

‘What Works’, Offending Behaviour Programmes and Accreditation

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Planned coverage:

- Programmes and accreditation in UK: brief historical background
- Recent developments in the UK:
 - Recent research
 - Changing ideas/theories/models and impact on programmes
 - The changing policy environment
 - Changing roles of Accreditation Panel
- Issues of (hopefully mutual!) interest or concern

Programmes and accreditation in the UK: a very brief history

- Mid-1990s: first CBT programmes run in prisons, early accreditation panels set up
- Late 1990s: Programmes in community championed by Chief Inspector of Probation
- 2000 -03: 'What Works' major plank of government policy: £400m Crime Reduction Programme, joint Prisons/ Probation Accreditation Panel (later CSAP) set up, huge targets set for numbers to attend programmes
- 2003-5: After encouraging early results, evaluations disappointing. Criticism of 'programme fetishism', 'mechanical' delivery. Moves to diversify interventions. Panel advises more attention to 'wrap around services', 'systems' accreditation, responsivity/motivation.
- 2008: CSAP loses independent status, advisory only

However:

- New government shows strong interest in rehabilitation/reducing re-offending
- Despite cuts in Ministry of Justice, prisons and probation, still strong support for offending behaviour programmes
- Despite major cull of 'quangos', CSAP continues to operate very actively (and is taking on new roles)

Recent research on effectiveness

Big datasets now available & can be combined, allowing:

- **Analysis of psychometric change**
- **Large-scale re-offending and reconviction studies**

More sophisticated matching of intervention and comparison samples:

Use of Propensity score matching

Inclusion of dynamic factors in comparing groups

Development of more sophisticated prediction tools (eg OGRS3, OVP, OGP)

- **Cohort studies**

(Prison, Community and youth cohorts being tracked and re-interviewed)

Combine administrative data with self-report data

Analysis of impact of combinations of interventions, not just single programmes?

Most encouraging findings

- Hollis 2007
- McDougall et al 2009
- Internal analysis 2010 (not published)
- Sadlier 2010

Hollis 2007

- Analysis of all offenders referred to programmes in the community, 2004:
5,000 non-starters, 12,000 non-completers, 8,000 completers (no matched comparison group)
- All three groups were reconvicted less than predicted (overall 10% fewer), but completers 26% fewer, non-starters 4%, drop-outs 3%.
- Those referred to programmes did better (10% lower reconviction rate than predicted) than those on other community interventions (7%)
- All stat. sig. except women's and DV programmes
- Weaknesses in study, but good indicative evidence

McDougall et al 2009

- Methodologically robust study (RCT) of psychometric change in prisoners attending Enhanced Thinking Skills
- Significant improvement in 'impulsivity' scores (a major criminogenic need), also in attitudes to offending and fewer discipline reports in prison
- These improvements should (but will they?) translate into reduced re-offending

Internal 2009 (unpublished)

- 17,000 prisoners attending ETS 2000-05 (completers and drop-outs), compared with cohort of 19,000 other prisoners released in same years
- Predicted reconviction rates for the two groups were similar, but ETS group reconvicted significantly (18%) less than predicted ; cohort only 3% less.
- Completers even better

Sadlier 2010

- Best evidence yet? Combines data from prisoner cohort study, OASys, Offending Behaviour Programmes database, PNC. Minimises selection effects.
- Propensity score matching on ETS suitability criteria (risk, responsivity, needs), static and dynamic risk factors (motivation, attitudes to crime, substance misuse, education, etc) = best matched samples so far
- One-year reoffending: ETS group 27%, cohort 33%
ETS group 60 offences per 100 ex-prisoners, cohort 120
Prisoners 'suitable' for ETS did better than those not

Newer academic concepts and models gaining ground

‘Risk- needs’ model challenged or modified, particularly by:

- ‘Desistance’ literature (Maruna, Farrall)

(Desistance achieved mainly through individual agency, motivation, readiness to change, personal narratives; + new skills, opportunities, social capital; change is not a one-off event – often a ‘zigzag’ process with frequent relapse)

- ‘Good Lives’ model (Ward, Hudson, etc)

(A fulfilling life depends on achieving a range of ‘human goods’ - eg knowledge, creativity, friendship, relatedness – through pro-social means. Therapy should focus on ‘whole person’, strengths not deficits, healthy lifestyle, skills)

Growing influence on programme design and implementation:

Focus on sustaining motivation, belief that change is possible

E.g. 'FOR' and 'Bridge' ('cognitive motivational' / 'belief' programmes); 'boosters'

Focus on individuals

E.g. More one-to-one work within group programmes

Focus on staff skills, responsiveness, engagement, trusting relationships

E.g. Offender Engagement Programme, 'therapeutic alliance', mentoring

Focus on opportunities, access to services, building social capital

E.g. 'wrap around' services, 'continuity', resettlement, the FOR 'market place'

Focus on applying learning and skills to 'real world'

E.g. more Therapeutic Communities. Also 'hybrid' interventions (eg a CBT programme delivered within a dedicated TC-like prison wing)

Changing financial and policy environment (new government)

- Major financial cuts
 - Prison overcrowding
 - Indeterminate sentence prisoners
 - The 'rehabilitation revolution' :
 - 'Payment by results'
 - 'Localism' and local commissioning
 - 'Contestability' (private/vol/faith)
- (What is the place of expensive accredited programmes in all this?)

Impact of the new environment

- Fewer qualified staff (eg Treatment Managers)
- Audit resources cut (now 2-year cycle)
- 'Rationalisation' of programmes portfolio (fewer programmes, 'one size fits all')
- Pooled training (less programme-specific)
- Less central influence on control of : local commissioners less willing to buy expensive programmes

Changing role of Panel?

- No longer independent – but this so far has not affected accreditation
- Broader advice role – eg CARATS, DRR, methadone, new programmes (eg for low IQ/women/research methodology/short sentence prisoners/juveniles)
- Regular sub-panel advises MoJ on research strategy

E & W Accreditation Criteria

- A clear model of change
 - Selection of Offenders
 - Targeting a range of dynamic risk factors
 - Effective methods
 - Skills orientated
 - Sequencing, intensity and duration
 - Engagement and motivation
 - Continuity of Programmes and Services
 - Process Evaluation and Maintaining Integrity?
 - Ongoing Evaluation.
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- A programme must score between 18-20 points to be awarded accredited status. The Panel will award recognised/provisionally accredited status where it has identified the need for specific changes that can be made in less than 12 months (or longer, where specified) and the programme has reached a score of around 16 points.

Discussion Points

1. Politics, power, role, influence, legitimacy, independence, image

- Public/political/practice/academic **image** of Panel – how created? (e.g. Cann research - image of failure? Mair critique - seen as central control, stifling innovation/diversity? How counteract?)
- IF SEVERE CUTS THREATEN STANDARDS, HOW TO RESPOND?
- How maintain political **case for continued funding** (of both Panel and programmes) Lobbying, ear of ministers? Sir Duncan has gone. Where located in Ministry – who ‘bats for’ (cricket term!)?
- Try to **influence supply of resources via accreditation?** – set levels of training, qualification, psychometrics, facilitator, preparation hours, audit criteria – but risk pricing selves out of market? (and it is a market now)
- Should Panel oppose (and if so, how?) one size fits all/ ‘modularisation’/ rolling programmes?
- Ditto shorter programmes? Ditto lower qualified staff?

1. (continued)

- More generally, what should be the **role of the Panel and its limits**? Should it accredit only? Reactively, or should it comment on what kinds of programmes are needed?
- Offer wider advice on interventions? Or even have a collective (and sometimes critical) 'voice' aimed at influencing policy in the direction of effective interventions and evidence-led research?
- How '**political**' can it be?: resist damaging policies? Eg excessive government targets, pressure on the Panel to accredit prematurely?
- Does 'loss of independence' make a difference?
- In E & W now, many subpanels, few plenaries – we are very dispersed (USA members + drugs/sex/ TC/general) and less 'voice' (used to have VIP visitors!)

2. Scope of accreditation

- Accreditation criteria – should they include ‘continuity’? (and management/training/audit arrangements?) Justification = e.g. Andrews’ Core Correctional Methods and Lowenkamp (CPAI – key role of delivery standards, staff skills and ‘wrap around’ services in what works)
- ‘Systems’ accreditation? (ECP/CARATS?)
- Use of ‘bought in’ material accredited elsewhere (eg American ‘workbooks’ as part of a ‘programme’ – what are we accrediting?)
- ‘Second level’ accreditation? (e.g. intervention ‘contributes’ but not expected to reduce offending itself) Is this Panel business?
- Non-accredited programmes?
- Other standards/accreditation bodies – eg health, education

3. Site accreditation (meaning?), Audit, links with 'the field'

- Should panels 'site accredit' (explain it to me!)? Visit as part of accred process? How many sites?
- Does a programme have to be running before accreditation?
- Audit in E & W now 'pass/fail/exceed' – compliance and quality separate.
- Different standards prisons-community?
- Video-monitoring?
- How much should Panel get involved in field and implementation issues? Panel did oversee and sign off each site – now just approve criteria and instruments (though sex offenders more hands-on – look at products, close involvement in audit, implementation advice)
- Visits and other contact with 'the field'. Why?

4. CBT/ Other Models of Change

- ◉ Are models changing? – e.g. incorporate desistance/motivation/Good Lives
- ◉ Therapeutic Communities?
- ◉ 12 steps etc?
- ◉ Faith as a main engine of change?
Implications of? (non-believers? Other faiths? pressure to attend?)
- ◉ Do criteria deter non-CBT accreditation?

5. Evaluation of individual programmes

- What level of 'proof' of effectiveness should be required? What methods? Who pays?

Reality in UK = very little evaluation, so how should the Panel respond?:

'Face facts' and remove criterion 10 (required evaluation)?

Accept 'indicators' of effectiveness (e.g. psychometric change?)

Accept e.g. 'CBT works, therefore this programme will'?

Wait for cohort studies?

Demand robust evaluation: if not, **de-accredit**?

Five year reviews – what new evidence required?
What sanctions applied?

6. Exclusion, inclusion, mixing: who misses out? Who should(n't) attend which programmes?

- People with high psychopathy scores?
- Low IQ/learning difficulties?
- Low risk?
- Short-termers?
- 'Deniers'
- Women and men together/'singletons'?
- Mix differently motivated offenders? eg street/
domestic/racial violence, anger/controlled?

UK: trend was to growing numbers of specialist programmes – now 'one size fits all'

Who misses out? Short-termers? Low IQ/ low reading skills? Juveniles? BME?

7. Access to the panel (and private applicants)

- Who decides which programmes reach the Panel (for advice/accreditation?) Should anyone have a right to apply (perhaps if pay?) If not - filtering, who does it? Secretariat? Panel itself? (reactive versus passive) Is it a free for all, or driven by policy – we need some programmes of x type’?
- Submissions for ‘advice’ – Who pays? (commercial value of accreditation = some get free advice? Also should MoJ help in developing?)

Miscellaneous other issues

- Psychometrics? What purpose? (assessment, clinical follow-up/feedback? Evaluation?) Limit? Need to do for every offender or sample?
- Accountability/Evaluation of the Panel (Cambridge evaluated but long time ago). No member appraisals in E & W – but we may quietly not be reappointed!
- Annual report very open (minutes of plenaries, copies of applications, letters to developers etc.)
- Panel membership: expertise? (UK = mix plus draft in guest experts); ‘generalists’? Should it include ‘insiders’?
- Last but very important – Diversity Criteria.