

Chapter 1

OFFENDING BEHAVIOUR PROGRAMMES: HISTORY AND DEVELOPMENT

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INTRODUCTION

The history of crime tells us that the long-standing approach to crime reduction, across many cultures and civilisations, lay in the dispensation of punishment. The favoured punishments for crime took many forms, involving harsh penalties such as amputation, deportation, torture, and even death. It is arguable how effective such punitive strategies proved to be; certainly crime has never been eliminated from any society, but it might well be argued that those criminals who are executed commit very few crimes! It is only comparatively recently that changes in thinking within Western cultures came about that shifted legal systems away from immediate harsh sanctions to the notion that the punishment should fit the crime. The beginnings of classical theory, strongly influenced by Cesare Beccaria (b. 1738) and Jeremy Bentham (b. 1748), introduced to law the notion of utility. Following the principles of utility, the purpose of legal punishment is not to administer harsh punishment, but to deliver just enough punishment to deter the individual from further criminal actions and so prevent crime. Inherent in this approach, now enshrined in Western legal systems, is, first, that criminals act of their own free will in committing a crime, and second that criminals act in a rational manner when exercising free will. The principle of utility and its association with free will and rational choice does not always sit easily alongside psychological accounts of human action. Rather than free will, psychological theories may explain behaviour in terms of a complex interplay between biological, psychological, and social factors. The disparity between classical theory and some psychological theories produces a tension regarding the favoured means to reduce crime (Hollin, 2001a). While conservative classical theory favours punishment to deter the offender, the more liberal social and psychological theories prefer a response to crime that seeks to

2 OFFENDING BEHAVIOUR PROGRAMMES

bring about a reduction in offending through some positive change. This change may be at a social level, as with the provision of welfare, or at an individual level as with attempts to rehabilitate the offender.

As McGuire (2002) suggests, these opposing strategies for reducing re-offending can be classified as *eliminative* or *constructional*. The rationale underpinning eliminative strategies is that linking criminal behaviour to aversive, punishing consequences can prevent it. Thus, within the criminal justice system this approach is seen in sanctions based on punishment and deterrence, such as fines, imprisonment, harsh prison regimes, and intensive supervision and surveillance. In contrast, constructional strategies seek to change criminal behaviour through providing offenders with socially acceptable alternatives to offending. This constructional approach may encompass education, skills training, employment skills training, anger management, and interventions designed to change attitudes and beliefs.

While it is debatable whether punishment motivates offenders to change (Hollin, 2002a), the issue of reducing re-offending has traditionally generated a great deal of discussion. The key questions are whether anything can be done to rehabilitate offenders effectively and, if so, which strategies are most effective in changing criminal behaviour and so preventing crime and reducing rates of re-offending. Moving to recent times, the debate has focused on the competing themes of “nothing works” against “what works”.

“NOTHING WORKS”

The key paper in the “nothing works” stance is “What works? Questions and answers about prison reform” published in 1974 by Martinson. This paper, anticipating a fuller account of the literature (Lipton, Martinson & Wilks, 1975, p. 25) drew the conclusion that “With few and isolated exceptions, the rehabilitative efforts that have been reported so far have had no appreciable effect on recidivism.” Other reviews published around that time had drawn similar negative conclusions about the effectiveness of rehabilitative efforts with offenders (for example, Robinson & Smith, 1971) but it was Martinson’s paper that caught the attention of policy-makers.

The shift away from rehabilitation was felt during the 1980s, alongside a marked political move to the Right, with a view that the criminal justice system should administer “just deserts” to offenders. This return to an eliminative philosophy is seen in practice with the introduction of measures such as “short, sharp shock” prison regimes and boot camps. Despite some academic opposition citing effective interventions (for example, Gendreau & Ross, 1979) and Martinson’s retraction of much of his earlier paper (Martinson, 1979), in practice there was a move away from rehabilitation and treatment towards more punitive measures. The later emergence of rational choice theory (Cornish & Clarke, 1986) prompted governments to invest in situational crime-prevention measures, such as CCTV, electronic tagging and alarms, leaving little room (or funding) for rehabilitation.

An important point highlighted by Martinson (1974) was that poor research methodologies may have been responsible for the negative, nothing works, findings

(Cooke & Philip, 2001). Indeed, Thornton (1987) criticised Martinson's approach to reviewing the evidence as too simplistic for such a complex issue. The problem inherent in narrative reviews lies in the selectivity and interpretation of the reviewer. The conclusions drawn from a narrative review of the literature are inevitably dependent upon the reviewer's own views and, as such, are inevitably open to charges of bias. In the 1980s, the emergence of the statistical technique of meta-analysis as a reliable means of distilling the consistent findings from large bodies of empirical literature became widely used in scientific disciplines. The main advantage of meta-analysis as compared to narrative review is that the process of meta-analysis is much more transparent in terms of the weight given to different studies, the systematic inclusion of key variables, and the process can be replicated. This is not to say that meta-analysis is perfect or without its critics (Hollin, 1999), but its widespread use across many academic disciplines has become an important means of distilling knowledge from large bodies of literature. The first meta-analytic studies of offender treatment appeared as the 1980s merged into the 1990s. The findings from these studies began to have an effect as they began to suggest what worked in reducing re-offending.

"WHAT WORKS?"

Meta-analysis is a statistical technique for reviewing the results of a large number of primary research studies, allowing overall trends in the accumulated data to emerge. Unlike traditional qualitative reviews of research, meta-analysis can control for variations and potential biases in the primary studies, and so produce a quantifiable treatment effect (Cohen, 1988; Glass, McGraw & Smith, 1981). In the offender treatment literature, for example, meta-analysts have developed coding systems that take into account study differences in areas such as offender group, offence type, follow-up period, criterion of outcome, and treatment setting (see Lipsey, 1992; Lipton, Pearson, Cleland & Yee, 2002a, 2002b; Redondo, Sánchez-Meca & Garrido, 2002). Complex coding systems can take account of differences between studies but the utility of meta-analysis can be compromised by the quality of the primary research studies, with problems potentially caused by a lack of or inadequate comparison groups, small sample sizes, and limited follow-up periods. Further, publication bias towards studies that show effects can lead meta-analytic reviews to produce biased results. These potential problems can be avoided as seen with the Correctional Drug Abuse Treatment Effective (CDATE) Study in the US (see Lipton et al., 2002a, 2002b), which consists of over 1 500 primary research studies of offender treatment, published and unpublished, conducted with adult and juvenile, drug abusing and non-drug abusing offenders from a large number of countries. However, this level of intensity of data gathering is neither quick nor cheap, requiring considerable time and funding.

As an outcome, meta-analyses produce effect sizes (ES), which provide a summary figure for the overall impact of an intervention. Following Rosenthal & Rubin (1982), ES can be interpreted as a binomial effect size display whereby it is the percentage difference between two groups – those receiving an intervention and those not receiving an intervention. Thus, a reconviction rate of 40 % in

4 OFFENDING BEHAVIOUR PROGRAMMES

a treatment group as compared to 55 % in an untreated control group would produce an ES of 0.15. Across the offender treatment literature, the average ES of interventions with respect to recidivism has been reported as 10–12 % (Lösel, 1996, 1998). To place this in context, studies of the effect of common medicines have reported ES smaller than those for offender treatment: for example, Rosnow & Rosenthal (1988) reported an ES of 0.068 in a clinical trial of the effect of aspirin in reducing the risk of heart attacks, which is equivalent to a 6.8 % reduction in illness.

As of 2006 there have been 51 meta-analytic studies of offender treatment published since the first reported meta-analysis (Garrett, 1985). For a review see McGuire (2002). They incorporate hundreds of primary research studies (for example, Andrews et al., 1990; Antonowicz & Ross, 1994; Dowden & Andrews, 1999a, 1999b, 2000; Izzo & Ross, 1990; Lipsey, 1992; Pearson, Lipton & Cleland, 1997; Redondo, Sánchez-Meca & Garrido, 1999; Whitehead & Lab, 1989). The meta-analyses carried out by Andrews et al. (1990) and Lipsey (1992) are two of the most widely cited studies and can be used to illustrate this methodology.

Andrews et al. (1990) reported a meta-analytic review of 154 outcome effects from adult and juvenile offender treatment studies. Andrews et al. were concerned to determine whether interventions that applied principles of “human service” or *appropriate* correctional services would be more effective than those interventions that did not apply these principles. Appropriate correctional service was seen as consisting of three key principles: first, the *risk principle* whereby services are directed towards medium- to high-risk offenders; second, the *needs principle* in which interventions target offenders’ criminogenic needs; third, the *responsivity principle* by which interventions are matched to offenders’ learning styles. The findings of the meta-analysis supported the position that appropriate interventions, with a larger ES, were more effective than interventions classified as inappropriate. Lipsey’s (1992) study is the largest published meta-analysis to date, consisting of 443 treatment studies involving juvenile and young offenders aged 12–21 years. Lipsey reported that taking re-offending as an outcome, constructional interventions that were multi-modal, behavioural, or skills-oriented in nature had a significant positive ES. However, *eliminative* deterrence-based interventions had a negative ES, with mixed results regarding the ES of employment-focused interventions.

Most meta-analyses have been carried out with male young offender populations but meta-analyses with other offender populations have been published, including women offenders (Dowden & Andrews, 1999a), sexual offenders (Alexander, 1999; Gallagher, Wilson, Hirschfield, Coggeshall & MacKenzie, 1999; Hall, 1995; Hanson et al. 2002; Polizzi, MacKenzie & Hickman, 1999), drink-drivers (Wells-Parker, Bangret-Downs, McMillen & Williams, 1995), violent offenders (Dowden & Andrews, 2000), and drug abusing offenders (Pearson & Lipton, 1999; Prendergast, Podus & Chang, 2000; Prendergast, Podus, Chang & Urada, 2002). The conclusions from these meta-analyses suggest that effective offender interventions are cognitive-behavioural in nature, take the form of structured programmes with specific aims and objectives, focus on offenders with a high risk of re-offending, have high levels of treatment integrity, are delivered by highly trained staff, have high levels of organisational support, and have in-built monitoring and evaluation

procedures. The congruence in the outcome of the various meta-analyses has led to attempts to crystallise the findings into principles for effective practice in working with offenders to reduce re-offending.

Principles of Effective Practice

A number of syntheses of the meta-analyses are available (see, for example, Andrews, 1995, 2001; Gendreau, 1996; Hollin 1999; Lösel, 1995a, 1995b), which have informed the formulation of the principles of effective practice. Thus, as shown in Box 1.1, in defining “what works” in offender interventions, Andrews (1995, 2001) has derived the 18 “principles of human service” that underpin effective interventions.

Box 1.1 Principles of Effective Practice

1. Interventions with offenders should be based on a psychological theory of criminal behaviour.
2. This theory should have a personality and social learning theory focus to the risk factors for offending.
3. Strategies for intervention should be based on human service, rather than on principles of retribution, restorative justice, or deterrence.
4. Where possible interventions should take place in the community in natural settings (such as the family). However, when it is necessary to use custody, these facilities should be as community-oriented as possible.
5. Offenders’ level of risk of reoffending should be assessed and used as the basis for allocation to services.
6. Offenders’ dynamic criminogenic needs – those needs associated with their offending behaviour – should be assessed and used as targets for interventions.
7. Interventions should be multi-modal in nature in that they should target a range of criminogenic needs to reflect the fact that offending is associated with multiple risk factors.
8. Assessment of level of risk and criminogenic needs should be carried out using validated methods.
9. Interventions should have general responsivity, with services matched to offenders’ learning styles, motivations, and abilities.
10. Interventions should have specific responsivity and be adapted to take account of the diversity of offenders (for example, in terms of age, gender, ethnicity/race, language) and their strengths and limitations.
11. Specific responsivity and offenders’ strengths and weaknesses should be assessed in a routine manner, using specifically designed tools.
12. Organisational strategies should be in place to monitor the continuity of service, including provision for relapse prevention work.
13. Organisations should identify areas of practice in which staff may exercise their personal discretion in applying the principles of appropriate service. These areas should be made clear to all staff.

6 OFFENDING BEHAVIOUR PROGRAMMES

14. Organisations should develop a service-level policy and guidelines for the application of the principles of appropriate service and ensure that it is circulated to all staff.
15. Organisations should set up procedures to monitor the delivery and integrity of interventions, and for dealing with problems. These procedures should include issues such as staff selection, training, supervision, and recording of monitoring information on service delivery.
16. There should be a focus on the development of staff skills, including the abilities to develop relationships, motivate others, and structure programmes and sessions.
17. Managers should have the competencies expected of their staff, plus extensive knowledge and understanding of the principles underpinning interventions. They also need the ability to coordinate procedures associated with programme and site accreditation.
18. At an organisational level, programmatic intervention should be placed within a wider context, with attention paid to differences in local contexts and client groups so as to allow for adaptation of services as necessary.

Lists such as the one shown in Box 1.1 cannot provide an exhaustive set of principles that will absolutely guarantee success in reducing re-offending. However, it is also the case that the knowledge base on what works has significantly improved over the past decade. It is fair to say that we may have a reasonable degree of confidence that these principles provide strong guidance for the development and implementation of interventions, and so provide a basis from which to extend theory, research, and practice.

RESEARCH INTO PRACTICE

In the 1990s the use of manualised programmes to guide the delivery of an intervention was an established means of working in mainstream clinical psychology (Wilson, 1996), and in the specific field of offender treatment manualised programmes were beginning to appear (see Chapter 2 for a fuller discussion). The first offending behaviour programme to be widely used with offenders was Reasoning and Rehabilitation (R & R) developed in Canada in the late 1980s by Ross and Fabiano (Ross, Fabiano & Ewles, 1988; Ross, Fabiano & Ross, 1989). Taking this programme as a starting point, the introduction of offending behaviour programmes within the criminal justice system in England and Wales can be used to highlight many of the issues associated with programme development, implementation, and maintenance (see also Chapter 3 for a consideration of the R & R programme).

Reasoning and Rehabilitation (R & R)

Reasoning and Rehabilitation (R & R) was the first evidence-based, structured cognitive-behavioural programme intended to reduce re-offending. The

programme is based on research concerned with offender's thinking styles and patterns which suggests associations between cognition and offending (Ross & Fabiano, 1985). The aim of R & R is to provide and promote alternative ways of thinking to enable the growth of thinking patterns and skills that are likely to promote prosocial behaviour. Thus, through the use of techniques such as role-playing, rehearsal, modelling, reinforcement, and cognitive exercises, R & R aims to promote reflective, rather than reactive, thinking. Specific targets for change include offenders' self-control, social problem-solving skills, social perspective-taking, critical reasoning, and attitudes and beliefs that support criminal behaviour, with an emphasis on practice to enhance learning and to show how these skills are relevant to everyday life (Goldstein, 1988).

Reasoning and Rehabilitation was designed to be delivered by a range of staff, including prison and probation officers, rather than just professional therapists. The tutors responsible for delivering the programme complete an intensive training process in order to gain the optimum level of skill for effective delivery. Reasoning and Rehabilitation places an emphasis on video monitoring of sessions and provision of formal feedback to staff to help ensure integrity of delivery. Since its inception, R & R has been used in a number of jurisdictions, in both institutional and community settings, including those in Canada, North America, England and Wales, Scotland, Spain, Germany, Scandinavia, Australia, and New Zealand. To date there have been several evaluations (for reviews see Robinson & Porporino, 2001; Tong & Farrington, 2006), which typically show positive results in terms of reconviction among male adults who complete the programme. However, less evidence of effectiveness is available with other offender populations.

The development of R & R in the mid-1980s dovetailed neatly with the emerging principles of effective practice derived from the meta-analyses during the 1990s. Thus, services working with offenders who were seeking to innovate and develop their practice turned to R & R as a readily available programme.

Straight Thinking on Probation (STOP)

In mid-1991, mid-Glamorgan Probation Service in Wales took the bold step of running an adaptation of the R & R programme (Knott, 1995; McGuire, 1995; Raynor & Vanstone, 1996). An evaluation of the programme reported that the actual and the predicted rates of reconviction were the same for the treatment and comparison groups at 12-months follow-up (Raynor & Vanstone, 1997). However, for those offenders who actually *completed* the programme there was a significantly lower reconviction rate than predicted, along with a significantly lower rate of custodial sentences upon reconviction. These positive results were not maintained at a 2-year follow-up.

Sex Offender Treatment Programme (SOTP)

In the early 1990s the English and Welsh Prison Service also pioneered development of treatment programmes based on cognitive-behavioural techniques (see

8 OFFENDING BEHAVIOUR PROGRAMMES

also Chapter 5). The first programme to be developed was for sexual offenders, known as the *Sex Offender Treatment Programme (SOTP)* (Grubin & Thornton, 1994). From its beginning in the early 1990s, treatment for sex offenders in the English and Welsh Prison Service has developed today into a suite of programmes for sex offenders. The *Core SOTP* aims primarily to challenge the cognitions used by sex offenders to justify and excuse their crimes. The Core programme aims to help offenders develop new attitudes and so change their offending behaviour. A version of the Core programme for lower intellectually functioning offenders is available, termed the *SOTP Adapted programme*. The *Extended SOTP* offers a longer, more intensive further programme of work for high-risk and high-need sexual offenders who have completed the Core programme (Correctional Services Accreditation Panel, 2004).

More recently, an intervention for *low* risk sexual offenders, the *SOTP Rolling Programme*, has been introduced, which covers similar areas to the Core programme. Finally, the *Better Lives Booster SOTP Programme* has been developed for offenders who have successfully completed either the Core or the Extended SOTP programme. The Better Lives programme is designed to allow prisoners to concentrate on their individual treatment needs and to make plans for release. There are two versions of the Better Lives programme: a high intensity version for offenders who are close to their release date, and a low intensity version aimed at offenders who have completed an SOTP programme early in their sentence and require maintenance or refresher work during their time in custody. This programme has also been adapted for use with low intellectually functioning sexual offenders. Research evaluating the effectiveness of sexual offender programmes has shown mixed results (for a recent review, see Beech & Mann, 2002). Where positive results in terms of sexual reconviction have been found, these have typically been among medium-low and medium-high risk men who have been responsive to treatment (Beech, Erikson, Friendship & Ditchfield, 2001; Friendship, Mann & Beech, 2003b).

Community treatment programmes for sexual offenders also began to be implemented in England and Wales during the 1990s, with interventions typically providing about 50 hours of treatment (Barker & Morgan, 1993). By the mid-1990s Proctor & Flaxington (1996) reported a doubling in the number of probation areas offering sex offender programmes, and an increase in the average treatment duration to 81 hours. The first systematic evaluation of these programmes was carried out by Beckett, Beech, Fisher & Fordham (1994), using psychometric measures to assess psychological factors related to sexual offending. In this study, treatment success was greater among child molesters and low deviancy men and for longer programmes using highly skilled therapists.

A 2-year reconviction study of these men reported by Hedderman & Sugg (1996) showed a lower rate of sexual reconviction as compared to a comparison group, although there was no analysis of statistical significance. In 2001, Beech et al. reported a six-year follow-up of the 53 child molesters from the original Beckett et al. study. Although this study did not include a comparison group, only 10% of those men who were classified as "benefiting from treatment" based on change on psychometric measures were reconvicted as compared to 23% of those classified as "not having responded to treatment". Furthermore, rate of reconviction was also

predicted by risk of reconviction using the Static-99 (Hanson & Thornton, 2000) and level of sexual deviancy.

Since the late 1990s three accredited programmes for sexual offenders have been developed and implemented within the Probation Service in England and Wales for use with both sexual offenders serving community sentences and those released on licence from prison. These programmes are the Community-Sex Offender Group Programme (C-SOGP) designed by West Midlands Probation Area and developed in collaboration with the Home Office; the Thames Valley-Sex Offender Group-work Programme (TV-SOGP) set up by the local health, police, and social services and developed with the Home Office; and the Northumbria-Sex Offender Group Programme (N-SOGP), developed by Northumbria Probation Area and staff from the Sexual Behaviour Unit, St Nicholas Hospital in Newcastle.

All three programmes target sexual re-offending among adult male offenders, with the TV-SOGP also including work to support the partners of perpetrators. The dosage of intervention received by offenders depends on assessed level of risk and deviance, ranging from 100 hours to 260 hours according to risk level and programme. A relapse prevention module is included in each programme, and forms the minimum requirement for each programme. Offenders who are released on licence from prison who have successfully completed the Prison SOTP may go directly to the relapse prevention modules, depending on initial assessment. More detailed descriptions of these three programmes are provided in Mandeville-Norden & Beech (2004).

To date, there have been few published evaluations of these three programmes, and those that do exist collected data prior to the programmes being accredited. Therefore, the programmes evaluated may differ from those currently being used. Allam (1998) reported a reconviction study of the pre-accredited West Midlands programme, comparing programme participants with a comparison group of sexual offenders who had received alternative community sentences. The follow-up period varied across the sample but was 2.5 years on average. Although no test of statistical significance was calculated, participants in the programme had lower rates of reconviction than the comparison group, a finding that held for child molesters (3.2% versus 10.6%), rapists (7.7% versus 26.3%), and exhibitionists (17.8% versus 37.5%).

Data were collected on participants in the TV-CSOG programme from 1995–1999, and re-offending examined using information from a Home Office database, a police database, and local probation files (Falshaw, Bates, Patel, Corbett & Friendship, 2003). After a mean follow-up period of 3.9 years (range 2.0–5.9 years), the two sources of official convictions suggested between 5 (3%) and 15 (9%) men had been reconvicted for a sexual offence. However, when information about any offence-related sexual behaviour (re-offending and reconviction) was examined from probation files, recidivism among the sample rose to 21%.

Enhanced Thinking Skills (ETS)

Enhanced Thinking Skills is a general cognitive skills programme, developed by the English and Welsh Prison Service (Clark, 2000), which addresses similar targets to

10 OFFENDING BEHAVIOUR PROGRAMMES

R & R (see also Chapter 3). Initially used within the Prison Service, since 2000 it has been used in the National Probation Service in England and Wales. As with R & R, evaluations have shown ETS to be effective in institutional settings with adult male offenders who complete the programme (Blud, Travers, Nugent & Thornton, 2003; Cann, Falshaw, Nugent & Friendship, 2003; Falshaw, Friendship, Travers & Nugent, 2003; Friendship, Blud, Erikson & Travers, 2002; Friendship, Blud, Erikson, Travers & Thornton, 2003). Furthermore, the initial reconviction outcome data are positive for offenders who complete the programme in the community in England and Wales (Hollin et al., 2004). Once again, however, less evidence is available for other offender populations and settings.

Think First

The Think First programme is a third general cognitive skills programme developed in England and Wales (McGuire, 2000) and also initially used in the Prison Service and later in the Probation Service (see also Chapter 3). Think First is similar both to R & R and ETS in its content and aims, but differs in that it has a more explicit focus on offending behaviour and includes material requiring offenders to analyse specific offences they have committed. Think First includes pre-group sessions given to preparation, engagement and motivation work, and post-group sessions to work at relapse prevention strategies. A preliminary evaluation of Think First in the English and Welsh Probation Service (when it was called *Offence-Focused Problem Solving*) reported significant reductions in criminal attitudes and locus of control and significant increases in self-esteem after participating in the programme (McGuire & Hatcher, 2000). The evaluations conducted in the English and Welsh Probation Service have shown significant decreases in reconviction among offenders who complete the programme as compared to non-starters and non-completers (Hollin et al., 2004; Roberts, 2004).

DELIVERING AND MAINTAINING EFFECTIVE PRACTICE

As programmes gained a momentum during the 1990s it became apparent that two issues demanded attention if the principles of effective practice were to be translated into action. First, new and existing offending behaviour programmes would have to demonstrate that they embodied the principles that emerged from the meta-analyses. Second, if well-designed programmes are to be effective, then the quality of delivery is essential: high-quality delivery means that the programme sessions that are delivered in practice must be as close in content as possible to that intended by the programme developers. There are several publications that document a range of barriers – such as resource allocation, professional clashes, and management failure – to the successful implementation of programmes (Cullen & Seddon, 1981; Laws, 1974). As recognised by some practitioners and researchers, good programme management is the key to successful implementation of offending behaviour programmes (for example, Bernfeld, 2001; Hollin, Epps & Kendrick, 1995).

The problem of maintaining practitioner adherence to a set of methodological principles is common in clinical practice and has variously been called “treatment fidelity” (Moncher & Prinz, 1991) and “treatment integrity” (Quay, 1987). In the mainstream clinical literature the topic of treatment integrity continues to be seen as critically important with regard to its definition (Dobson & Singer, 2005), its implications for professional training (Flannery-Schroeder, 2005), and its interaction with outcome research (Perplechikova & Kazdin, 2005). The importance of maintaining treatment integrity applies equally to offending behaviour programmes (Andrews & Dowden, 2005; Hollin, 1995). Indeed, exactly the same issue is apparent in other spheres of life: after a talk to a public audience (Hollin, 2002b), a comment was made from the floor that a recurrent problem in the insurance field is ensuring that those people selling policies actually do adhere to a set of legal and professional procedures.

The response to these two issues, ensuring high-quality programme development and managing treatment integrity in delivery, lies in the notion of *programme accreditation* and in systems of *programme audit*.

Programme Accreditation

As offending behaviour programmes were implemented in different countries, including England and Wales, Scotland, Canada, Scandinavia, Australia, and New Zealand, this led to the drawing up of formal procedures and guidelines for developing programmes. In the mid-1990s, with the adoption of SOTP and R & R, the English and Welsh Prison Service took on the pioneering task of developing accreditation criteria for the design of offending behaviour programmes. This initiative began, during a grey week in a hotel in East Grinstead, Sussex, with a small group of academics, consultants, and civil servants, under the stewardship of David Thornton, charged with the task of defining the gold standards by which offending behaviour programmes could be judged (Lipton, Thornton, McGuire, Porporino & Hollin, 2000). The product of the machinations of this group was a set of so-called accreditation criteria that aimed to set the standards by which programmes could be evaluated (Thornton, 1996). From 1996 onwards this same group, with several new members, met regularly over the next few years, refining the criteria (Thornton, 1998) and acting as a general accreditation panel (GAP) on behalf of HM Prison Service for a range of programmes. A similar but separate panel, the Sex Offender Treatment Accreditation Panel (SOTAP), composed of experts in the sex offender field, was instituted for SOTP. The work of these panels came to be seen as an important part of the drive within the Prison Service for high standards.

In 1999 the status of the panels changed significantly. The two panels, GAP and SOTAP, were amalgamated to form the Joint Accreditation Panel (JAP), with the additional remit that programmes delivered within the Probation Service also came under the new panel’s sphere of activity. The formal status of JAP also changed as it became an advisory non-departmental public body with formal independence from the Home Office, and with an independent chair reporting directly to the Minister. In 2002 JAP was renamed the Correctional Services Accreditation Panel (CSAP). The formal duties of CSAP, as fell similarly to its predecessors, are to

12 OFFENDING BEHAVIOUR PROGRAMMES

review the criteria for programme design and delivery, and where appropriate make recommendations for changes; to accredit programmes; to authorise audit procedures for programme delivery; to authorise the annual assessment of delivery quality; to conduct an annual review of developments in the evidence base and where appropriate provide advice from this review to inform the development of programme design; to provide advice on training; and to receive reports on the effectiveness of programmes and so advise on the implications of these reports (Prison Service Order 4360, 2004). In an exercise in reviewing the reviewers, the work of CSAP has been examined by a commissioned review team (Rex, Lieb, Bottoms & Wilson, 2003).

Accreditation Criteria

The gold standards for programme design, as originally formulated in the mid-1990s, have stood the test of time remarkably well. Currently, there are 10 accreditation criteria, which are similar to the original criteria, as shown in Box 1.2.

Box 1.2 Outline of CSAP Accreditation Criteria for Offending Behaviour Programmes

1. Programmes must have a clear model of change.
2. The selection of offenders must be justified.
3. Target a range of dynamic risk factors.
4. Programmes should use effective methods of change.
5. Programmes should be skills oriented.
6. Sequencing, intensity and duration of treatment should be justified.
7. Attention should be given to the engagement and motivation of offenders taking part in the programme.
8. Continuity of programmes and services within sentence planning.
9. Programmes should show how they will maintain integrity.
10. There should be procedures to allow the continued evaluation of a programme.

Model of Change

Programmes should have a clear theoretical model of change, fully articulated in a Theory Manual, which explains the principles by which the programme will achieve the intended outcome. This model will provide a coherent basis, supported by the theoretical and empirical literature, for the nominated targets and methods for change within the programme.

Selection of Offenders

Programmes will have clear criteria for the selection of offenders, with inclusion and exclusion criteria, as well as criteria for expelling offenders from the programme.

The procedures and assessments to be used for selection must also be fully detailed.

Target a Range of Dynamic Risk Factors

Dynamic risk factors are those aspects of an offender's functioning that are related to their offending and which can be changed. For example, a long history of offending is predictive of offending but cannot be changed: this would be a *static* risk factor. On the other hand, factors related to offending such as employment status and substance use can be changed and so are *dynamic* risk factors. Offending is often related to several risk factors, therefore programmes should target a justified range of dynamic risk factors. Further, procedures should be in place to measure any changes that occur in these factors over the course of the programme.

Effective Methods

The educational and behaviour change methods used to bring about change in offenders' dynamic risk factors, and hence their offending behaviour, should be supported by empirical evidence with the target population.

Skills Oriented Targets

While programmes might seek to bring about change in cognitive and affective aspects of an offender's functioning, they should encompass targets that are skills oriented. Therefore, programmes should aim to assist offenders develop those life and social skills that will help avoid offending and gain other rewards.

Sequencing, Intensity and Duration

Formally known as "dosage", this criterion is concerned with matching the level and intensity of the programme, in terms of number and frequency of sessions, with offenders' level of risk. Further, where offenders take part in more than one programme, the sequencing of programmes and components of treatment should be planned with regard to offenders' overall treatment needs.

Engagement and Motivation

From the point of selection to take part in a programme, attention should be paid to offenders' engagement and motivation. In this light, programme attendance and completion rates should be monitored, along with recording the reasons for non-attendance of sessions and non-completion of programmes.

Continuity of Programmes and Services

The provision of programmes should take place within a coherent sentence planning process. This point applies both within services and between services.

14 OFFENDING BEHAVIOUR PROGRAMMES

Maintaining Integrity

A programme must have strategies in place to monitor programme integrity in order to demonstrate that the sessions are being delivered as intended. These strategies should include procedures to provide staff with constructive feedback on their practice.

Ongoing Evaluation

There will be continued monitoring and evaluation of programmes with respect to their effectiveness. The evaluation should encompass both processes, as in change on the targeted dynamic risk factors, and outcome as with re-offending.

As discussed in Chapter 2, the emergence of programmes has seen a marked move towards the use of manuals. The CSAP requires all offending behaviour programmes seeking accreditation to be fully manualised, with no fewer than five manuals required. A *theory manual*, which details the theory and its supporting research evidence that underpins the programme's model of change. A *programme manual*, which details each programme session and links the targets for change to the model of change presented in the theory manual. An *assessment and evaluation manual* provides full details, including administration, scoring, and interpretation, for all the measures used for assessment and evaluation within the programme. A *management manual* detailing the procedures for staff selection, training, and appraisal; the criteria for the selection and assessment of offenders for the programme; the minimum operating conditions for the programme; procedures for monitoring and evaluating the programme; and the roles and responsibilities of staff relating to the programme. Finally, a *staff training manual* provides details of all training for those staff involved in the programme, including both management and delivery personnel, alongside details of the procedures for assuring the competence of staff and regular reviews of staff performance.

Thus, the accreditation criteria set high standards for the development, implementation, and maintenance of offending behaviour programmes. These standards give a clear platform for organisations seeking to develop programmes to meet the needs of their particular client group (Hollin, 2001b). Those organisations with similar programmes have developed parallel systems. For example, the Scottish Prison Service (SPS) has seven programme design accreditation standards, so that a programme must show the following: (1) that it has a clear rationale and outcomes are clearly stated; (2) that it uses effective methods of prisoner selection and support; (3) that it uses appropriate means of assessing prisoner progress; (4) that it ensures benefits for the prisoner both during and after delivery; (5) that there are criteria for selecting, training, and supporting delivery staff; (6) that the resources and conditions for implementation are identified; and (7) that there is a commitment to continuous quality improvement (Scottish Prison Service, 2003). The SPS Accreditation Panel works to these standards and each standard has a set of supporting criteria. For example, Standard 1 is that a programme has a clear rationale and outcomes are clearly stated and there are four supporting criteria to be met.

At the onset, the accreditation criteria were designed for use with "stand-alone programmes", such as R & R, where the programme is self-contained and delivered

within a single setting such as a prison. As thinking has evolved, so programmes have been seen as a way of crossing institutional boundaries, linking work across a range of agencies. For example, the STOP programme developed by County Durham probation was designed to be delivered initially in prison then for the work to progress into the community, involving criminal justice agencies, state services such as health and education, and the voluntary sector (Hollin, 2002c). Other examples include resettlement programmes that are delivered through the prison door into the community (Lewis et al., 2003). The feature of such approaches is that they extend the notion of a programme to a means of working that seeks to work within and across the various systems responsible for public protection and the offender's welfare. This change in emphasis has been recognised with the development of a set of parallel accreditation criteria for *integrated systems* approaches to working with offenders. An integrated system is seen as a network of services to which offenders are referred based on their assessed level of risk and areas of need. An integrated system delivers a range of activities to offenders, such as accredited programmes, health services, accommodation services, and education, in a planned, managed, and coherent manner. However, as with stand-alone offending behaviour programmes, the main aim of an integrated system is to reduce offending. For comparison purposes, the nine CSAP accreditation criteria for integrated systems are as follows:

1. *Integrated models of change.* Systems should have explicit inter-related theoretical models of change, supported by the theoretical and empirical literature, that provide a clear basis for how the system will lead to changes in targeted areas and reduce offending.
2. *Assessment and allocation.* There should be clear criteria, including inclusion and exclusion criteria, for selection and allocation of offenders into systems and the various elements within the systems.
3. *Effective methods and services.* The methods and services used within systems to change offenders' risk factors or enhance protective factors to reduce offending should be supported by empirical evidence relevant to the target population.
4. *Skills and opportunities.* Systems should aim to provide offenders with life and social skills to help avoid offending and gain prosocial rewards.
5. *Sequencing, scale and intensity.* The allocation of offenders to services, in terms of scale, intensity, and sequencing of service delivery, should be matched to their level of risk.
6. *Engagement and motivation.* Systems should aim to engage and motivate offenders throughout their period of supervision.
7. *Planning and integration.* Systems should ensure that the different elements of intervention are integrated within a case management, supervision, or sentence plan.
8. *Monitoring to maintain effectiveness.* Systems should have quality assurance systems in place to monitor effectiveness, as well as procedures to deal with practice that departs from the plan.
9. *Ongoing evaluation.* Systems should be continually evaluated with respect to their effectiveness: effectiveness might include change in targeted dynamic risk factors, enhancement of protective factors, and levels of offending.

16 OFFENDING BEHAVIOUR PROGRAMMES

As is the case with stand-alone programmes, integrated systems are also required by CSAP to submit documentation when seeking accreditation. This documentation takes the form of a Core Manual with two main sections: the *theory and design* section and the *implementation and evaluation* section. The *theory and design* section will give the theoretical base and model of change for the integrated system, supported by the empirical literature relevant to the targeted population. This section should specify the targeted risk factors and how each element of the system will target these risk factors. The elements of the system should be detailed in terms of their aims, objectives, and content, and the association between these elements and the model of change should be shown using supportive evidence. This section of the manual should also discuss diversity issues, the interaction between elements of the system, and the model of overall case management.

The *implementation and evaluation* section describes each element of the system and its interaction with other elements to set the benchmark for delivery. The minimum operating requirements for delivering the system should be laid out, alongside exactly how the elements link together in practice. Staff roles and responsibilities should be detailed in this section, along with procedures for assurance of staff competencies, including training, assessment, and regular performance reviews. The procedures for selection of offenders should be outlined, including details of assessment tools and guidelines for their use and interpretation, alongside treatment integrity and audit procedures, and details of evaluation systems, including administration and interpretation information on tools used in these procedures.

Although separate criteria exist for stand-alone programmes and integrated systems, the parallels between the two are evident from an accreditation perspective. In both cases the aim is to set high standards with respect to quality of the design of offending behaviour programmes. While the drive for excellence in programme design was an obvious step towards effective practice, the eventual outcome of any programme ultimately depends on the quality of its delivery. In order to determine the quality of delivery it is necessary to have a means by which to conduct a programme audit.

Programme Audit

The concept of programme audit as a means of ensuring high levels of treatment integrity was a new idea in the Prison Service in England and Wales in the mid-1990s. The general assumption in many areas of practice is that practitioners have autonomy to do what they judge to be in the best interests of their clients. Within the context of manualised behaviour change programmes, the concept of treatment integrity challenges this assumption of practitioner autonomy. Hollin (1995) draws on the wider therapeutic literature to describe three threats to programme integrity. First, *programme drift* refers to the gradual shift over time in the practices and aims of a programme, perhaps as practitioners change and focus is lost. Second, *programme reversal* where there is active resistance and opposition to the programme methods and there are efforts to undermine the workings of the programme. Third, *programme non-compliance*, which refers to a situation where practitioners decide

independently to re-work the programme, adding new sessions and dropping others, introducing new methods, and altering the targets for change. In all three cases, to a greater or lesser extent, the end result is the same: the programme's integrity is compromised and, following one of the key findings from the meta-analyses, its potential effectiveness curtailed.

A system of regular programme audit provides one means with which to try to detect active threats to integrity and so maintain high levels of practice. Hollin (1995) describes three sources of information that can be used to manage integrity. First, outside, independent observation of the conduct of programme sessions; second, client report of their experiences in participating in a programme; third, practitioner self-reports of their own practice. Of course, these three methods are not exclusive and, arguably, should all be used in order both to give a wide range of information and as a means by which to triangulate findings. As noted by Blud et al. (2003), the introduction of offending behaviour programmes into HM Prison Service was accompanied by a system of audit.

The Prison Service audit was conducted using an annual visit to each prison running offending behaviour programmes. Blud et al. note that the audit visit covered four areas. First, *institutional support* which is concerned with the operation and management of the programme within the prison. Second, *treatment support*, which covers issues such as the selection of staff to deliver the programme, the proper application of the selection criteria for prisoners who might enter a programme, and the supervision and support of staff delivering programmes. Third, *throughcare* refers to the continuity of work initiated in the programme across other services. Fourth, *quality of delivery* looks at aspects of programme delivery such as dropout and completion rates, and critically uses video monitoring of sessions to determine adherence to the programme manual.

The Scottish Prison Service (SPS) has seven standards to inform implementation accreditation (as opposed to design accreditation). These seven standards are: (1) that staff are appropriately managed and supported; (2) that staff are systematically selected; (3) that programmes are appropriately delivered; (4) that programmes are appropriately managed; (5) that suitable rooms and equipment are available; (6) that documentation is of a good standard; (7) that programmes are monitored and evaluated. In the SPS system, as with their programme design standards, each programme implementation standard has a set of supporting criteria that produces the evidence that the standard is being met. Further, alongside each criterion the sources for the evidence, which the audit team will approach, are made explicit. For example, Standard 1 of the Implementation Standards requires that staff are appropriately managed and supported. There are 13 criteria by which evidence is gathered for this criterion: for example, criteria 1.5 states "Programme facilitators are provided with initial and continued training and development"; the sources of evidence for this criterion are the programme manager in the prison and the SPS College records.

In a similar vein, *The Correctional Programme Assessment Inventory* (CPAI) (Gendreau, Goggin & Smith, 2002) provides a system for measuring programme quality (see also Chapter 7). As shown in Box 1.3, the 75-item CPAI gathers management information across six domains, proving a very full picture of the running

18 OFFENDING BEHAVIOUR PROGRAMMES

Box 1.3 Components in the CPAI (after Gendreau et al., 2002)

1. *Programme implementation.* The experience and qualifications of those who initiate a programme.
2. *Client pre-service assessment.* The assessment of offender risk and need in conjunction with the type of offender for whom the programme is intended.
3. *Programme characteristics.* The nature of the programme and the quality of the associated protocols and documentation.
4. *Staff characteristics.* The levels of staff experience and training in implementing and running programmes.
5. *Evaluation.* The type of quality assurance mechanisms in place, process evaluation, and outcome evaluation.
6. *Other.* The ethical guidelines and standards for the programme, and funding mechanisms to maintain the programme.

of a programme. Gendreau et al. (2002) report that the CPAI has been used widely in practice, with three large-scale programme reviews (involving a total of over 400 programmes) also conducted using the CPAI. Gendreau et al. use examples from these reviews, nested within the six domains that form the instrument, to give examples of how programme implementation and maintenance can go wrong in the real world.

The research evaluating multi-systemic therapy (MST) has consistently examined the role of treatment integrity (Brown et al., 1997; Henggeler, Melton, Brondino, Scherer & Hanley, 1997; Henggeler, Pickrel & Brondino, 1999). These studies have shown the value of therapists receiving high levels of management support through organisational policies, provision of appropriate resources, competitive salaries, and support for completing required documentation (for a summary, see Edwards, Schoenwald, Henggeler & Strother, 2001). A practical implication of this research has been the development of a site assessment checklist to assess organisations' ability to implement MST. This checklist assesses a wide range of issues, including broad topics such as an organisation's mission and service philosophy as well as specific issues like provision of computers, telephones, and fax machines for therapists (Edwards et al., 2001).

Similarly, Goldstein & Glick (2001) note four key management principles that underpin the successful implementation of Aggression Replacement Training (ART) (Goldstein, Glick & Gibbs, 1998). First, managers should respect the programme work and the staff who deliver it, and in turn practitioners should respect the work of managers. Second, there is a need for good communication among all staff involved in programme. Third, there should be a clear delineation of staff roles and responsibilities that provide clear lines of accountability. Fourth, shared ownership of the programme should be promoted through joint planning of the implementation and delivery of the programme.

In conclusion, by the end of the 1990s it was evident that the findings from the meta-analyses had been assimilated into mainstream thinking about offender rehabilitation. The basic work on programme accreditation and audit had been carried out, in the UK and elsewhere, and in the UK large-scales initiatives were being set up in both the Prison Service and the Probation Service. Indeed, an evaluation

based on a sample of more than 4 000 offenders in the Canadian federal system (Robinson, 1995) illustrates the scale on which programme implementation could be contemplated. However, as discussed in Chapter 2, the shift from small, local projects to large, even national, initiatives brings its own problems.

2000 AND ONWARDS: WHAT'S HAPPENED?

Since the turn of the century there have been significant developments in three areas connected with offending behaviour programmes. First, the range of available programmes has increased markedly; second, there has been a growth in the number of published evaluations of programmes; third, following the large-scale, national implementation of programmes in the UK it is possible to gauge opinion regarding their reception into services.

Programme Development

Increasing the Range of Programmes

Programme development has become a widely appreciated skill and, as the most recent CSAP report shows, there is no shortage of well-developed, accredited programmes in the Prison and Probation Services of England and Wales (Correctional Services Accreditation Panel, 2004). Since its inception in 1999 JAP, later CSAP, has accredited 27 offending behaviour programmes and recognised or provisionally accredited four programmes, one integrated system, and a model for a prison therapeutic community. With the exception of the SOTP, the offending behaviour programmes developed during the early- and mid-1990s were *general* programmes in the sense that they did not discriminate between the types of offender or offence for which they were designed. (A *cognitive skills booster* programme, for use in the prison and probation services, for offenders who have completed one of the general offending behaviour programmes has been developed. Further, a one-to-one cognitive skills programme is available for use in the Probation Service for offenders for whom group work is not suitable (Priestley, 2000).)

Since 2000, however, a range of specialist programmes have been developed that target either specific offenders or specific offence types (Correctional Service Accreditation Panel, 2004). These accredited specialist programmes include three focused on violence and anger management. The *Cognitive Self-Change Programme* is an adaptation of a North American programme, and is accredited for use in the Prison Service. The Canadian programme *Controlling Anger and Learning to Manage It* (CALM) is a cognitive-behavioural programme used in both the prison and probation services. Finally, an adaptation of the US programme *Aggression Replacement Training* (ART) (McGuire & Clark, 2004) has been accredited for use in the Probation Service.

For domestic violence offenders there are two accredited programmes. The Prison Service uses an adapted version of the *Canadian Healthy Relationships Programme*, while the Probation Service delivers an *Integrated Domestic Abuse Programme* to male offenders, which is based on the Duluth model of working with

20 OFFENDING BEHAVIOUR PROGRAMMES

domestic abusers and their victims (Pence & Paymar, 1993). A range of sex offender programmes suitable for use in the community are now accredited by CSAP, as detailed in the 2003–2004 CSAP Report: these three are the *Community-Sex Offender Group Programme*, the *Thames Valley-Sex Offender Group Programme*, and the *Northumbria-Sex Offender Group Programme*. A programme for psychopathic offenders, *Chromis*, has been developed for use in prisons and a pilot trial is underway in the Westgate Unit at HMP Frankland and the Peaks Unit at Rampton Hospital (HM Prison Service, 2005).

Various programmes for offenders who misuse substances have been developed within the Prison Service, with some programmes run in partnership with specialist drug agencies. These prison-based programmes include the *Substance Abuse Treatment Programme*, and the *Prisons Partnership 12-Step Programme*. There are four programmes of varying intensity, aimed at prisoners with different risk levels: *Prison-Addressing Substance-Related Offending* (P-ASRO), *FOCUS*, *Action on Drugs*, and *STOP*. Within the Probation Service there are two programmes for work with substance-misusing offenders, the programme *Addressing Substance-Related Offending* (ASRO); (McMurrin & Priestley, 1999, 2004) is designed to be delivered in a group setting. A similar programme, *Priestley Reducing Individual Substance Misuse* (PRISM), is designed for delivery on a one-to-one basis. An accredited substance use programme with a different focus, used within the Probation Service, is the *Drink-Impaired Drivers* (DIDs) programme for drink-related driving offenders.

A therapeutic community (TC) operating within HMP Grendon has been accredited. This TC provides treatment for prisoners with specific emotional and psychological needs that are unlikely to be met through participation in shorter interventions. On average, prisoners stay in the therapeutic community for 18 months, with a recommended maximum of 3 years. Other accredited prison-based TCs address drug use and offending behaviour among prisoners with a substance-misuse problem, or offer cognitive-behavioural interventions within a therapeutic milieu.

Since 2000 one Integrated System, an *Enhanced Community Punishment* (ECP) programme, has been seen by the CSAP. This programme is for use with offenders serving a Community Punishment Order or the Community Punishment element of a Community Punishment and Rehabilitation Order in the Probation Service. The ECP Integrated System aims to reduce re-offending by maximising offenders' learning opportunities, both through high levels of contact with probation staff and via engagement in unpaid work in the community, for prosocial and anticriminal attitudes and behaviours.

The growth both in number of programmes and management sophistication in England and Wales can also be seen in several other jurisdictions. Of particular note are Canada and Scotland, which have a range of programmes and accompanying accreditation systems and criteria similar to those used in England and Wales.

Programme Design and Delivery

The effectiveness of a programme may be affected by the level at which an offender participates and engages in programme sessions. The responsivity principle, drawn from the meta-analyses, states that programme design and delivery style should be matched to offender characteristics in order to increase an offender's engagement

with a programme (Andrews & Bonta, 2003; Andrews et al., 1990). Since 2000, increasing attention has been paid to making the responsivity principle operational. There are two issues to address in this respect. First, does the programme address the criminogenic needs of the target group? Second, is the programme content engaging and relevant to the target group?

As Ogloff (2002) notes, most offender treatment programmes are designed for white, adult, male offenders. It follows that it cannot be assumed that other offender groups, such as women, young offenders, and offenders from different ethnic and cultural groups, will present with the same criminogenic needs. It is entirely possible that at least some criminogenic needs will vary according to the personal, cultural, and social factors relevant to different offender groups. For treatment to be at its most effective, it should also be sensitive to these specific needs (Bonta, 1995). However, the process of establishing the exact nature of the criminogenic needs of different offender groups is a complex empirical task. Nonetheless, attempts have been made at designing programmes for specific offender groups. For example, the *Women's Acquisitive Crime* programme, designed by the Canadian company T3 Associates and run in the Probation Service, is intended for women offenders who have committed offences of an acquisitive nature (Lovbakke & Homes, 2004). This programme uses a motivational approach based on the Stages of Change model (Prochaska, Norcross & DiClemente, 1994). The principle of designing programmes for particular groups is further seen in programmes for young offenders (Ross & Hilborn, 2003), racially motivated offences (Hollin & Palmer, 2001), Black and Asian offenders (Powis & Walmsley, 2002; Stephens, Coombs & Debidin, 2004), and indigenous aboriginal offenders (Cull & Wehner, 1998).

With relevance to programme content, Andrews (2001) made the distinction between *internal* and *external* responsivity factors. Internal responsivity refers to the characteristics of offenders that may impact on their ability to participate in and benefit from treatment: this includes characteristics such as age, gender, ethnicity, intellectual functioning, levels of motivation, and other personality characteristics (Kennedy, 2000). Programme designers and practitioners can address these issues by ensuring that the content and pace of programmes are matched to these offender characteristics. In contrast, external responsivity refers to "organisational factors" such as characteristics of both the staff responsible for programme delivery and the physical setting in which a programme is offered.

Meta-analytic reviews have shown the importance of the responsivity principle in offender programmes (for example, Andrews et al., 1990; Lipsey, Chapman & Landenberger, 2001; Redondo et al., 2002). Further support for the role of responsivity can be found in meta-analyses with specific offender populations, including violent offenders (Dowden & Andrews, 2000), women offenders (Andrews & Dowden, 1999; Dowden & Andrews, 1999a), young offenders (Dowden & Andrews, 1999b), and sexual offenders (Gallagher et al., 1999; Polizzi et al., 1999).

Programme Evaluation

It might be thought at the outset that the case for offending behaviour programmes is proven, that the meta-analyses have shown that treatment "works". Indeed, the meta-analyses have highlighted an overall treatment effect nested within the

22 OFFENDING BEHAVIOUR PROGRAMMES

literature, which offers support to this approach, but this effect is an aggregated statistical effect across different treatment modalities rather than a consistent effect of a single approach. A critical dimension in the development of “what works” offending behaviour programmes is the careful evaluation of the effects of individual programmes.

In practice, how to know whether or not an intervention is working is an issue faced in many fields (for example, Long & Hollin, 1998). With regard to evaluating offending behaviour programmes, Friendship, Falshaw & Beech (2003) present a comprehensive model that links the outcome of the programme with the climate of delivery and programme integrity.

Friendship et al. distinguish between short-term outcome, such as changes in the offenders’ behavioural functioning, long-term outcome as in changes in offending, and the cost-effectiveness of the programme. Thus, assuming the programme is delivered with integrity, there are three dimensions to consider in evaluating programmes. First, do programmes impact on short-term *process* variables? Second, do programmes significantly effect the *outcome* targets? Third, are programmes *cost-effective* to deliver? Again, programmes within England and Wales can be used to highlight the issues in programme evaluation (for a more detailed consideration of these issues, see Chapter 2).

Evaluating Process

Offending behaviour programmes are designed to help the offender bring about change in some aspect of their functioning, such as anger control or employment skills, and through this change there is an increased likelihood of a reduction in criminal behaviour. One level of evaluation is therefore to see whether programmes are effective in modifying the targets they intend to change – the process by which the outcome of reduced offending is to be achieved. Blud et al. (2003) looked at the effects of taking part in two prison-based offending behaviour programmes, R & R and ETS, on pre- and post-programme scores on a range of measures of cognitive functioning. From an analysis of data gathered from over 2 500 prisoners, Blud et al. (2003, p. 74) noted that “The majority of measures in the assessment battery evinced modest change in the desired direction . . . indicating a particular impact of programmes on the targeted behaviour of short-cut, lazy problem-solving where little heed is paid to personal responsibility.” This change was greater for women prisoners than for men, and for high- rather than low-need prisoners. Blud et al. were also able to report associations between process measures, programme management, and level of treatment integrity. These relationships were seen in the significant associations between efficient management of programme tutors within prisons and change on the assessment battery and rates of programme completion, and between video-monitoring scores of integrity and programme audit scores for institutional support for programmes and treatment management. As Blud et al. (2003, p. 78) conclude, “Better quality programme delivery was associated with better programme administration on all fronts.” An important aspect of the Blud et al. study is the detailed analysis of process data, actually looking to see how the effects of a programme are mediated by offender characteristics and institutional performance.

Wilson, Attrill & Nugent (2003) investigated the effects of R & R and ETS on a range of process measures for three groups of offenders (including both men and women) serving prison sentences. The three groups were 2 537 non-acquisitive offenders who had no record of conviction for an acquisitive offence, 2 427 "medium acquisitive" offenders with between one and three convictions for acquisitive offences, and 3 339 offenders with more than four convictions for acquisitive offences. Following the offending behaviour programme, all three groups showed significant patterns of change, in the predicted direction, on a range of measures of cognitive functioning.

Evaluating Outcome

Beech et al. (2001) conducted a 6-year follow-up of 53 male sex offenders who had participated in community-based sex-offending programmes. They reported that the overall reconviction rate was 15%: however, for those offenders who had responded to treatment the reconviction rate was 10% compared to 23% for men who had not responded to treatment. Friendship, Mann & Beech (2003a) compared the 2-year sexual offence reconviction rates for 647 men who had completed the prison-based Sex Offender Treatment Programme (SOTP) with those of a comparison group, composed of 1 910 men imprisoned for a sexual offence but who had not taken part in SOTP. The overall sexual offence reconviction rate was typically low for both the SOTP (2.6%) and comparison groups (2.8%), making it difficult to draw any firm conclusions about the effects of the programme. The issue of a low base rate in reconviction, as seen with sexual offending, is an issue that produces difficulties in programme evaluation (Friendship & Thornton, 2001). When Friendship et al. (2003a) compared the reconviction rates of the two groups for sexual and violent offences there was a trend to a significantly lower reconviction rate in the SOTP group.

The first large-scale evaluation of two prison-based general offending programmes, R & R and ETS, was reported by Caroline Friendship and her colleagues (Friendship et al., 2002; Friendship, Blud, Erikson, Travers & Thornton, 2003). The reconviction rate for the 667 offenders who took part in the programmes (including 66 offenders who did not complete their programme) was compared with a matched comparison group of 1 081 offenders who had not participated in a programme. The analysis looked at the reconviction rates according to assessed risk of reconviction: comparing the two groups, a significantly lower rate of reconviction, by up to 14%, was found for medium-risk offenders in the programme group, with a similar tendency in the low- and high-risk comparisons. This difference between groups remained significant when logistic regression was used to control for factors such as age, previous convictions, and type of offence. These findings can be seen as consistent with the risk principle that emerged from the meta-analyses, such that programmes produce the least effect with low- and high-risk offenders.

A second evaluation of the prison-based R & R and ETS programmes has been reported by Louise Falshaw and her colleagues (Falshaw et al., 2003; Falshaw, Friendship, Travers & Nugent, 2004). This evaluation compared 649 male offenders who had participated in an offending behaviour programme (including the 10% of offenders who failed to complete it) with 1 947 male offenders who had not

24 OFFENDING BEHAVIOUR PROGRAMMES

taken part in a programme. There were no significant differences in the 2-year reconviction rates of the two groups: the same finding was reported when the groups were divided, as in the Friendship study, according to risk of reconviction. When the analysis was recomputed excluding those offenders who had not completed their programme the same null finding remained.

Using the same methodology as in the Friendship and the Falshaw studies, Cann et al. (2003) compared the 1- and 2-year reconviction rates of 2 195 adult male offenders and 1 534 young offenders who had taken part in prison-based R & R and ETS programmes with matched comparison groups. As before, the group comparisons were made on the basis of assessed risk of reconviction. When all those who had started a programme were included, there was no significant difference in the 1- and 2-year reconviction rates for the programme starters and the comparison groups for either adult or young offenders. The dropout rate from the programmes was about 9% for both adult and young offenders: when the dropouts were excluded from the analysis the 1-year reconviction rate for adult offenders was significantly lower than for the comparison group, with an overall reduction of 2.5% and a reduction of 6.9% for the high risk sub-group of offenders. A similar pattern was found for the young offenders, with an overall reduction of 4.1% and 4.8% for the high-risk sub-group. However, at 2-years reconviction these differences were lost and the reconviction rates for programme completers and the comparison group were no longer statistically different. Further analysis revealed that the 1-year programme effect for completers (adult and young offenders) was evident for ETS but not for R & R.

Evaluating Costs

There are many financial costs to running programmes, including staff training, equipment and premises, and staff time to run the project. Indeed, this point is true for any initiative intended to reduce crime and considerable expertise has accumulated in measuring the costs and benefits of preventing crime (Welsh, Farrington & Sherman, 2001). In order for programmes to be financially viable, which is not the same as socially valuable, they must deliver a saving. In this approach to evaluation the distinction is drawn between *cost-effectiveness* and *cost-benefit* analysis. As Dhiri, Goldblatt, Brand & Price (2001) explain, *cost effectiveness* is the cost of the input per unit of outcome: thus, cost-effectiveness might be expressed as the cost of a programme per reconviction prevented. A measure of cost-effectiveness such as reduced reconviction might, for example, be used to assess the relative merits of different types of programme, or the value of a programme in prison compared to just imprisonment. Dhiri et al. (2001) further explain that

Cost-benefit analysis takes cost-effectiveness analysis a stage further by attaching monetary values to the outcomes of an intervention. Once both the costs of inputs and the values of outcomes (benefits) are expressed in monetary terms, a direct comparison can be made. (Dhiri et al., 2001, p. 188)

In practice both types of cost analysis are not easy to achieve. The process of costing a programme can be far from simple in terms of what to cost and gaining

access to costs. For example, running a programme in a room in a prison will cost in terms of room space, heating, and lighting; how to aggregate these costs is a far from simple task. Further, what should be included if assessing the output costs for an intervention? A prevented crime will save costs within the criminal justice system for police, courts, prisons and probation; while there are broader savings to be had in terms of insurance costs, possible health costs, and victim suffering. Clearly, deciding what to cost and then calculating a figure are far from simple tasks (Cohen, 2001).

Welsh & Farrington (2001) present a review of research on the financial value of preventing crime. Setting three criteria for inclusion of an intervention in their review – a measure of personal crime, such that the victim was a person; an experimental or quasi-experimental research design; and availability of cost-benefit information – Welsh and Farrington were able to include 26 studies in their review. These studies spanned a wide range of crime prevention strategies ranging from improved street lighting to a scheme for supported work for offenders. Of these 26 studies, Welsh and Farrington identified seven that were grouped under the heading “correctional intervention”. These seven studies had the common element of trying to change offender behaviour, although they used a variety of methods including counselling, diversion from custody, and services for substance abuse. While all the studies showed a positive cost-benefit ratio, none employed an intervention that would be recognisable as an offending behaviour programme. A full economic evaluation of the costs and benefits of an offending behaviour programme remains to be reported in the literature.

In summary, programme evaluation is absolutely central to the continued development and understanding of effective practice and, indeed, continues apace. The strength of any body of research lies in the diversity of its evidence: this diversity can be seen in recent publications that encompass empirical outcome studies (Van Voorhis, Spruance, Ritchey, Listwan & Seabrook, 2004), qualitative studies of programme delivery (Clarke, Simmonds & Wydall, 2004), and quantitative reviews (Wilson, Bouffard & Mackenzie, 2005).

CONCLUSIONS

In considering the development of offending behaviour programmes three fundamental points arise. First, the centrality of research in both the emergence of offending behaviour programmes and their continued evaluation. Second, the practical issues that arise in making research findings operational through policy. Third, relating to the first point, the political issues that arise in the interplay between evaluative research, experience from practice, and the reformulation of policy.

Looking at the first point, there are valid criticisms of the research base that informed the development of offending behaviour programmes. Similarly, there are limitations to the extant knowledge base and enduring criticisms of the methods used by researchers. The issues involved in clarifying the research relevant to offending behaviour programmes are considered in detail in Chapter 2. As explored throughout this book, there are a myriad of topics related to practice to

26 OFFENDING BEHAVIOUR PROGRAMMES

consider, ranging from procedures for selection of offenders, practitioner skills, to service provision tailored for specific groups of offenders, such as women offenders, young offenders, and offenders from different ethnic groups. Finally, as the final chapter will discuss, there are significant issues in interpreting the evaluative research in order to reformulate policy to reinforce effective practice. Almost inevitably, there are areas of professional and political conflict, typically played out in acrimony and hostility, which sit alongside considerations of what makes for effective service provision and delivery.

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