What Works and What Doesn’t in Reducing Recidivism: Apply the Principles of Effective Intervention to Offender Reentry

Presented by:
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Summarize Several Major Points

• Public Support for Rehabilitative Effort

• Who and What is Targeted for Change is Important

• Programs can Reduce Recidivism, but not all Programs are Equal

• Some Reentry Examples from Other States
Public Attitudes Towards Rehabilitation

- They want sensible options
- They reject sanctions that are too lenient and ineffective
- They support get tough polices but also believe in rehabilitation
- They want truly dangerous offenders incarcerated but are open to having other offenders in the community
- Very supportive of rehabilitation for juveniles
Who and What you Target Matters

• Risk Principle – target higher risk offenders (WHO)

• Need Principle – target criminogenic risk/need factors (WHAT)
Risk Principle

• Target those offender with higher probability of recidivism

• Provide most intensive treatment to higher risk offenders

• Intensive treatment for lower risk offender can increase recidivism
The Risk Principle & Correctional Intervention Results from Meta Analysis

Change in Recidivism Rates

-5 0 5 10 15 20 25

High Risk

Low Risk

Reduced Recidivism

Increased Recidivism

Dowden & Andrews, 1999
Results from Ohio Halfway House Study

• Involved over 13,000 offenders and over 50 residential program

• Most programs reduced recidivism for higher risk offenders and increased recidivism for low risk offenders
Treatment Effects for Low Risk Offenders

Increased Recidivism

Reduced Recidivism
**Need Principle**

By assessing and targeting criminogenic needs for change, agencies can reduce the probability of recidivism

<table>
<thead>
<tr>
<th>Criminogenic</th>
<th>Non-Criminogenic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti social attitudes</td>
<td>Anxiety</td>
</tr>
<tr>
<td>Anti social friends</td>
<td>Low self esteem</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>Creative abilities</td>
</tr>
<tr>
<td>Lack of empathy</td>
<td>Medical needs</td>
</tr>
<tr>
<td>Impulsive behavior</td>
<td>Physical conditioning</td>
</tr>
</tbody>
</table>
Targeting Criminogenic Need: Results from Meta-Analyses

![Graph showing the effect of targeting different numbers of non-criminogenic and criminogenic needs on recidivism reduction.](graph.png)

Major Risk and/or Need Factor and Promising Intermediate Targets for Reduced Recidivism

<table>
<thead>
<tr>
<th>Factor</th>
<th>Risk</th>
<th>Dynamic Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of Antisocial</td>
<td>Early &amp; continued involvement in a number antisocial acts</td>
<td>Build noncriminal alternative behaviors in risky situations</td>
</tr>
<tr>
<td>Behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Antisocial personality</td>
<td>Adventurous, pleasure seeking, weak self control, restlessly aggressive</td>
<td>Build problem-solving, self-management, anger mgt &amp; coping skills</td>
</tr>
<tr>
<td>Antisocial cognition</td>
<td>Attitudes, values, beliefs &amp; rationalizations supportive of crime, cognitive emotional states of anger, resentment, &amp; defiance</td>
<td>Reduce antisocial cognition, recognize risky thinking &amp; feelings, build up alternative less risky thinking &amp; feelings Adopt a reform and/or anticriminal identity</td>
</tr>
<tr>
<td>Antisocial associates</td>
<td>Close association with criminals &amp; relative isolation from prosocial people</td>
<td>Reduce association w/ criminals, enhance association w/ prosocial people</td>
</tr>
</tbody>
</table>
# Major Risk and/or Need Factor and Promising Intermediate Targets for Reduced Recidivism

<table>
<thead>
<tr>
<th>Factor</th>
<th>Risk</th>
<th>Dynamic Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family and/or marital</td>
<td>Two key elements are nurturance and/or caring better monitoring and/or supervision</td>
<td>Reduce conflict, build positive relationships, communication, enhance monitoring &amp; supervision</td>
</tr>
<tr>
<td>School and/or work</td>
<td>Low levels of performance &amp; satisfaction</td>
<td>Enhance performance, rewards, &amp; satisfaction</td>
</tr>
<tr>
<td>Leisure and/or recreation</td>
<td>Low levels of involvement &amp; satisfaction in anti-criminal leisure activities</td>
<td>Enhancement involvement &amp; satisfaction in prosocial activities</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>Abuse of alcohol and/or drugs</td>
<td>Reduce SA, reduce the personal &amp; interpersonal supports for SA behavior, enhance alternatives to SA</td>
</tr>
</tbody>
</table>

Recent study of parole violators in Pennsylvania found a number of criminogenic factors related to failure*

*Conducted by Pennsylvania Dept. of Corrections
Pennsylvania Parole Study
Social Network and Living Arrangements
Violators Were:

• More likely to hang around with individuals with criminal backgrounds
• Less likely to live with a spouse
• Less likely to be in a stable supportive relationship
• Less likely to identify someone in their life who served in a mentoring capacity
Pennsylvania Parole Study
Employment & Financial Situation
Violators were:

• Slightly more likely to report having difficulty getting a job
• Less likely to have job stability
• Less likely to be satisfied with employment
• Less likely to take low end jobs and work up
• More likely to have negative attitudes toward employment & unrealistic job expectations
• Less likely to have a bank account
• More likely to report that they were “barely making it” (yet success group reported over double median debt)
Pennsylvania Parole Study
Alcohol or Drug Use
Violators were:

• More likely to report use of alcohol or drugs while on parole (but no difference in prior assessment of dependency problem)

• Poor management of stress was a primary contributing factor to relapse
Pennsylvania Parole Study
Life on Parole
Violators were:

• Had unrealistic expectations about what life would be like outside of prison
• Had poor problem solving or coping skills
  – Did not anticipate long term consequences of behavior
• Failed to utilize resources to help them
  – Acted impulsively to immediate situations
  – Felt they were not in control
• More likely to maintain anti-social attitudes
  – Viewed violations as an acceptable option to situation
  – Maintained general lack of empathy
  – Shifted blame or denied responsibility
Pennsylvania Parole Violator Study:

- Successes and failures did not differ in difficulty in finding a place to live after release.

- Successes & failures equally likely to report eventually obtaining a job.
Programs Can Reduce Recidivism but Not All Programs are Equal

• Use Evidence Based Approaches

• Make sure Programs are Implemented with Integrity
Evidence Based – What does it mean?

There are different forms of evidence:

– The lowest form is anecdotal evidence, but it makes us feel good

– The highest form is empirical evidence – results from controlled studies, but it doesn’t make us feel good
Evidence Based Practice is:

1. Easier to think of as Evidence Based Decision Making

2. Involves several steps and encourages the use of validated tools and treatments.

3. Not just about the tools you have but also how you use them
Evidence Based Decision Making Requires

1. Assessment information

2. Relevant research

3. Available programming

4. Evaluation

5. Professionalism and knowledge from staff
Results from Meta Analysis: Behavioral vs. NonBehavioral

## Comparative Effectiveness for Selected Interventions

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Target</th>
<th>Success Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Criminal Justice</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Police clearance rates</td>
<td>Break &amp; Entering</td>
<td>0.16</td>
</tr>
<tr>
<td></td>
<td>Auto Theft</td>
<td>0.12</td>
</tr>
<tr>
<td><strong>Offender Treatment</strong></td>
<td>Recidivism</td>
<td>0.29</td>
</tr>
<tr>
<td>(behavioral)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical Interventions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aspirin</td>
<td>Cardiac event</td>
<td>0.03</td>
</tr>
<tr>
<td>Chemotherapy</td>
<td>Breast Cancer</td>
<td>0.11</td>
</tr>
<tr>
<td>Bypass surgery</td>
<td>Cardiac event</td>
<td>0.15</td>
</tr>
</tbody>
</table>

Source: Andrews & Bonta, 2006; Fedorowycz, 2004; Lipsey & Wilson, 1993).
Most Effective Behavioral Models

• Structured social learning where new skills and behaviors are modeled
• Family based approaches that train family on appropriate techniques
• Cognitive behavioral approaches that target criminogenic risk factors
Social Learning

Refers to several processes through which individuals acquire attitudes, behavior, or knowledge from the persons around them. Both modeling and instrumental conditioning appear to play a role in such learning.
Family Based Interventions

• Designed to train family on behavioral approaches
  – Functional Family Therapy
  – Multi-Systemic Therapy
  – Teaching Family Model
Effectiveness of Family Based Intervention: Results from Meta Analysis

- 38 primary studies with 53 effect tests
- Average Effect Size on Recidivism = .21

However, much variability was present (-0.17 - +0.83)

Dowden & Andrews, 2003
Mean Effect Sizes: Whether or not the family intervention adheres to the principles

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk</td>
<td>0.3</td>
<td>0</td>
</tr>
<tr>
<td>Need</td>
<td>0.3</td>
<td>0</td>
</tr>
<tr>
<td>Behavioral Txt</td>
<td>0.35</td>
<td>0.1</td>
</tr>
</tbody>
</table>
The Four Principles of Cognitive Intervention

1. Thinking affects behavior

2. Antisocial, distorted, unproductive irrational thinking can lead to antisocial and unproductive behavior

3. Thinking can be influenced

4. We can change how we feel and behave by changing what we think
Recent Meta-Analysis of Cognitive Behavioral Treatment for Offenders by Landenberger & Lipsey (2005)*

- Reviewed 58 studies:
  - 19 random samples
  - 23 matched samples
  - 16 convenience samples

- Found that on average CBT reduced recidivism by 25%, but the most effective configurations found more than 50% reductions
Factors Not significant:

- Setting - prison (generally closer to end of sentence) versus community
- Juvenile versus adult
- Minorities or females
- Brand name of curriculum
Significant Findings (effects were stronger if):

- Sessions per week (2 or more)
- Implementation monitored
- Staff trained on CBT
- Higher proportion of treatment completers
- Higher risk offenders
- Higher if CBT is combined with other services
What Doesn’t Work with Offenders?
Ineffective Approaches

- Drug prevention classes focused on fear and other emotional appeals
- Shaming offenders
- Drug education programs
- Non-directive, client centered approaches
- Bibliotherapy
- Freudian approaches
- Talking cures
- Self-Help programs
- Vague unstructured rehabilitation programs
- Medical model
- Fostering self-regard (self-esteem)
- “Punishing smarter” (boot camps, scared straight, etc.)
Program Integrity and Recidivism

• We found a strong relationship between program integrity and recidivism in three major studies we recently completed

• The higher the program’s integrity score – greater the reductions in recidivism
Program Integrity—Relationship Between Program Integrity Score And Treatment Effect for Community Supervision Programs

![Bar chart showing the relationship between program integrity and treatment effect. The chart indicates that programs with scores of 60% or higher have a significant positive effect on reduced recidivism, with an r-value of 0.16. Programs with scores of 40-59% have a moderate positive effect, with an r-value of 0.12. Programs with scores of 20-39% have a minimal positive effect, with an r-value of 0.02. Programs with scores of 0-19% have a significant negative effect on reduced recidivism, with an r-value of -0.15.]
Program Integrity—Relationship Between Program Integrity Score And Treatment Effect for Residential Programs

Change in Recidivism Rates

Reduced Recidivism

-19

Increased Recidivism

0-30
31-59
60-69
70+

5
10
22
Impact of Program Factors PredictingFelony Adjudication for JuvenilePrograms

Predicted Recidivism Rates

Low Moderate High Very High

Program Score 0 Program Score 12 Program Score 24

11 8 7 43
27 22 18 36
43 31 24
60 53 47
Some Examples from Other States

- Ohio
- Pennsylvania
- North Dakota
- Oregon
Ohio: Target Families

Children of Incarcerated Parents/Returning Home

• Programs target inmates with biological children under the age of 18
  – Programs are operated in Four Largest Counties
  – Programming begins in Prison

• Program targets include:
  – Family cohesiveness
  – Employment
  – Criminal Behavior

• Services include:
  – Enhanced family visitation
  – Family case management

• Programs provide services to families for an average of 9 months
  – Up to 6 months pre-release
  – 6 months post-release
Ohio: Removing Barriers

• U. of Toledo Law School study found over 400 collateral sanctions on offenders

• Barriers included:
  – Employment
  – Civic
  – Stigma

• Current comprehensive legislation is pending to remove some of these barriers. Legislation includes:
  – Expanding treatment through Reentry Courts
  – Addressing collateral sanctions
  – Enhancing agency operations
Pennsylvania: Inmate Reentry & Transition

- Enhance employability and job readiness
- Promote healthy families & interpersonal relationships
- Address critical adjustment period between incarceration & return to community
Pennsylvania

• Created new positions:
  – Reentry Specialist
  – Reentry Coordinator
  – Health Care Release Coordinator
  – Community Resource Specialists

• Created new tools:
  – Reentry planning checklist
  – Hard to place list
  – Statewide Placement Resource Guides

• Created new programs
  – COR (Community orientation & Reintegration) Programming
  – Treatment Options and Alternatives to Re-incarceration for Certain Technical Parole Violators
  – Reentry Courts
North Dakota

- Picked as one of 8 states to participate in Transition from Prison to Community Initiative sponsored by NIC
- Target recidivism by using EBP to target risk and need factors
- Created Transitional Accountability Plan for every offender
  - Revocation guidelines
  - Formed Reentry teams
Oregon

• Requires that large percentage of funds (75% by 2009) spent by DOC, Youth Authority, Mental Health and Substance Abuse agencies go toward Evidence Based Programs
Lessons Learned from the Research

- Who you put in a program is important – pay attention to risk
- What you target is important – pay attention to criminogenic needs
- How you target offender for change is important – use behavioral approaches
Important Considerations

- Offender assessment is the engine that drives effective programs
  - helps you know who & what to target
- Design programs around empirical research
  - helps you know how to target offenders
- Program Integrity make a difference
  - Service delivery, disruption of criminal networks, training/supervision of staff, support for program, QA, evaluation