areas are transferred to consciousness; this lingual net influences the soul and the feeling of self (Hadar 2001). In this way the individual may experience things in a new form and replace injured and missing parts with something different from whatever was there in the past (ibid.).

Moreover, if the process a person undergoes is not a conscious one and it is not expressed by means of words, it will be impossible to reflect upon it, to learn from it (Ogden 1990). A high level of awareness helps people contemplate and understand the causes, motivations and implications of their actions; thus, with the help of self-awareness the mental state of the person in therapy can be assessed and replaced by a stronger and better one. Only one from among all interviewees in prison referred to awareness. He completed several imprisonment terms and underwent a drug-weaning plan as well, in the context of which he said: "today, because I am *aware* of the program and all that, alcohol too is a drug". He does not refer to his inner awareness but to awareness about the contents of the plan he underwent.

In contrast, in the words of interviewees in rehabilitation there is reference to their inner consciousness; they recognize its importance and the need for awareness appears in their words already at the beginning of the rehabilitation process. One person, who started just two weeks before at the rehabilitation hostel, said: "here we are taught how to let it out. Let's say, I, in me, there is another person. I'm not *aware*, what's that, *aware* to me, but I'm not *aware* of a good thing I have. I know only about bad". His words are not uttered in continuity; they attest to hesitation and lack of confidence in the existence of good in him. Along with that, he is only at the beginning of the rehabilitation process, but he already internalized that one should be aware about what goes on inside oneself.

A more veteran rehabilitee refers to the meaning of awareness. He said he arrived to the rehabilitation hostel mentally ready for therapy; he makes a distinction between *readiness* and *awareness* – it's to better know myself, know my qualities, how I express feeling, anger, joy. Express myself better, know myself, that's the *awareness*".

When criminals are at the end of the process in the rehabilitation hostel, they attest to the importance of their self awareness and its' contribution to their lives, as can be seen from the words of an interviewee who completed two years of rehabilitation in the hostel and attends a support session once a week: "I don't have to be here, yes, but I am still here, because I know that I am still among the graduates who get treatment, support… I get more self *awareness*". Subsequently he refers to the contribution of the hostel to the rehabilitation of his life; an important contribution, he notes, is his ability for self awareness: "I am terribly grateful to this house, that is, this house gave me a lot: *awareness* to accept myself as I am, with my faults, my advantages". He perceives awareness as valuable since it helps him to look inside himself, to see himself in a different light than he did in the past.

Therapists endeavor to help criminals raise their inner awareness as a means of development, since the higher the awareness, the more a person can benefit from it. It seems that when rehabilitees use the word *awareness* and its derivatives, they internalize its meaning and begin to crystallize a new way of perceiving themselves which is different from the self-image they possessed before the rehabilitation

process; as Ogden (1990) states, awareness makes them think about the process they undergo and learn from it.

Coping

In order to live better, we have to be aware of changes occurring in our lives, aware of problems that come up from time to time and most importantly we have to know how to cope with them. According to Gans (1952) when people have to cope with various problems they develop reactions that fit the social reality they live in; the same thing happens when they have to adapt to a new condition.

Criminals entering prison have to adopt new codes of behavior (Gideon et al. 2010) and cope with daily life difficulties in prison. These difficulties are called *imprisonment pains* (Sykes 1958) and are characterized by lack of privacy, crowdedness, heterogeneous population, prison hierarchy, isolation, minimal activity, lack of support, limitation of freedom, lack of stability, confusion between life in prison and outside of it and worry about the future (Toch 1977, Parisi 1982).

Nevertheless, interviewees chose to refer to the way other prisoners cope, not the way they themselves cope. For example, one prisoner said about another prisoners who was using drugs: "Man, I see he is using drugs; at first I pity him, than I don't, since I see that he… he wants this… you see you can't *cope* in this arena, so get out of this place". The interviewee used second, not first person when using an expression from the professional-therapeutic jargon indicating that personally he did not identify with these things.

In the matter of drugs, another interviewee said about the prison staff: "I don't think they have the proper tools to *cope* with weaning here. Ten or fifteen guys sit, this one states that he is clean and he is clean and he is clean… from all fifteen who said 'clean' I know nine who just two hours ago sat and smoked with me, they declare clean".

Only one interviewee in prison used the word *cope* in the context of his own personal coping. He refers to his coping with society and the way it dictates norms: "I say, in my place I am better than many… today I arrived at a situation that I say – the *coping* itself… to do what I really feel, what I want, not what society dictates to me". Maybe he does not want to expose his attitude to the prison team; maybe he includes his attitude towards the team when talking about society in general. Furthermore, that same prisoner refers to his difficulty to cope with labeling but uses second person to create distancing by words: There were imprisonments I decided to quit, to hang my shoes and stop crime, stop drugs, stop all these things. It's hard. Society is very tough. Society very much does not accept us… you get a lot of negative in general, it's very hard to *cope* with negative. You want to work, you can't get a job because you are criminal and you have a criminal past". However, since this criminal completed many imprisonments, he also underwent a rehabilitation plan in prison and internalized the need to cope even if it did not penetrate into the way he managed his life: "I understand that ordinary people outside too have difficulties and frustrations… so I understood I too have to bear all these difficulties, I too have to *cope*. Maybe a bit more than everybody, but I have to *cope* like everybody else".

When criminals start rehabilitation in various programs, they are required to adapt to a new situation which involves coping with various difficulties. It is known that caregivers examine ways of coping that may help their patients in various situations (Avissar 2011, Einy-Alhadeff 2011, Benisty & Ronel, 2014) and use them in their encounters.

Thus, when criminals are in a rehabilitation process, they meet professionals who help them learn ways to cope with their difficulties and with changes in the way they experience their self, so that they will be able to adjust to life in society at large (Benisty & Ronel 2014). During this process they hear the important concept of *coping*, use it themselves and even perceive it as meaningful in the process of their rehabilitation (ibid.).

In the words of a rehabilitee who fulfilled his dream to become a father figure in the hostel, one can discern that he is coping with inner struggles while abandoning his former worldview to adopt a new,

normative one: "I had the dream to become a father-figure, I said to myself – this way I will close a circle, through this place. I know where I come from and what I became today. Once again, it was not easy at all for me, especially as an older person, to start *cope* with these feelings and I already said, I have to become a father-figure here, to give people hope, faith that it is possible, since I myself know I came here, I did not believe I could make it, *cope* with life outside". The realization of the dream helped him cope with his confusing and difficult feelings in the process of transition from the criminal world to society at large.

Furthermore, rehabilitees cope with the necessity to severe past contacts with criminals, but they often perceive this severance from their criminal friends as an escape from coping, as the words of one of the rehabilitees indicate: "There are a few hostels in the country, like, I was offered here, there, there, there and I asked why not in Tel-Aviv. I was told – because you go back to your city… so what did I do, I escaped from the city, I escaped from *coping*".

In addition to having to cope with inner difficulties, rehabilitees have to cope with the external difficulty of the social tendency of long-term labeling of people defined as deviants (Shoham & Rahav 1983), even if they underwent rehabilitation, wish to abandon their criminal past and become part of society. The inner struggle of a rehabilitee whether to enroll into a professional course for fear of coping with labeling refers to this difficulty: "The doubts I had before the course – how will I be seen, how will I be accepted, will I be able to *cope*…will I not be able to *cope*". He also resents the fixated labeling in television programs; they depict criminals "like incorrigible people, it makes me feel bad, as if, well, I don't think there is a person who is incorrigible… anyway there is stigma in quasi normative society, it's terribly difficult for us to *cope* with them, all the time we live in some kind of fear that our past will be discovered". He includes the word *stigma* in the same sentence, although it belongs to the area of the professional-therapeutic jargon; also the word *normative*, which will be discussed further on. The integration of these words in one sentence, while in the background the rehabilitee keeps repeating the word *coping* attests to his having adopted and internalized elements from therapeutic language.

He goes on to note that rehabilitation contributed to his ability to cope: "Through the pressure we learned to absorb, to bear the pressure of this place, we know how to *cope* outside too in face of our daily-life pressures". One of the rehabilitees ends his interview with a sentence that refers to the need to cope with internal and external difficulties: "I only pray to God to give me strength to *cope* with all this difficulty".

Caregivers in prison and in rehabilitation frameworks endeavor to help inmates cope with various situations; moreover, they help criminals, wherever they are, understand what is coping, provide tools for coping and endeavor to imbue them with the importance of personal coping in real life as a means to gradually grow and develop in a changing world (Hadar 2001). Understanding the importance of coping and its' immanent possibilities, the expression *coping* penetrates the language of persons in treatment and is accompanied by internalization of its meaning in the rehabilitation process.

Being normative

In professional criminal language society at large is called *normative*; the individual who does not fit society's criteria is called *deviant* (Becker 1966, Shoham & Rahav 1983, Hirschi 1987, Shoham et al. 1987). Therapists working in prison and rehabilitation, among them criminologists, psychologists and social workers, use the word *normative* and its derivatives when talking to the people they treat, wishing to differentiate between the normative and the deviant. This word can often be found in the language of criminals in prison and in rehabilitation; its use creates segregation between society at large and its deviants. In other words the use of this expression and its derivatives indicates segregation and cataloguing speakers make between the different groups.

A prison interviewee using the expression *normative* indicates the difference in personal responsibility and boundaries of the whole group: "the difference between me and a *normative* person is for example that he can drink a glass or two at a party and still get up for work next day, and I, I don't have the

stop". Further on he describes his perception of the normative person: *normative* for example is someone who keeps order, let's say is honest. It's hard to find many people like that, because the entire State today is under investigation, you understand? Gets up for work, works". The interviewee uses third person to describe his perception of the normative person. Nevertheless, as he progresses in his description he qualifies and notes that in practice it is uncertain whether there are two different, separate societies; there is criminality in what he deems to be honest society.

Another prison interviewee using this expression mentioned that he participated in a group where they talked about distinction between the two groups, while he himself tries to blur the difference, the boundary between them: "There are no two worlds. There is no world of crime and *normative* world. Doesn't exist. There are the concepts of crime, concepts of *normative*". However, as he went on talking he distinguished between the groups and used third person (they – normative) as against first person (we – criminals): "They are people who never used drugs, people who were not in prison, people who work, maintain their house, live their normative lives. Not like us, we don't live *normative* lives.

At first he tried to argue that it is impossible to catalogue every group, but as he went on it was obvious that he internalized the catalogue. In addition he disclosed that internalization begun in his childhood: "This segregation I got in childhood, gave me the idea that I live in a certain world and the world outside lives in a certain world" attesting that segregation is internalized in his worldview. In the prison interviewees' words there is an obvious ambivalence concerning the contact between the two worlds and maybe even hostility towards the larger society with a different worldview. In order not to feel that their worldview is less good, prison interviewees blur the boundaries of normative society and mention the seeping of criminals into it.

A worldview attesting to clear boundaries between general and criminal society can be discerned in the discourse of interviewees in rehabilitation when they use the word *normative* and its derivatives. For example when an interviewee in rehabilitation talks about his wish to separate from his criminal world and belong to society, he says: "I want to be a *normative* citizen, it is important for me to be a *normative* citizen. I don't want to walk around with a label… It's uncomfortable, unpleasant. And here I get all the help I need". As a deviant from society's ways, he feels that stigma sticks to him; in order to get back to society, he is willing to accept the help of the rehabilitation framework.

It is not easy for criminals in rehabilitation to cross over the fence, go back to the society they deem has expelled them. A rehabilitee who was in a rehabilitation framework, went back to the criminal world and is once again in rehabilitation process says: "All my life I was a man, and all of a sudden I start to be a maniac. I find it hard to accept the maniac. Now maniac is the connotation of maniac, it's negative, it's how to say, dirt. You understand? And here, maniac is something positive, like, being *normative*, being like everybody". When he clarifies his position, he chooses to use expressions from the criminal language to emphasize his words; in his use of the word *connotation* he emphasizes even more the negative meaning of *maniac*. Furthermore, the language he chose illustrates the segregation existing between society and the criminal world.

Another example of segregation and cataloguing of each society emerges from the words of an interviewee in rehabilitation who refers to his past language: "I knew only a different language, not a *normative* language, as it is spoken, a good language". This creates a linguistic segregation between normative and criminal society; however the segregation of rehabilitees has to be physical as well, they have to get away from the area they grew up in where they met their criminal friends. One rehabilitee talks about the physical severance from his childhood environment: "the friends, I don't bump into them… I am used to be in the area in which there are only clean friends, like *normative* people".

Life problem / disease

According to the perception that there is a normative world and there are deviants, criminality as deviance is perceived as a life problem or a disease. The connection between the criminal's behavior

and what actually happens to him, seems to him as arbitrary chance he has no control over; his criminal behavior may worsen in a gradual or fast spin (Benisty & Ronel 2014); the spin may bring about a sense of mental trap and ignoring of moral values and social norms (Ronel 2009). This situation becomes a problem in the criminal's life: since it difficult for him to stop the spin himself, external intervention is needed to stop it (Benisty & Ronel 2014).

Furthermore, the medical model in criminology perceives criminality as a disease. According to this model criminality is an external symptom of a personal pathology (Timor & Shoham 2014), and indeed one prison interviewee referred to his criminality as a disease: "with me its' part of a *disease*, with me its' more a part than a *mental problem*, the result of a *mental problem*". This interviewee did not think his criminality has a cure and perhaps this was his way to justify his criminality, to put himself in a passive situation and evade personal responsibility for his actions. Alongside that, the medical model in criminology emphasizes that with appropriate care it is possible to rehabilitate criminals and enable them to function normatively (ibid).

Thus, while the prison interviewee did not believe he could control his criminality, in the process of rehabilitation an effort is made together with him to understand the causal context of his criminality. Therapists endeavor to show him that there it is not arbitrariness but causality, that behavior may be controlled by change in the person himself.

In this context one of the interviewees in rehabilitation claims: "it is our disease, like, to change the tendency to think pessimistically, like, until we touch the thing and see that the devil is not so terrible. And indeed, like, I activated the obsession of the past… to a positive direction". Getting out of the passive position, directing the quality activated in a negative way in the past to the positive side is a meaningful element in the process of rehabilitation, since it encourages personal growth out of crisis and helps change views of life.

That same interviewee perceived of criminality as stemming from a more basic problem: the lack of ability to manage life in an organized way: "our *problem* is to know how to manage our lives properly… this is something we don't know how to do best". Further on he notes: "today I understand that all in all I was a person who had no limits". These words too indicate that he understood he had to step out of his passive attitude as a criminal and that change of behavior depends on him and the way he will choose.

Perception of criminality as deriving from a basic problem is obvious also in the words of an interviewee at the end of his first year in rehabilitation. He views drugs as part of a whole gamut of his criminality, a result of his life course: "I don't focus the *problem* on drugs. Drugs are like a result of what I went through in life. I grew up like in a wrecked home". If it was not the drugs that brought about criminality but a problem in behavior which was a reaction to the way he grew up, he can locate this behavior, control and direct it to another way.

Further on it is obvious that he understands that everyone has to live with their own problems, as does his family with whom he used to be angry because of his criminality and imprisonment: "today I understand them, because they too had a problem, had a *life problem*. It was very hard for them too".

Another interviewee, also in rehabilitation for several months, admitted having used drugs as part of his criminal behavior, says: "It was hard for me, I didn't understand what is my *problem*, I thought it was the drug problem, I thought my problem was the drug, but that's not true, I was looking for a solution through the drug. *The problem was behavior, criminal behavior.* That was the *problem*". Such perception helps eradicate criminality, since behavior can be changed.

An interviewee at the end of his hostel rehabilitation says: "I didn't know about *my disease, the disease of addiction*", that is, according to him his criminality did not stem from the problem but more than that, from a disease; however often diseases too can be cured; in the process of rehabilitation one learns how to cope with disease.

Some criminals do not see their criminality as a problem or a disease but as a way of life. Only when they start the rehabilitation process and are in treatment, they are exposed to this view, as it is obvious from the words of an interviewee who was in rehabilitation for about a month: "I never knew I had a

life problem"; in the words of another interviewee who just started rehabilitation and feels confused, but sees the problem as belonging to his past: "it's hard for me… I don't know what my *problem* is… I wanted everything immediately". When criminality is perceived as a problem, it can be coped with because solutions are sought.

The baby image

A person experiencing himself as negative, bad and different will seek to fulfill his uniqueness in his negative exceptionality, fulfillment of the negative and the bad becoming the way in which he is empowered (Addad et al. 2014). The worse a criminal will deem himself, the stronger and bigger will he be in his own eyes (ibid.) and will see society as small, unthreatening. His feeling of capability will strengthen following his criminal behavior (Benisty & Ronel 2014) and he will consider himself empowered.

Only one prison interviewee referred to the baby image. He was imprisoned many times and was about to be released when interviewed. He said: "A month before it ends, I sat full time… and it's here' and it's there and you start from scratch and that's it, you start from scratch. You have nothing. *You get out like a baby*, you have to know how to walk, to know how to build your life, have to know how to make a living. That's it today I already have contacts outside to build a framework". He referred to the baby image in second person and created distancing so as not to identify with this image; it is noteworthy that this was the only prison interviewee who referred in the paragraph *coping* to personal, not to external coping. As mentioned, he was in rehabilitation before but was imprisoned again. It seems he used an image he learned during his rehabilitation days and now decided to be free and mend his ways, hence deemed getting out of prison as entering another world, but used linguistic means of distancing.

When a criminal tries to get back to society, he has to undergo a re-socialization process. In his re-education he has to adopt new values and norms and learn about reality and society's rules. The criminal who enters a society that's new for him neutralizes his former views: the world doesn't look small and he himself is not great and strong. Often his renewed view makes him feel smaller than ever. He feels he has to learn everything anew, like a baby starting his first steps in the world who does not yet know how to mind his steps. This feeling is often expressed in rehabilitees' language: "I arrived here… I didn't have the most minimal thing. *I had nothing. I don't know how to talk, know nothing.* He said he didn't own anything physical, didn't have the ability to talk. Another rehabilitee also emphasized that in addition to physical deprivation, when he arrived to rehabilitation he lacked language: "I arrived here physically and mentally broken. I weighed about forty eight, fifty kilos, was unable to put together five sentences in sequence, bent, all the time seeking to be pitied, *terribly, terribly childish behavior*, obsessive, compulsive, no consideration of others". Criminals feel they have to learn the language from scratch in order to start their first steps in a world new to them.

A recidivist rehabilitee describes the criminals starting their way in rehabilitation and stresses that as someone who already underwent rehabilitation he is different: "The mates here were used to see *people going up the stairs on all four asking for Materna*. As if, why do I say this, they were used to broken people coming up the stairs 'help me' and it was hard for them to see… one who is familiar with everything".

In the process of therapy, according to the situation the therapeutic environment is deemed to the first parental environment (Cohen 2005); the therapeutic connection often restores a relationship hierarchy similar to the that between the persons treated and their parents (Hadar 2001), namely, people in treatment experience themselves as small; an interviewee who started rehabilitation said: "Here I am the beginning of the road, I am here, I am here altogether one month and eight days, and *I am really a chick*". Another rehabilitee also at the beginning of the process said: "*I feel like a child*. Responsibility is taken away from me, therapy is forced upon us… they tell us when to sleep, when to sit and watch television… It's hard". On one hand he feels his needs are being taken care of, on the other hand it was hard for him to feel like a child whose decisions are not his, even in this temporary situation at the end of which he will regain control of his life.

Discussion

Language is a two-way tool to transfer emotions, ideas and thoughts; it is an expression of the uniqueness of its speakers. People endow the world with meaning and analyze it by means of language (Whorf 1956), creating a linguistic expression of their inner world and uniqueness (Hertzlert, 1965, Dean-Brown 1992) hence one's language reflects and shapes one's world.

When speakers of different languages get together linguistic elements of their languages interpenetrate (Weinreich 1968); language patterns interpenetrate also among speakers belonging to different groups in the same society.

Interviewees in this study belong to the same society, have the same language; they are part of a criminal subculture which also has linguistic characteristics in the same general language. However, in criminal subculture we can find language characteristics unique to prisoners distinct from that of other criminals (Encinas 2001, Einat & Livnat 2013) as well as language characteristics unique to rehabilitees (Timor 1998, 2006). Individuals in each group use language that suit their needs and life circumstances in a way that helps them conduct themselves in their group.

Furthermore, the various care professionals, psychologists, criminologists and social workers also have characteristic linguistic elements, expressions such as awareness, coping, normative, life-problem/disease and baby image. These professional-therapeutic jargon expressions are used by therapists also when treating criminals. These expressions penetrated the discourse of both interviewee groups, but there is a difference in the way they are used.

Awareness

Among interviewees from both groups the expression *awareness* was used, but while prison interviewees did not refer to inner awareness but to the contents of the drug-weaning plan, the use of the word among rehabilitee interviewees attests to inner awareness about the process they underwent.

The use of the word *awareness* received a different hue at each stage of rehabilitation attesting to the different stage of internalization that fitted the stage of rehabilitation the interviewee was in. At the beginning of the rehabilitation process the use of the word *awareness* occurred in context of the therapists' explanation that every person has a positive side and one needs to be aware of it. The word exists in the language of the interviewee who chose to use it, but its meaning is linked to the meaning presented by therapists to rehabilitees. In a more advanced stage of the rehabilitation process, the word *awareness* is explained and defined by one of the rehabilitees and is linked to the person's inner knowledge of himself. At the end of the rehabilitation process the word is uttered in expressing gratitude to the rehabilitation framework for achieving self awareness that helps the rehabilitee accept himself.

In other words, when the word *awareness* and its derivatives was uttered in the language of rehabilitee interviewees, it seems that change occurred in the way they referred to its meaning in their discourse, maybe because it was internalized by them along with the rehabilitation process; in choosing it they referred to the importance of its' meaning in the process.

Rehabilitee interviewees experience differently what occurs in them when elements in their worldview start to change. Change in worldview is a critical element in the rehabilitation process (Benisty & Ronel 2014); it is a language that posits new elements and helps people experience things in a new way (Hadar 2001). It seems that the word *awareness* and its meanings may replace the criminal elements disappearing from the rehabilitee interviewee's world and become part of the new elements created in this process.

Furthermore, according to Benisty & Ronel (2014), following the therapeutic process rehabilitees' awareness is rising; in this study it seems that the very use of the word *awareness* in the context of inner awareness that interviewees experience in the therapeutic process, strengthens the level of their awareness. Interviewees in rehabilitation can think about what they did and about situations they

undergo in the rehabilitation process; they can understand what motivated their actions and their ramifications and build a new, more immune mental state.

Coping

Prisoners cope with life in prison; however, in interviews they chose to use the word *coping* to present the way the others, not they themselves, cope. Concerning drugs, one prison interviewee referred to the importance of prisoners' personal coping with drugs, while another interviewee was cynical about the way prison staff copes with drug abuse within prison walls. Only one prison interviewee used the word *coping* in reference to himself, his own coping; for him coping was holding on strongly to his personal needs against the dictates of society's norms and labeling of criminals. As mentioned above, this interviewee underwent a rehabilitation program in prison during one of his many imprisonments; maybe that is why in spite of the anger resounding in his words, he recognizes both his need to cope with difficulties as well as the need of all people in society to cope with different situations in their lives.

In contrast to prison interviewees, interviewees in rehabilitation use the word *coping* and its derivatives when they refer to coping with their feelings and the inner processes they undergo. Furthermore, they note that due to their personal experience they are able to help other criminals cope with the rehabilitation process; they also use this expression when they refer to coping with the need to severe their contacts with criminal elements from their past and with the social tendency to label people who were convicted and imprisoned.

Professional caregivers endeavor to imbue the people they treat with the importance of personal coping (Hadar 2001) and indeed rehabilitees mentioned the rehabilitation framework as helpful in their coping with the pressures they encountered. Along with the understanding the importance of coping and the possibilities it holds, the expression *coping* penetrated rehabilitees' discourse; its repeated use made the word become natural in their language, more accessible to additional uses. The adoption of this element in rehabilitation interviewees' discourse attests to their need to learn ways of coping with their changing situation in the process they undergo.

Normative

Part of criminals' coping is that general society is not always happy to accept them. It presents *normative* as it is used in the language of the various caregivers.

Prison interviewees used the expression *normative* when noting personal responsibility and the ability to maintain borders characteristic of normative people, however they had qualifications about the existence of two different societies; they noted that in fact there are no clear boundaries between the two societies – general culture resembles the criminal sub-culture inasmuch as some of its members engage in erosive criminality as well.

Prison interviewees were ambivalent about the connection between the two worlds and may even feel hostility towards the general culture with a different worldview. Maybe in order to overcome their hard feelings about the worldview presented in normative society, they blur its boundaries and note that there is criminality there as well.

In contrast, rehabilitees attest that it is clear to them that there are two societies and they have to leave their criminal society and cross over to the general society that has different patterns than those they are used to. They refer to the difficulty of this transition but are prepared to accept the help of rehabilitation factors for a smoother passage.

Furthermore, the language is described as one of the stumbling blocks to be overcome in order to become part of normative society, namely some rehabilitees view language as important for integration in society. The discourse creates culture and language and is a meeting point between them; each time discourse is created and recreated, it changes and crystallizes (Sherzer 1987).

Evidence to this can be found in the words of one interviewee who noted that he came to rehabilitation due to the admiration he felt for the way his rehabilitated friend conducted his life. He was in the hospitalization ward when a friend from the past arrived: "carrying the message, there, in the ward, a friend I used to do drugs with, I was surprised by the way he expressed himself, the way he thought, the way he looked, his liveliness ignited some kind of green light in me". The rehabilitee identified a change in the discourse and ways of thinking of his old friend who attributed the change to his rehabilitation process. Although he did not use the expression *normative* in this context as before, he did recognize the fact that overcoming the language barrier along with change in ways of thinking will help him integrate in the general culture; he chose to enter the rehabilitation hostel in order to create change that will help him achieve integration.

Life problem / disease

Criminality is often perceived as a life problem or a disease. When criminals actually use the expressions *life problem* and *disease* noting their criminality, their meaning becomes more palpable, since when passive mental expressions become active, they can actually be experienced (Hadar 2001).

A prison interviewee referred to his criminality as a disease; obviously he accepted his condition without any wish to change. However, the medical model of criminology is based on the assumption that criminality is the product of conflicts or inner personal problems; by means of various treatment methods it is possible to help criminals to rehabilitate (Timor & Shoham 2014).

Indeed, in the rehabilitation process caregivers endeavor to show criminals that it is possible to direct behavior by change in the person himself. Hence, when interviewees in rehabilitation use expressions such as *life problem* and *disease*, it is obvious that they understand that the problem is the behavior that led them to criminality; it seems they learn to shed their passive attitude in order to face this behavior and lead it to a positive direction.

As mentioned, for some criminality is a way of life, not a problem or disease; that may be the reason why interviewees in rehabilitation refer to their criminality as a problem or disease one can cope with and even eradicate by means of active change in behavior.

Baby image

Another expression in criminals' discourse refers to the baby motive.

Criminals are often empowered by their negative exceptionality (Addad et al. 2014), however when they want to return to society, they have to neutralize this empowerment they created. This neutralization may bring about an opposite view, namely criminals' feeling that they are great and threatening may turn into a feeling that they are smaller than ever. They perceive normative life as a new and different life in which they are like a baby starting its' first steps in the world, not knowing how to conduct itself in it.

As mentioned in the findings, the prison interviewee who included the baby image in his discourse was in the past in a rehabilitation framework, but was imprisoned again. He said that during the many years he spent in prison he almost completed his academic studies: "I came to prison not knowing how to read or write; today I have a full baccalaureate, studied three years at the university through the prison, achieved a degree, and… I did not manage, but almost completed the degree. I studied Victor Frankl's entire theory, the logo-therapy". In other words during his time in prison and in the framework of his studies he encountered various rehabilitation agents from whom he acquired and started to use terms connected to professional-therapeutic language, albeit without fully identifying with these terms. Hence it seems that the discourse he uses does not necessarily reflect the prisoners', but resembles more the rehabilitees' discourse.

By means of choosing expressions referring to the baby image, rehabilitees attest to having arrived to rehabilitation possessing nothing physically or mentally, even without being able to speak properly.

They feel they have to learn from scratch behavior norms in order to grow in the society to which they want to belong.

Furthermore, people in therapy often feel the need for the therapists' guidance; hierarchy of relations resembling that of a child depending on parents (Hadar 2011) is reconstructed in therapy. The use of the baby image in rehabilitation interviewees' discourse attests to their need of guidance by therapists that will help and lead them to the proper conduct in society.

Summary and Conclusions

In summary, use of expressions from the professional therapeutic jargon is prevalent in both interviewees' groups, however the interpretation of the usage are indicative of a difference in the components of their worldviews.

Prisoners get together in prison against the prison's team (Andrews 1980) that represents for them the establishment and the negative dominant general culture. They meet less therapists hence they do not encounter many professional therapeutic jargon expressions. Furthermore, often they are not oriented to rehabilitation so that if these expressions nevertheless seep into the discourse they produce, they often accompany it with the use of second or third person, indicating a lack of identification with and internalization of their meaning.

In contrast, when interviewees in rehabilitation use expressions from the professional therapeutic language, they refer to themselves and use first person, indicating their identification with their meaning. The absorption of these expressions can happen unconsciously, as can the choice to use internalized expressions. Alongside that, when are used these expressions create change in the components of worldview of the interviewees in rehabilitation and reflect new ways of thinking and components that belong to a new worldview crystallizing in them, which tends towards normative society and perceives in it a possible route.

The recurring use of expressions from the professional therapeutic jargon makes users appropriate them and makes them accessible for additional uses. In this way these expressions acquire the potential to be absorbed in their discourse and become a natural, integral part of it. In addition to reflecting components of the rehabilitation interviewees' worldview, these expressions also structure and crystallize their worldview.

Although using expressions from the professional therapeutic jargon in rehabilitation interviewees' discourse is a small part of the overall change in their world, they attested that language is a meaningful component in a person's self-image in his own and in outsiders' eyes.

As mentioned, the rehabilitees discourse enables a glimpse into their worldview and reflects it; it can also shape and construct it. Hence it is important to refer to aspects of discourse in the process of rehabilitation, use it to raise consciousness about the process, to understand the feelings doubts the rehabilitee experiences. Furthermore, in addition to the tools and skills they acquire, it is important to include reference to ways of expression that will enable rehabilitees understand that they possess the ability to create change and cope with difficulties they will encounter on their way in order to make their transition from delinquent to normative society easier.

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