

своей сущности не сводится лишь к аморфному христианскому эклектизму и одновременно не является идеей чисто внешнего административного объединения Церквей. Она также направлена на активизацию миссионерской деятельности, имея в виду евангелизацию всех народов.

Такая направленность обусловила актуализацию в сознании верующих проблемы нации и национальных отношений. Идеологи христианской Церкви специально не занимались разработкой данной проблемы, но Церковь придерживается определенной концепции как в доктринальном, так и в практическом смысле. Доктринально Церковь умалывает и даже нигилистически относится к национальному фактору, поскольку ее миссией является «избавление в целом мире и во все времена». Церковь присвоила себе роль «матери и наставницы семьи народов», выражая это в форме христианского космополитизма. Но, поскольку практическое существование и деятельность Церкви протекает на национальной почве, она вынуждена приспособливаться к национальной форме бытия общества, давать собственную интерпретацию национальным отношениям, а также реагировать на нехристианские, а также секулярные концепции в целом. Эти отношения интерпретируются в основном с позиции христианской этики. При этом нация лишается субстанциональной значимости, а национальные ценности попадают в разряд второстепенных, ибо на первое место возводятся «эсхатологические ценности».

В обыденном сознании верующих национальное и религиозное тесно переплетаются, взаимодействуют и также отчетливо проявляется тенденция поставить национальное в зависимость от религиозного. Современные адепты христианства убеждены в том, что основная причина нынешних конфликтов на национальной почве заключается в отходе человека от религиозных принципов миролюбия и всепрощения, в желании многих людей, отошедших от истинного миропонимания, показать свою национальную исключительность. Следовательно, если в социальном смысле связь религии и ее институтов с нацией нередко имеет негативный характер, то в сознании рядовых верующих, как правило, не возникает чувство своего национального превосходства или национальной ограниченности других людей. В данном случае убеждение в истинности «своего» вероучения и «неполноты истины» в других конфессиях не перерастает в идею превосходства одной нации над другими.

Глобализация и интеграция оказали влияние и на иные религиозно-мировоззренческие представления верующих. В частности, адепты христианского вероучения ныне акцентируют внимание на проблемах теософии, оккультизма, астрологии и других подобных феноменах, приводящих к диверсификации этих представлений.

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GREAT TRANSFORMATION IN THE SYSTEM OF SOCIAL CONTROL IN THE XXTH CENTURY

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The types of social control deployed in societies are closely related to what people generally believe are the reasons why people deviate--their commonly accepted "theories of deviance." And beliefs about what causes deviance have varied greatly in Western history. This paper examines the changes in the predominant theories of deviant behavior, and the related shifts in the predominant approaches to social control, over the last 400 years. In it I will make very broad generalizations which can only be claimed to be true as a general rule.

In detail, there are many exceptions. Nevertheless, it is useful to put our current social control practices in a broad historical context.

IMAGES OF DEVIANCE IN WESTERN HISTORY

Sin, Crime and Sickness

Three approaches to explaining deviance have competed for ascendancy throughout Western history: 1) deviance as sin, 2) deviance as crime, or 3) deviance as sickness. Sometimes two or all three have existed side by side, and in virtually every period there have been some adherents to each one. In a particular period, however, within very broad time frames, when one image of deviance has tended to dominate others, it should not be surprising that the dominant image is linked to that period's dominant groups and social institutions. For example, in Western medieval or feudal society, dominated by theological reasoning and ecclesiastical authority, theories of deviance emphasized sin, evil, and fall from grace. The clergy, whose authority was anchored in theological doctrine and tradition, were the primary social control practitioners. Medieval social control practices, reflecting the apparent need to atone for sin or expunge evil, often involved penance or corporal punishment.

In contrast, late-welfare-state capitalism (such as current American society) is dominated by giant corporations, large, bureaucratic government, and technocrats--highly trained scientists, engineers, and other skilled professionals. In this technologically oriented society, the management of deviance is increasingly being placed in the hands of specialists. The ascendant image of deviance conceptualizes wrongdoing as evidence of sickness. Medical, psychiatric, and social scientists, along with various helping professionals (social workers, probation officers, counselors) increasingly preempt or share in social control decisions with the courts. Techniques of social control include drugs and surgery intended to "cure" the behavior in question.

In each historical period there were specific characteristic images of deviance and approaches to social control. This point is related to Goffman's observation that "Every human community has its own special set of boundaries (norms), its own unique identity, and so we may presume that every community also has its own characteristic styles of deviant behavior. Societies which place a high premium on ownership of property, for example, are likely to experience a greater volume of theft than those which do not, while societies which emphasize political orthodoxy are apt to discover and punish more sedition than their less touchy neighbors"[1:19-20].

Thinking in such a grand historical frame of reference is useful for uncovering large-scale patterns. However, there are specific exceptions to and reversals of the general tendency to move from images of deviance as sin, to crime, to sickness. Indeed, in American society within the past 100 years or so, there has been a cyclical pattern in deviance designations alternating between images of crime and sickness [2: 274]. For example, from the 19th century to the present, opiate addiction has been alternately defined as no problem, a medical problem, a crime, and currently, a hybrid legal-medical phenomenon. Throughout the same period, alcoholism has carried a mixed connotation of immorality, illegality, and sickness. In respect to alcohol, the medical model presently dominates. The prevailing definition of homosexual behavior has moved from sin to crime to sickness, and most recently, to demedicalization and "normalization." After an intense struggle the American Psychiatric Association voted in 1973 to drop the classification of homosexuality as a mental illness, and various attempts have been made to recognize the civil rights of homosexuals, but at the same time efforts by some religious or conservative groups to brand homosexuality as sinful or to retain its definitions as illegal (and immoral) acts have been increasing.

APPROACHES TO SOCIAL CONTROL

Changing Modalities of Control

The history of criminal punishment most clearly conveys the outlines of the major Western transformations in social control. Until the end of the Middle Ages in the 15th century, most deviance was handled informally in families and villages. In cases not involving the

Church, the chief deterrent was the fear of private vengeance by victims or their relatives. Jails were not used as punishment; when sanctions were applied by city or village officials, the penalty tended to be corporal or capital punishment for the poor and fines for the wealthy. As city-states developed into nation-states, governments took on more of the responsibility for punishing crime. Punishments, however, tended to remain brutal. Even through the 18th century, those convicted of crimes were apt to face hanging, decapitation, physical dismemberment (cutting off a finger, hand, ear, etc.), branding, or public disgrace in the pillory of the town square. Punishment focused on the body of the condemned [3]. Social control was characterized by public displays of retribution, with minimal involvement by the state and none by the penological experts.

During the 19th century this changed. The change is best represented by the emergence of large-scale institutions of control, including the prison and the asylum [4]. With their predominance, the place of control moved from the public square of the community to behind the high walls of institutions run by penal or therapeutic experts and professionals (wardens, penologists, phrenologists, psychiatrists, criminologists and therapists). By the mid-1800s the major changes were clear; Cohen notes the following [5]:

- The increasing involvement of the state in the building and administration of bureaucratic institutions for the punishment, custody, or cure of deviants.
- The dominance of professional experts who concentrate on differentiating and classifying deviant and dependent groups according to "scientific" criteria.
- The placement of deviants into segregated "asylums."
- A decline in punishment involving public displays of physical harm.

There is little dispute that these changes occurred; there is less agreement about the reasons why. Durkheim [6] hypothesized that more simple, homogeneous societies held together by "mechanical solidarity" are dominated by "repressive" law that focuses on punishment. In contrast, complex, heterogeneous societies that cohere by "organic solidarity" are characterized by "restitutive" law that seeks to correct or restore rather than punish. Others have linked the changes more to the specific historical developments of political economy. Gibbs [7] documents how changes in English crime control are embedded in the larger capitalist transformation from a society dominated by rural landed aristocracy to one dominated by industrial factory owners. With the increasing importance of factory labor came a greater need to control workers' behavior and invest in "human capital." Therefore, underlying the changes in approaches to social control was an increasing rationalization of the system aimed at achieving the goals of discipline and productivity over punishment [8].

Large, bureaucratic, segregating institutions of social control--often called total institutions [9]--remained the unchallenged mode until the 1960s. Then there began, in the U.S., a "deinstitutionalization" movement intended to return social control to the community. The ideology of this destructuring movement called for decentralization, decriminalization, deinstitutionalization, deprofessionalization, self-help, and the removal of stigma and labels [4]. The apparent reality of the trend is best exemplified by the sharp reductions in mental institutions over the past four decades. The reasons for "decarceration" range from the alleged failures of the treatment model, to the noninterventionist social policy implications of labeling theory, to the need of governments to relieve themselves of excessive financial burdens [5]. The result has been an increase in community-oriented social control strategies that often include the private sector, an emphasis on self-help and the proliferation of surveillance.

None of this, however, has meant an overall reduction in the social control of deviance. Rather, it has meant more. As Cohen [5: 347] puts it, "the major results of the new movements towards "community" and "diversion" have been to increase rather than decrease the amount of intervention directed at many groups of deviants in the system and, probably, to

increase rather than decrease the total number who get into the system in the first place. In other words: "alternatives" become not true alternatives at all, but new programs which "supplement the existing system or else expand it by attracting new populations." In this expanding system of social control, next to the older, exclusive, coercive, authoritarian total institutions now stand newer inclusive, treatment-oriented, professionally administered, community-based facilities and normatively oriented, self-help organizations such as Alcoholics Anonymous [2; 10; 11].

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POMOC HUMANITARNA JAKO INSTRUMENT POLITYKI UNII EUROPEJSKIEJ W OPARCIU O PRZYKŁAD AKCJI POMOCY HUMANITARNEJ W KOLUMBII

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1. Wstęp

Każdy dzień niesie ze sobą mnóstwo niespodzianek, szczęścia, radości, pomyślnych nowin, lecz także tych smutnych informacji, jak np. wiadomości o ludzkich krzywdach i cierpieniach. Te ostatnie mogą być zarówno wynikiem oddziaływań człowieka np. degradacja środowiska naturalnego, działania wojenne, itp., czy też klęsk żywiołowych, które w ostatnim okresie dość często nawiedzają kulę ziemską i mieszkańców jej zakątków. Przykładem tego mogą być sytuacje w Iraku, Kolumbii, czy też tereny dotknięte tsunami.

Na pomoc ofiarom tych zająć wychodzi Unia Europejska, realizując w ten sposób politykę pomocy humanitarnej.

Celem referatu jest przedstawienie unijnych działań ukierunkowanych na akcje niesienia pomocy humanitarnej oraz efekty tych poczynań. Analizując rezultaty pomocy humanitarnej oparto się na przykładzie akcji pomocy humanitarnej w nekanej, od około 40 lat, wojną domową Kolumbii.

2. Unijna pomoc humanitarna i ECHO

W rozporządzeniu Rady (WE) nr 1257/96 z dnia 20 czerwca 1996 roku założono, iż pomoc humanitarna Wspólnoty miałaby obejmować „*akcje niesienia pomocy, akcje ratunkowe i działania ochronne opierające się na zasadach niedyskryminacji, mające na celu pomoc ludziom w państwach trzecich. Pomoc tą zaadresowano do najbardziej bezbronnych spośród nich, (...) ofiarom klęsk żywiołowych, katastrof wywołanych działalnością człowieka, takich jak wojny i wybuchy walk...*” [1, art. 1]

Unijne akcje pomocy humanitarnej miałyby być prowadzone w okresie czasu, niezbędnym do zaspokojenia potrzeb humanitarnych, mogących powstać na skutek powyższych zająć i sytuacji. Pomoc ta miałaby obejmować również działania ukierunkowane na zapewnienie