

# The psychology of criminal conduct and principles of effective prevention and rehabilitation

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**T**here is now a science of criminal conduct. More specifically, there are theories of criminal conduct that are empirically defensible and should, therefore, be helpful in designing and delivering effective services to a broad base of offenders, including young offenders. The literature in this area is reasonably strong and supports a vigorous pursuit of preventive and rehabilitative programming for higher-risk offenders under a variety of conditions.

**T**he service community must, however, enhance this knowledge base. How can we make use of “what works?” In general, we must develop a variety of approaches to the dissemination, implementation and ongoing development of effective programming to translate this theoretical and philosophical success into practical results.<sup>2</sup>

A major element in program development and dissemination is the availability of concise, yet accurate, summaries of the knowledge base. This article, therefore, reviews the major principles of the current knowledge base by briefly examining a series of effective correctional prevention and treatment principles.<sup>3</sup> We must establish and understand what we know before attempting to translate that knowledge into effective and efficient programming for offender groups such as young offenders.

## The social-psychological principle

The most promising conceptual base for prevention and rehabilitation programs is a social-psychological understanding of criminal conduct. This approach highlights four sets of risk factors:

- attitudes, thoughts, feelings, interpretations of events and rationalizations that support antisocial behaviour;
- antisocial associates;
- a history of antisocial behaviour; and
- indicators of an antisocial personality (including indicators of restless aggressiveness, impulsiveness and, for young offenders in particular, psychological immaturity).

These four sets of risk factors, of course, only translate into criminal acts in situations where temptations are present, external controls are weak and, perhaps,

stress levels are high. However, the power of the social-psychological perspective becomes clear when you consider the causes of behaviour suggested by many human behaviour theories.

For example, some humanist and feminist theorists suggest that people behave the way they do because they choose to behave that way — their behaviour reflects personal choices. On the other hand, other theorists suggest that people behave in accordance with reward/cost assessments and that their behaviour changes as these assessments change.

Whatever the underlying process, the choices or assessments are all shaped by the individual’s immediate situation in combination with antisocial attitudes, antisocial associates, a history of antisocial behaviour and complex personality variables associated with antisocial behaviour.

So, whatever your preferred theory of crime, the social-psychological principle’s four sets of risk factors should pervade your research, treatment and programming efforts.

## Knowledge construction, not knowledge destruction

Critics of psychological prediction and correctional treatment services typically discount positive research findings by using irrational techniques of destroying knowledge, while uncritically accepting negative findings.

A rational data-based approach to knowledge construction must overcome this tradition of knowledge destruction. There have been some methodological problems within the research literature, but, ultimately, the research’s predictive accuracy and treatment effects have been proven solid.

Don’t be fooled by irrational criticism from groups opposed to prediction and treatment. We must focus our dissemination and programming efforts on measures that have been shown to work.

## Punishment

Criminal sanction without correctional treatment services simply does not work. Some day, criminal justice research may discover a form of punishment that has a substantial impact on recidivism. Today,

however, the research literature is overwhelmingly clear — variation in the type and severity of offender penalties is largely irrelevant to future criminal conduct. Punishment alone does not work. Custody as a last resort Community-based treatment services yield more positive effects than treatment services within correctional facilities. Custody has its place in extreme cases, but the use of custody for service delivery is, at best, an exception requiring careful justification. It cannot be the rule.

### **Risk assessment**

The prevalence and frequency of future criminal conduct can be assessed through systematic surveys of the number and variety of risk/need factors in individual offender cases. More specifically, the most authoritative risk factors are antisocial attitudes, antisocial associates, a history of antisocial and rule-violating behaviour, indicators of antisocial personality, weak family relations and family supervision, and difficulties in school and work. Lower class origins, personal distress and neuropsychological problems are among the more minor risk factors.

When attempting to predict specific types of antisocial behaviour such as violence you should, therefore, assess the attitudinal, association and behavioural history of the offender with specific reference to violence.

### **The case-classification risk principle**

Intensive treatment services are best delivered to higher-risk cases (because lower-risk cases will do as well, or better, without the intensive service). Assigning low risk cases to the least difficult, least expensive and least intensive correctional options is not ignoring the low-risk cases, it is efficient correctional practice.

### **Need**

Treatment services should target the characteristics of higher-risk individuals (and their circumstances) that, if changed, actually reduce criminal conduct. It is no longer sound practice to select intermediate treatment targets without reference to their links to the chances of reoffending. The concept is quite straightforward — target dynamic risk factors.

### **Individualized risk/need assessment**

Systematic surveys of risk and need are best supplemented by individualized assessments that uncover individual patterns of high-risk situations and offender interpretations. In other words, build an understanding of each offender's criminality.

### **General responsiveness**

The most effective styles of treatment are those matched with the needs, circumstances and learning styles of the offenders. However, the most effective styles and modes of service are structured and active, such as social learning and cognitive-behavioural approaches. Less effective styles are less structured, relationship-dependent, self-reflective, verbally interactive and insight-oriented approaches.

### **Specific responsiveness considerations**

Offenders with interpersonal and cognitive problems require particularly structured services, but the more mature offender may respond to less structured styles of service. For example, inter-personally anxious offenders respond poorly to confrontational services. Other similar considerations may also be relevant, depending on the characteristics of the offender. Gender and ethnicity are high-priority research issues in this area.

### **Targeting weak motivation**

Resistance to therapy and weak motivation for treatment need not suggest that an offender should be excluded from treatment. It instead suggests that plans should be designed to support offender participation and to increase the offender's motivation for treatment.

### **Structured follow-up**

Criminogenic needs are dynamic (ever-changing). Therefore, the anticipation of future problems must be part of ongoing programming and treatment — structured post-program follow-up is a necessity.

### **Therapeutic integrity**

Treatment services appropriate to risk, need and responsivity levels are most effective when a specific treatment model is applied by well-trained and well-supervised therapists.

### **Professional discretion**

Effective therapists must not only apply the principles of risk, need, responsiveness and therapeutic integrity, but they must also do so with sensitivity to moral, ethical, legal and economic considerations, as well as to the uniqueness of the individual(s).

### **Social support for treatment delivery**

The prevention and rehabilitation efforts of service professionals must be actively and directly supported through training, supervision and respect for the process and goals of service. This will yield even

stronger treatment results than those documented to date under less than supportive conditions.

### **Implementation and program development**

Overall, program development and implementation depends on principles of effective consultation and significant organizational and societal change. This, of course, must involve education about, and training in, the principles discussed in this article.

It is time for evidence-based correctional treatment services and correctional management. Sole reliance on models of non-intervention, deterrence, control and just desert are no longer justifiable. They have simply not been proven effective. What is required is an active interventionist approach — one informed by a truly interdisciplinary psychology of criminal conduct. ■

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<sup>2</sup> D. Andrews and J. Bonta, *The Psychology of Criminal Conduct* (Cincinnati: Anderson Publishing, 1994).

<sup>3</sup> D. Andrews, "The Psychology of Criminal Conduct and Effective Correctional Treatment," *What Works*, James McGuire, ed. (London: John Wiley, in press).