

# What Science Says About Designing Effective Prisoner Reentry Programs

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**E**ffective prisoner reentry programs have garnered public support because of their potential to reduce recidivism and save taxpayer dollars. To be effective, reentry programs must apply the four principles of effective corrections interventions. First, programs should be targeted to high-risk offenders. Placing low-risk offenders in intensive programs might actually increase their recidivism rates. Second, programs should focus on crime-producing factors such as antisocial attitudes and substance abuse. Boot camp programs are ineffective because they target factors unrelated to crime, model aggressive behavior, and bond criminals together. Third, programs should use a cognitive-behavioral approach, which has been shown to reduce reoffenses by an average of 10%. This action-oriented approach teaches prisoners new skills through modeling, practice, and reinforcement. Fourth, for model programs to be effective, implementation must closely replicate the original design; poorly implemented programs can do more harm than good. Given budget deficits, other states may follow Oregon's lead in requiring all programs for offenders to be evidence-based.

Criminal behavior affects all of us in some way. Crime helps determine where we live, where we send our children to school, when and where we go out, how much we pay for auto insurance, and whether our tax dollars are used to build new roads or new prisons. Over 600,000 prisoners return to the community each year. Some offenders receive some programming while they are incarcerated, but many return ill-equipped to reintegrate into their communities.

One way to facilitate successful offender re-integration is through reentry programs. Studies show that public support for effective programs and rehabilitation remains strong.<sup>1</sup> For these and other reasons, it is important that we continue to develop correctional programs that increase public safety through the effective rehabilitation of offenders.

Reentry programs are promising for a number of reasons. First, they provide an opportunity to shape offender behavior as they transition back to their natural environments, thereby reducing recidivism rates. They also offer the ability to proactively deal with violations of post-release supervision. Recently this has become a growing concern because violators are making up a greater percent of the prison population now than in the past. Additionally, facilitating a successful reentry can lead to better and more functional lives for former prisoners and also for their families and communities.

Reentry programs have some unique features, yet at their core these programs should follow the basic tenets of effective correctional interventions. This body of

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research on correctional programs can serve as a blueprint for the development of reentry legislation and the design of reentry programs. The research summarized below is based on data from Ohio; however, these findings are consistent with other research conducted during different time periods, in many jurisdictions, in several countries, with male and female offenders, and with adult and juvenile offenders.

## **Core Principles of Effective Correctional Interventions**

How much can science tell policymakers about effective corrections programs? The research findings are clear and consistent. If a reentry program does not embody a number of the following characteristics, the odds that the program will reduce recidivism are low.

- 1. Who to target.** Correctional programs should focus their resources on higher-risk offenders.
- 2. What to target.** Correctional programs must target specific crime-producing factors of offenders such as anti-social peer associations and substance abuse. Boot camp and self-esteem building programs largely don't work.
- 3. How to target.** Correctional programs must provide behavioral, cognitive-behavioral, or social-learning based interventions.
- 4. How well the program is implemented.** Correctional programs must have program integrity, which includes quality assurance, evaluation efforts, and overall attention to the intervention's fidelity to the three previous principles. Good instruments are available to objectively measure program integrity, such as the Correctional Program Assessment Inventory.

## **Who to Target**

***The most intensive programs should be reserved for high-risk offenders.***

The most intensive treatment and intervention programs should be reserved for high-risk offenders. "High Risk" refers to those offenders with a higher probability of reoffending, whereas low-risk offenders are those with pro-social attributes and a low chance of reoffending. Allocating treatment to low-risk offenders wastes scarce resources. What's more, research clearly demonstrates that placing low-risk offenders in more intensive programs can often increase their failure rates. This counter-intuitive finding occurs for several reasons, two that are discussed below.

First, mixing low- and high-risk offenders may lead to an "education" in anti-social behavior for the low-risk offenders. For example, let's say that your teenage child got into some trouble with the law, but does not use drugs. Would you want him or her in a program or group with heavy drug users? Of course not. You would worry that high-risk youth would influence your child more than the other way around. Second, placing low-risk offenders in these programs tends to disrupt their pro-social networks. In other words, the very circumstances that make them low-risk become interrupted, such as their school, employment, and family. These circumstances (e.g., good school performance, stable employment, lack of

substance abuse, pro-social friends, and good family relationships) are what define low-risk offenders. Of course, low-risk offenders may require some intervention; however, simply holding them accountable for their actions and imposing some minimal sanction is usually enough to prevent recidivism. Recent studies explain why interventions intended to do good can instead do harm.

Here's what happened when we placed low-risk offenders in intensive programs. In 2002 we conducted a study of 38 halfway house programs in Ohio. The study included roughly 7,000 offenders, with half in the "treatment" group (those offenders who participated in a halfway house program) and half in the "comparison" group (those offenders who received regular community supervision). Halfway houses ranged from full-service programs that offered a wide-range of programming, to facilities that offered some support and had minimal programs (e.g., limited counseling and job assistance). Offenders lived in these facilities but generally worked in the community. The numbers presented in this chapter represent the differences in the recidivism rates between the treatment group (halfway house participants) and the comparison group (community supervision). Recidivism was defined as incarceration in a state prison within the two-year follow up period.

Placing low-risk offenders in halfway house programs actually increased their chances of reoffending by an average rate of 5%, as Table 1 shows. Conversely, for high-risk offenders, participation in the same halfway house programs was associated with a 9% decrease in recidivism. This pattern does not hold true for parole violators. Regardless of their risk-level, parole violators who were placed in a halfway house instead of prison had lower recidivism rates compared to those who were returned to prison and later released without placement in a residential facility. I believe that this is because the study did not take into account changes in "dynamic" risk factors. In other words, placement in a halfway house, which can address risk factors such as substance abuse, is more effective for parole violators at any risk level than being returned to prison and released without any placement.

**Halfway houses actually increased recidivism of low-risk offenders by 5% and decreased recidivism of high-risk offenders by 9%.**

Table 1. Effectiveness of Halfway House Participation Compared to Regular Community Supervision

	Recidivism Rate
Low Risk Offender	+ 5%
High Risk Offender	- 9%

Some individual programs produced dramatically different results. For low-risk offenders, some of the least effective halfway house programs produced 30% or higher *increases* in recidivism. On the other hand, high-risk offenders in several effective halfway house programs had 30% or higher *reductions* in recidivism.

## What to Target

The second principal of effective corrections intervention programs is that they target crime-producing factors ("criminogenic" needs), such as anti-social attitudes,

beliefs, and values; anti-social personality traits; negative peer associations; poor problem solving and self-control skills; and substance abuse. Offenders are not higher risk because they have a particular risk factor, but rather because they have a multitude of risk factors. Accordingly, programs that target a larger number of these factors are more successful than those that target a couple or none.

**Boot camps may increase crime because they model aggressive behavior and bond criminals together.**

Not surprisingly, programs that focus on factors unrelated to crime such as creative abilities, physical conditioning, self-esteem, and understanding one’s culture or history do not reduce criminal behavior. One example is military-style boot camps that tend to focus on discipline, physical condition, and self-esteem. Most studies show that boot camps have little impact on future criminal behavior and may in fact increase crime because they often model aggressive behavior and bond criminals together.

In our study of 38 halfway house programs, those programs that targeted one crime-producing factor were, on average, associated with a 17% increase in recidivism rates compared to those in regular community supervision (see Table 2); however, those programs that target four or more factors reduced recidivism by an average of 7%. Unfortunately, the data were unable to distinguish which crime-producing factors were targeted in the programs and how much time was spent on each.

Table 2. Number of Crime-Producing Factors Targeted and Program Effectiveness

Number of Crime-Producing Factors	Change in Recidivism Rate
1	+17%
2-3	-3%
4+	-7%

## How to Target

This principle tells us how to go about targeting offenders’ needs. The most effective approaches feature behavioral programs that have several attributes. First, effective programs are centered on *present* circumstances and risk factors that are responsible for the offender’s behavior. For example, focusing on a past event, such as abandonment and grief counseling might be therapeutic and helpful in increasing one’s understanding, but it is unlikely to reduce the risk of reoffending. Of course, past trauma can be a barrier to addressing anti-social behavior, but it is the current behavior that is the target for change, not the past.

Second, behavioral interventions are *action*-oriented rather than *talk*-oriented. Offenders do something about their difficulties, rather than just talk about them. Behavioral interventions often replace anti-social behaviors (e.g., stealing, cheating, lying, etc.) by teaching offenders new, pro-social skills through modeling, practice, increasing difficulty of skill, and reinforcement.

Examples of these interventions include:

- Structured social-learning programs where new skills are taught, and pro-social behaviors and attitudes are consistently reinforced;

- Cognitive-behavioral programs that target anger, attitudes, beliefs, peers, substance abuse, values, etc.; and
- Family-based interventions that train family members in appropriate behavioral techniques.

Common non-behavioral interventions include bibliotherapy (reading books), drug and alcohol education, fear tactics and other emotional appeals, lectures, non-directive client-centered approaches, self-help, and talk therapy. Little research shows these approaches lead to long-term reductions in recidivism.

How effective are cognitive-behavioral programs compared to other types of programming? Cognitive-behavioral programs produced a 10% decrease in recidivism in our study, compared to no change for “other” types of treatment programs (see Table 3).

**Cognitive-behavioral programs produced a 10% decrease in recidivism.**

Table 3. Impact of Treatment Model on Program Effectiveness

Change in Recidivism Rate	
Cognitive-Behavioral Program	-10%
Other Program Types	0%

Increasing the number of crime-affecting services a program offers reduces recidivism, just as increasing the number of behavioral strategies does. Programs that regularly use role-playing or have offenders practice newly learned skills produce an average 8% reduction in recidivism rates (see Table 4). Even better, those that regularly use *both* techniques are the most effective, with an average 15% reduction.

Table 4. Impact of Role Playing and Offender Practice on Program Effectiveness

Change in Recidivism Rate	
Neither role-play nor practice	-3%
Role-play OR practice	-8%
Role-play AND practice	-15%

## How Well the Program is Implemented

In addition to the three principles raised previously, implementation is also of significant and substantial importance. In our study we found that several factors of program implementation were important, including community support, criminal justice community support, evaluation, the program directors’ educational and experiential credentials, the program directors’ involvement in the program, quality assurance, and staff training and qualifications. Even promising programs can fail if implementation is not monitored.

We found a strong relation between program integrity and program effectiveness. The highest-scoring programs were associated with an average reduction in recidivism of 20% or more. In contrast, the lowest-scoring programs on program integrity were associated with an average 19% increase in recidivism. Clearly,

programs that are not implemented effectively do more harm than good because they increase recidivism.

## **How Other States Have Used the Principles of Effective Intervention**

### **Oklahoma**

In 1999, I was part of a team that reviewed 29 correctional programs in Oklahoma, some that operated in prisons, and others in the community. During our initial review, only 9% of the programs scored as “satisfactory” on measures of program integrity and the degree to which the program met the principles of effective intervention. The remaining 91% scored “needs improvement” or “unsatisfactory.” Despite these negative findings, Oklahoma officials decided to continue the review and incorporate the findings into their efforts to improve the programs and services they offered offenders.

Those programs found “unsatisfactory” were required to develop action plans and were given a specified time period to correct deficiencies before they were reassessed. Subsequently, the quality of the programs improved dramatically. A recent review indicates that 79% of the programs are now rated as “*satisfactory*” or higher and none were “*unsatisfactory*.” Change was only possible through strong leadership, and by providing specific and clear program direction as well as training and technical assistance.

***Oregon is the first state to statutorily require evidence-based programs for offenders.***

### **Oregon**

In 2003, the Oregon legislature passed SB 267, which requires prevention, treatment, or intervention programs for reducing future criminal behavior in adults and juveniles to be evidence-based. By 2005, 25% of funds spent by the Oregon Department of Corrections and several other agencies had to be allocated to evidence-based programs; by 2007, the amount increases to 50% and to 75% by 2009. This is the first state I know of to statutorily require evidence-based programs for offenders. I suspect it will not be the last, especially as states continue to wrestle with budget deficits.

### **Ohio**

In fiscal year 2004, Ohio spent over \$89 million for halfway houses and community-based correctional facilities. As the budget for these programs grew, so did legislative demand to justify these expenditures by determining the programs’ effectiveness in reducing recidivism. To that end, we evaluated all residential programs funded by the state, which was the largest study of its kind. A portion of that data was presented in this chapter. The conclusions presented here exactly mirror the conclusions of the larger study.

As a result of our study, Ohio enacted a number of policy changes, including:

- All programs must administer an assessment tool within five days of intake to measure risk level, determine case planning strategies, and identify special needs (e.g., mental health and sex offender).
- All programs need to develop a service delivery model based on individualized risk and needs assessment results. The high-risk offender

should receive more intensive and additional services, whereas the low-risk offender will receive minimal services.

- A cognitive-behavioral modality should be adopted, or at a minimum cognitive programming skills should be implemented within other modalities.
- Crime-producing factors should be targeted in programming.
- Audit standards shall assess both process and program outcomes.
- Every three years a program evaluation will be conducted, and program integrity will be assessed using a Correctional Program Assessment Inventory (or similar instrument).

### **Other States**

Other states are moving toward evidence-based practices in correctional treatment. Maine and Illinois were awarded demonstration grants by the National Institute of Corrections to implement and promote evidence-based practices. The Florida Division of Juvenile Justice is promoting evidence-based programming throughout its system. The Correctional Services of Canada has made evidence-based programming the hallmark of its correctional system.

### **Conclusion**

The evidence demonstrates that not all treatment programs are equally effective. The principles and characteristics that research shows are important to corrections interventions in general seem to be applicable and important to programs that serve prisoners upon reentry. Low-risk offenders should not be placed with high-risk offenders, since the effects are often counterproductive. High-risk offenders benefit from a longer and more intense dose of supervision and treatment. The majority of services should target crime-producing factors in offenders. Well-designed, well-implemented programs can substantially reduce recidivism; however, the same types of programs, when poorly implemented, can actually increase recidivism and waste taxpayer dollars.

Effective treatment and incarceration are not always mutually exclusive. Correctional programs in general, and prisoner reentry programs, in particular, can have a substantial effect on recidivism if they follow the evidence-based principles described in this chapter.

***Poorly implemented programs can increase recidivism and waste taxpayer dollars.***

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This chapter draws primarily from three articles:

Latessa, E. J. (2004). The challenge of change: Correctional programs and evidence-based practices. *Criminology and Public Policy*, (3)4, 547-560.

Latessa, E. J. & Lowenkamp, C. T. (2006). What works in reducing recidivism? *University of St. Thomas Law Journal*, (3)3, 521-535.

Lowenkamp, C. T. & Latessa, E. J. (2005, April). Developing successful reentry programs: Lessons learned from the “What Works” research. *Corrections Today*, 72-77.

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<sup>1</sup> Cullen, F. T., Pealer, J. A., Fisher, B. S., Applegate, B. K., & Santana, S.A. (2002). Public support for correctional rehabilitation: Change or consistency. In J. V. Roberts & M. Hough (Eds.), *Changing attitudes to punishment: Public opinion, crime, and justice*. Devon, U.K.: Willan Publishing.