Encyclopedia of Social Theory

Total Institutions

Erving Goffman created the concept of total institution in his essay "On the Characteristics of Total Institutions" published in 1961 in *Asylums.* Total institutions are social hybrids, part residential community and part formal organization intended for the bureaucratic management of large groups of people. Goffman (1961) offers this definition:

> A total institution may be defined as a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life. (p. xiii)

Goffman provides this taxonomy of the five groups of total institutions:

> Institutions that care for those who are incapable of caringfor themselves but are considered harmless—the blind, aged, orphaned, and indigent
>
> Institutions that sequester groups who are incapable of caring for themselves and pose a threat to others—sanitarium, leprosarium, or mental hospital
>
> Institutions designed to protect the community from those perceived as threats where the welfare of the inmates is not a concern—prisons, prisoner of war camps, and concentration camps
>
> Institutions established to pursue a worklike task—army barracks, ships, boarding schools, and work camps
>
> Institutions that form cloistered retreats or monastic orders designed for training and the pursuit of a religious vocation

Supported by the National Institute of Mental Health, Goffman spent a year from 1955 to 1956 conducting fieldwork in a mental hospital, St. Elizabeth's Hospital in Washington, D.C. He developed this analysis drawing on eclectic evidence from the

sociological literature on prisons and organizations and from ethnographies, novels, autobiographies, and theology. Despite the breadth of this scholarship, the formal concept of total institution focuses primarily on psychiatric institutions, and his intention was to explore the social world of the patient and the subjective, lived experiences of inmates.

Total institutions are distinguished by their varying degrees of closure or separation from the outside world. All activities of the daily round occur in the same place, under a single authority, and in the immediate company of a large batch of others. Total institutions create the rationalization of life through tight scheduling, regimentation, and bureaucratic rules that foster the disciplinary control of inmates. Thus, the bureaucratic management of inmates and *batch living* promote the rational plan or official purpose of the institution (Burns 1992).

Goffman identifies the radical split between the *inmate world* and the *staff world* as a critical feature of these institutions. He offers a detailed discussion of the *moral career of mental patients*, documenting the systematic stripping of their socially constructed conventional identity in the outside home world by the denigrations, mortifications, and humiliations of the admissions process. Through welcoming ceremonies, staff members take a life history, photograph, weigh, fingerprint, assign numbers, search, list personal possessions for storage, undress, bathe, disinfect, cut hair, and issue institutional clothing. Without access to civilian clothing, towels, soap, shaving kits, and bathing facilities, inmates are stripped of their usual appearance and suffer a personal defacement. Through obedience tests and abusive welcome rituals, inmates come to understand their powerlessness. Inmates may be required to hold their body in a humiliating stance and provide humiliating verbal responses to staff members as part of the enforced deference pattern of total institutions.

Once persons are transformed into patients and enter the inmate world, they experience a civil death that denies them adultlike autonomy and control over their fate. From the most mundane or trivial matters to important life decisions, patients no longer act with agency or self-determination. The structure of the hospital regulations as enforced by staff and staff decisions, and justified by therapeutic rationales, determines the fate of inmates.

Although patients suffer the loss of their socially constructed identity grounded in their home world, they strive to reconstruct their social self and protect themselves from the mortification of self so characteristic of life in total institutions. Patients use secondary adjustments, "practices that do not directly challenge staff but allow inmates to obtain forbidden satisfactions or obtain permitted ones by forbidden means." (Goffman 1961:54) Secondary adjustments provide evidence that the patient can act with agency and can claim an inner soul beyond the reach of institutional profanations.

Patients also achieve a degree of personal reorganization and recovery of self through conformity to house rules and the opportunities and rewards available to them through the privilege system. Good behavior and compliance ostensibly demonstrate improving mental health and are rewarded by privileges and the prospect of a timely release. In addition, inmates are resocialized into the inmate social system—a parallel and countercultural complex of values, meanings, and informal structures that oppose bureaucratic regimentation or psychotherapeutic rationales. Instead of the belief that time spent in treatment is beneficial, patients learn that time spent in the institution is wasted time in exile from living. Rather than learning to take responsibility for one's actions, the inmate belief system instructs patients about externalizing responsibility and blaming others. Patients construct *sad tales* to explain how bad luck or forces outside their control brought them to the institution. Through solidarity and defiance, inmates create cliques and adopt strategies of withdrawal and intransigence. Other inmates become colonizers as they view the institution as their home. Most inmates adopt a combination of secondary adjustments and coping strategies, responding to situations by embracing the stance of *playing it cool* to maximize their chances of getting out of the institution without physical or psychological injury.

The staff world defines these institutions as storage dumps where staff members, motivated by the constraints of institutional efficiency, work on people as a kind of biosocial material. This staff rationale conflicts with the idealized public aims of the institution and the Kantian ethical imperative that people are ends in themselves and are deserving of humane standards of care. The staff articulates a theory of human nature that depersonalizes each patient, equating the inmate with the cluster of symptoms associated with the diagnosis.

The concept of total institution incorporates the key ideas of the dominant sociological theoretical perspective in the 1950s—structural functionalism—and the work of Talcott Parsons (1951) and Amitai Etzioni (1961). A total institution is a structural form, a formal organization and residential community that adopts institutional ceremonies and strategies to integrate staff and inmate worlds into a functional social system by elaborating complementary roles **[p. 845 ↓]** between inmates and staff. Goffman's conceptualization of total institutions created a unique descriptive and analytic framework by which to understand the structural determinants of the inmates' subjectively experienced social reality.

Goffman's reliance on a structural analysis of the roles, rules, and relationships between inmates and staff members differed from his earlier work, *The Presentation of Self in Everyday Life* (1959). Here, he developed a *dramaturgical analysis* of social interaction within social institutions by viewing interaction as theater where actors use fronts, scripts, and props, and collude with others to enact impression management before various audiences.

The concept of total institutions has enjoyed a long and influential career. Theorists in interpretive sociology and labeling theory (Howard Becker), ethnomethodology (Harold Garfinkel), the antipsychiatry movement (Thomas Szasz, R. D. Laing), the sociology of organizations, and policymakers concerned with deinstitutionalization and community mental health have been influenced by Goffman's work (Steudler 2001).

As a theoretical construct, total institution has significant limitations. By constructing an ahistorical formal theory in the spirit of Georg Simmel (Weil 2001) and incorporating a structural-functional dynamic, Goffman emphasized the legitimate exercise of bureaucratic authority in total institutions. He largely ignored the question of political ideology, domination, and power in the wider society where the total institution was situated. Power, domination, and social conflict were never problematic for Goffman. For example, Stalinist work camps (gulag), the Soviet abuse of psychiatry to stifle internal political dissent after World War II, and Nazi concentration camps illustrate how totalitarian regimes have employed total institutions as a means to abuse power and to oppress citizens. Concentration camps were total institutions dedicated to racial purification through state-sponsored genocide and crimes against humanity. For

Goffman, however, total institutions were a social form that existed in a social vacuum, without blood or social conflict and unrelated to ideology or dogma.

Goffman formulated a taxonomy of the types of total institutions and an analysis of the structural-functional aspects of this social form derived from his fieldwork and an examination of mid-twentieth-century institutions. He did not concern himself with the historical development of total institutions in the West during the transition to modernity from the seventeenth through nineteenth centuries. Goffman never addressed the questions raised by the important work of his contemporary, French theorist Michel Foucault, who examined the formation of the asylum, the birth of the clinic, the establishment of the modern penitentiary, and the elaboration of official *discourse*, the systematized knowledge that situated elites like psychiatrists employ as a key medium of power within the bureaucratic state and total institutions (Foucault 1965).

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See also

Further Readings and References

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