

Effective correctional programming: What empirical research tells us and what it doesn't

The correctional politics of many countries have changed as dramatically as fashion trends during the last 25 years. For example, the United States has moved from optimistic experiments on offender rehabilitation to tough punishment and frequent imprisonment.

Although these waves may be understandable within the broader political, societal and cultural context, they are only loosely related to empirical research and practice. The research world has produced more consistent, step-by-step development.

Recent meta-analyses and other research syntheses have examined more than 500 controlled studies.⁽²⁾ Although the research varies greatly, a fairly consistent picture has been painted of several fundamental topics. However, other areas have been plagued by either inconsistent or minimal study.

This article, therefore, sets out a brief overview of what we know and what we still have yet to learn about effective correctional programming.

General effectiveness

All meta-analyses on offender treatment suggest that offenders who receive some kind of psychosocial treatment tend to do better than those who do not. This conclusion cannot be attributed solely to reliance on selected positive results because various meta-analyses have also included unpublished research reports.

The overall effect of such treatment is relatively small. On average, offender treatment tends to reduce recidivism by approximately 10 percentage points. However, even such a small effect can produce significant cost savings.⁽³⁾ Further, many recognized and praised medical treatments produce similar results.⁽⁴⁾ Methodological studies also suggest that the potential upper limit of such reductions is actually between 30 percentage points and 40 percentage points.⁽⁵⁾

Type of treatment

There are remarkable differences in the effectiveness of different types of programming. Intervention based on empirically valid theories of criminal behaviour that address criminogenic needs (the need principle) and account for offender learning styles and characteristics (responsivity) produce greater results.⁽⁶⁾ Successful programs also tend to be either behavioural, cognitive-behavioural or multi-modal.

Unstructured case work, counseling, and psychodynamic, insight-oriented and nondirective approaches tend to have less impact. The same is true of pure punishment, deterrence measures (such as boot camps), or measures with no educational or psychosocial component (such as diversion). Some of these less-appropriate programs have even been found to have negative effects.

Program integrity

Various studies suggest that high program integrity can lead to better offender outcomes. However, if the program is inappropriate to begin with, integrity will not improve outcome.

Low program integrity may be caused by things like weak program structure, lack of a manual, insufficient staff training, organizational barriers, staff resistance to proper program implementation, incidents that lead to political changes, unsystematic changes to the program, and lack of a basic philosophy of criminality and treatment.⁽⁷⁾

Of course, any form of programming is largely individual and cannot be completely standardized. It is, however, important to continually monitor areas such as program development, organizational structure, staff selection and training, communication and decision-making rules.

Methodological considerations

A large portion of the variances in treatment outcome can be attributed to methodological variations between studies.⁽⁸⁾ One should, therefore, be cautious about generalizing the results of a single study.

The criteria used to measure program effects are particularly important. Behavioural and more objective measures of criminality and recidivism tend to produce smaller effect findings than measures of institutional adaptation, attitudes or personality change. Reliable criteria and longer follow-up periods are also associated with smaller effects.

In many studies, measures of intermediate goals (such as personality change) tend to be too unspecific for sound prediction of future criminality. This suggests the need for thorough assessment of offender development before, during and after program participation.

Location

Community-based programming tends to produce greater results than programming delivered in custody. However, some institutional programs have produced positive results.⁽⁹⁾

The negative impact of incarceration depends on personal, situational and organizational characteristics that can be addressed at least partially by programming. Many offenders have hazardous lifestyles, so institutions may be a stabilizing influence. However, these arguments should not be misunderstood as a plea for custodial programs. Custody should be a last resort. Systematic risk and dangerousness assessments have proven useful in making placement decisions⁽¹⁰⁾ and should be continually improved.

Offender characteristics

A focus on simple offender variables like age, sex or type of offence does not normally produce particularly strong results. It is more effective to assess high-risk personality disorders (such as psychopathy),⁽¹¹⁾ specific criminogenic needs, and responsivity.⁽¹²⁾ Antisocial cognitive styles, lack of social skills, impulsivity, and verbal and neuropsychological problems indicate a risk of persistent offending.⁽¹³⁾

Such characteristics are relevant not only to treatment characteristics, but also to the fit between offender and program. For example, while role-playing and interpersonal skills training may help "ordinary" offenders,⁽¹⁴⁾ they can be counterproductive for primary psychopaths. Learned skills can be misused, which could result in treated offenders recidivating more frequently than untreated offenders.⁽¹⁵⁾

Risk and program intensity

The risk principle suggests that high-risk offenders need intensive treatment, while low-risk offenders should not receive too-intensive (and costly) programming. However, very high-risk offenders are difficult to change, even through intensive treatment.

The best way to understand the relationship between risk and treatment failure is to imagine the letter "u," where the top of one end of the "u" represents high risk and the top of the other end represents low risk. The fit between risk and service level is most important at the bottom of the "u" -- the broad middle range of offender risk.

Program intensity can also be influenced by other factors. For example, psychopathic offenders tend to express less motivation and effort,⁽¹⁶⁾ putting them at risk of receiving less intensive treatment or of dropping out of the program.

Organizational and staff characteristics

Unfortunately, little systematic research has been done on the impact of organizational characteristics such as facility climate, prison regime or relationship with other services. However, institutional features vary widely.⁽¹⁷⁾ A regime that is emotionally and socially responsive, well structured, norm-oriented and controlling can be important not only to program interaction but also to future nonoffending.⁽¹⁸⁾

The impact of staff characteristics is also rarely investigated. Yet, psychotherapy research indicates that the personal variables of a therapist are very important to effective intervention.⁽¹⁹⁾ Effective treatment requires well-selected, specifically trained, highly motivated and continuously supervised staff. Staff attitudes and competence that do not match the aims and content of a program may not only lower treatment integrity, they may also hinder its effectiveness.

Natural protective factors

Some individuals can cope relatively well without professional help. Cognitive and social competencies, an "easy" temperament, success at school or in hobbies, attachment to a stable reference person, social support from outside the family, and accepting/responsive or demanding/controlling educational styles can help protect an individual.⁽²⁰⁾

Correctional programs do not generally account for such natural protective factors. However, young offender programming and early intervention in at-risk groups have shown that working with young offenders and their families is particularly effective.⁽²¹⁾

Unfortunately, this is much more difficult to accomplish with offenders who are older or in custody. Their natural environment is often heavily disturbed and they frequently lack personal and social factors that could help in decreasing criminality. Depending on the context, some of these factors (such as support from a deviant peer group) could even have a negative effect.⁽²²⁾ Despite these realities, efforts should be made to integrate such natural protectors into programming.⁽²³⁾

Relapse prevention

Various types of programming are relatively successful in the short term, but fail over the long term. However, the positive changes offenders achieved in these programs could be preserved by additional or relapse-prevention programming.⁽²⁴⁾

Although the necessity for effective after-care is unquestioned, there is little research on the combination of treatment and relapse-prevention measures. Practical problems such as resource allocation also must be solved.⁽²⁵⁾

Discussion

Empirical evaluations of correctional programs have more to offer than do fashionable crime policy trends.

Although many inconsistencies and blind spots remain in the research, there are clearly some concepts that are key to effective correctional programming:⁽²⁶⁾

- realistic expectations of results;
- theoretically sound concepts;
- dynamic offender risk assessment that matches the service level;
- appropriate targeting of specific criminogenic needs;
- awareness of the consequences of applying reinforcement;
- teaching self-control, thinking and social skills;
- matching program type, offender and staff;
- thorough selection, motivation, training and supervision of staff;

- acceptance/reward and structure/control within the institutional regime;
 - neutralization of criminogenic social networks;
 - strengthening of "natural" protective factors;
 - high program integrity;
 - selection and assessment of adequate intermediate treatment goals;
 - assessment and monitoring of offender behavioural change; and
 - relapse-prevention and after-care programming. *
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(1) Bismarckstr. 1, 91054 Erlangen, Germany.

(2) More than a dozen meta-analyses on offender treatment have already been published. For an overview, see F. Lösel, "The efficacy of correctional treatment: A review and synthesis of meta-evaluations," *What Works: Reducing Reoffending*, J. McGuire, Ed. (Chichester: John Wiley & Sons, 1995): 79-111. See also T. Palmer, *The Re-emergence of Correctional Intervention* (Newbury Park: Sage, 1992). Due to space limitations, only the two most comprehensive meta-analyses are cited. See D. A. Andrews, I. Zinger, R. D. Hoge, J. Bonta, P. Gendreau and F. T. Cullen, "Does correctional treatment work? A clinically relevant and psychologically informed meta-analysis," *Criminology*, 28 (1990): 369-404. See also M. W. Lipsey, "Juvenile delinquency treatment: A meta-analytic inquiry into variability of effects," *Meta-analysis for Explanation*, T. D. Cook, H. Cooper, D. S. Cordray, H. Hartmann, L. V. Hedges, R. L. Light, T. A. Louis and F. Mosteller, Eds. (New York: Russell Sage Foundation, 1992): 83-127.

(3) R. Prentky and A. W. Burgess, "Rehabilitation of child molesters: A cost-benefit analysis," *Child Trauma I: Issues and Research*, A. W. Burgess, Ed. (New York: Garland, 1992): 417-442.

(4) M. W. Lipsey and D. B. Wilson, "The efficacy of psychological, educational and behavioral treatment," *American Psychologist*, 48 (1993): 1181-1209.

(5) For example, large proportions of nonrecidivism in control groups, unreliability of treatment and outcome measures, and dichotomization of variables reduce the potential effects.

(6) D. A. Andrews and J. Bonta, *The Psychology of Criminal Conduct* (Cincinnati: Anderson, 1994).

(7) C. R. Hollin, "The meanings and implications of program integrity," *What Works: Reducing Reoffending*, J. McGuire, Ed. (Chichester: John Wiley & Sons, 1995): 195-208. See also F. Lösel, "Working with young offenders: The impact of meta-analyses," *Clinical Approaches to Working with Young Offenders*, C. R. Hollin and K. Howells, Eds. (Chichester: John Wiley & Sons, 1996): 57-82.

(8) Lipsey, "Juvenile delinquency treatment: A meta-analytic inquiry into variability of effects." For a

comparison with other studies, Lösel, "The efficacy of correctional treatment: A review and synthesis of meta-evaluations."

(9) Andrews, Zinger, Hoge, Bonta, Gendreau and Cullen, "Does correctional treatment work? A clinically relevant and psychologically informed meta-analysis." See also F. Lösel, "Increasing consensus in the evaluation of offender rehabilitation? Lessons from recent research syntheses," *Psychology, Crime & Law*, 2 (1995): 19-39.

(10) J. Bonta, D. A. Andrews and L. L. Motiuk, *Dynamic Risk Assessment and Effective Treatment*, Paper presented at the Annual Meeting of the American Society of Criminology, Phoenix, 1993. See also J. Bonta and L. L. Motiuk, "Classification to halfway houses: A quasi-experimental evaluation," *Criminology*, 28 (1990): 497-506. And see J. Bonta and L. L. Motiuk, "Inmate classification," *Journal of Criminal Justice*, 20 (1992): 343-353.

(11) R. D. Hare, "Psychopathy: A clinical construct whose time has come," *Criminal Justice and Behavior* (In press).

(12) Andrews and Bonta, *The Psychology of Criminal Conduct*.

(13) T. Moffitt, "Adolescence-limited and life-course-persistent antisocial behavior: A developmental taxonomy," *Psychological Review*, 100 (1993): 674-701.

(14) R. R. Ross and E. A. Fabiano, *Time to Think: A Cognitive Model of Delinquency Prevention and Offender Rehabilitation* (Johnson City: Institute of Social Sciences and Arts, 1985).

(15) M. E. Rice, G. T. Harris and C. A. Cormier, "An evaluation of a maximum security therapeutic community for psychopaths and other mentally disordered offenders," *Law and Human Behavior*, 16 (1992): 399-412.

(16) J. R. P. Ogloff, S. Wong and A. Greenwood, "Treating criminal psychopaths in a therapeutic community program," *Behavioral Sciences and the Law*, 8 (1990): 181-190.

(17) J. Bonta and P. Gendreau, "Reexamining the cruel and unusual punishment of prison life," *Law and Human Behavior*, 14 (1990): 347-372. See also R. Moos, *Evaluating Correctional and Community Settings* (New York: John Wiley & Sons, 1975).

(18) Moos, *Evaluating Correctional and Community Settings*. See also F. Lösel, "Protective effects of social resources in adolescents at high risk for antisocial behavior," *Cross-national Longitudinal Research on Human Development and Criminal Behavior*, H. J. Kerner and E. G. M. Weitekamp, Eds. (Dordrecht: Kluwer, 1994): 281-301. And see M. Rutter, B. Maughan, P. Mortimore and J. Ouston, *Fifteen Thousand Hours: Secondary Schools and Their Effects on Children* (London: Open Books,

1979).

(19) F. J. Porporino and E. Baylis, "Designing a progressive penology: The evolution of Canadian federal corrections," *Criminal Behaviour and Mental Health*, 3 (1993): 268-289. See also F. Lösel and T. Bliesener, "Psychology in prison: Role assessment and testing of an organizational model," *Criminal Behavior and the Justice System: Psychological Perspectives*, H. Wegener, F. Lösel and J. Haisch, Eds. (New York: Springer-Verlag, 1989): 419-439.

(20) F. Lösel and T. Bliesener, "Some high-risk adolescents do not develop conduct problems: A study of protective factors," *International Journal of Behavioral Development*, 17 (1994): 753-777. See also M. Rutter "Resilience in the face of adversity: Protective factors and resistance to psychiatric disorder," *British Journal of Psychiatry*, 147 (1985): 598-611. And see M. Stouthamer-Loeber, R. Loeber, D. P. Farrington, Q. Zhang, W. van Kammen and E. Maguin, "The double edge of protective and risk factors for delinquency: Interrelations and developmental patterns," *Development and Psychopathology*, 5 (1993): 683-701.

(21) R. E. Tremblay and W. Craig, "Developmental crime prevention," *Building a Safer Society: Strategic Approaches to Crime Prevention*, M. Tonry and D. P. Farrington, Eds. (Chicago: The University of Chicago Press, 1995): 151-236. See also H. Yoshikawa, "Prevention as cumulative protection: Effects of early family support and education on chronic delinquency and its risks," *Psychological Bulletin*, 115 (1994): 28-54.

(22) D. Bender, *Psychische Widerstandsfähigkeit im Jugendalter: Eine Längsschnittstudie im Multiproblem-Milieu* [Resilience in Adolescence: A Longitudinal Study in Multiproblem Milieus], Doctoral Dissertation, University of Erlangen-Nürnberg, 1995. See also F. Lösel, *Resilience and Protective Functions in Adolescence*, Keynote address at the Fifth Biennial Conference of the European Association for Research on Adolescence, Liège, Belgium, 1996.

(23) L. L. Motiuk, "Using familial factors to assess offender risk and need," *Forum on Corrections Research*, 7, 2 (1995): 19-22. See also Porporino and Baylis, "Designing a progressive penology: The evolution of Canadian federal corrections."

(24) D. R. Laws, *Relapse Prevention with Sex Offenders* (New York: Guilford Press, 1989).

(25) T. Exworth, "Compulsory care in the community: A review of the proposals for compulsory supervision and treatment of the mentally ill in the community," *Criminal Behaviour and Mental Health*, 5 (1995): 218-241.

(26) For a more comprehensive overview see P. Gendreau, "The principles of effective intervention with offenders," *Choosing Correctional Options that Work: Defining the Demand and Evaluating the Supply*, A. T. Harland, Ed. (Thousand Oaks: Sage, 1996).

