

GROUP 2

EVIDENCE-BASED OFFENDER TREATMENT PROGRAMME

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I. INTRODUCTION

Group 2 started discussions on 6 June 2012 with the selection of the Chairperson, Co-Chairperson, Rapporteur and Co-Rapporteurs. By consensus, Ms. Yamamoto was chosen as the Chairperson; Mr. Rarua, as Co-Chairperson; Ms. Rafanan, as Rapporteur; and Mr. Nozaki and Mr. Kawai, as Co-Rapporteurs. The Group, assigned to discuss the “Evidence-Based Offender Treatment Programme,” agreed to conduct its discussion in accordance with the following agenda: (1) fundamental concepts learned from the lectures of the Visiting Experts; (2) the current situation of correctional programmes in each participant’s country; and (3) the challenges of implementing an evidence-based treatment programme.

II. SUMMARY OF THE DISCUSSIONS

A. What Did We Learn about Evidence-Based Offender Treatment Programmes from the Visiting Experts and Ad Hoc Lecturers?

1. Definition of the Evidence-Based Approach to Offender Treatment

It is a systematic and scientific treatment by means of gathering information, analysis and interpretation of an offender’s risks and needs based on the collected data with the use of psychological profiling tools. The outcome of the treatment should be measurable and objective for evaluation and assessment to prove change of behaviour, reduce recidivism and assist the offender in becoming a law abiding citizen ready to return to mainstream society.

2. Essential Attributes of an Effective Treatment Programme

The effective programmes are based on the risk-need-responsivity (RNR) principles where implementing assessment before treatment is indispensable. According to the responsivity principle, Cognitive Behaviour Treatment (CBT) is thought to be effective to prevent reoffending. CBT, which is founded on the Social Learning Theory, is where new skills and behaviours are modeled since all criminal conduct is thought to be “learned.” Targeting criminogenic need factors is considered to be effective. In addition to the CBT, the Good Lives Model (GLM), which addresses the motivation of offenders more systematically, is one of the new trends. Another new approach considered to be effective for the treatment of offenders is the Desistance Theory, focusing on the process in which offenders cease their offending behaviours and refrain from offending over an extended period of time (Mr. Leo’s lecture, 14 June, p. 14).

3. Risk, Need and Responsivity Principles

The risk-need-responsivity principles have been supported by research for years. Focusing on high-risk offenders is an important factor which clearly leads to greater programme effectiveness, and not adhering to

the risk principle may have detrimental effects on offenders' treatment. There are also findings that support the increasing level of supervision in accordance with risk level and varying the number of services or referrals by risk level.

Risk is the issue of "who" to target with the correctional programmes. Risk refers to the risk of probability of reoffending and not only the seriousness of the offence. In the plenary session, there was a discussion about whether or not to include the seriousness of the offence in the level of risk. In our group, we came to a consensus that basically the risk of offence addresses the probability of reoffending; however, the seriousness of offence cannot be totally be ignored. The three elements of the risk principle are: (1) targeting offenders with higher probability of recidivism, (2) providing the most intensive treatment to higher-risk offenders, and (3) providing intensive treatment for lower-risk offenders can increase recidivism (Dr. Latessa's Lecture, 30 May, p. 3).

Need — this involves the question of "what" to target, centering on the criminogenic factors that are dynamic and highly correlated with criminal conduct. The seven domains of criminogenic needs are: (1) Antisocial Personality Pattern, (2) Antisocial Attitudes, (3) Antisocial Associates, (4) Family/Marital, (5) Education/Employment, (6) Substance Abuse and (7) Leisure/Recreation.

Responsivity — this is the question of "how" the correctional programmes shall target the needs. The principle states that the most effective programmes are behavioural in nature and that behavioural programmes have several attributes. First, they are centered on the present circumstances and needs that are responsible for the offender's behaviour, and second, behavioural programmes are action oriented rather than talk oriented (Dr. Latessa's Lecture, May 30, pp. 3, 9 & 14).

4. Interpreting the Result of the Programme: Outcome Evaluation

Interpreting the result of the programme designed for an offender is usually called the outcome evaluation. There are two types of measurements: (1) the Proximal Outcome, which is the comparison before and after the programme; and (2) the Distal Outcome, which is the measuring method or follow-up survey to determine the decline in the possibility of recidivism (Ad Hoc Lecturer, June 8, slide no. 13). However, there are problems encountered in measuring recidivism: the multiple definitions of recidivism (arrests, incarceration, technical violations, convictions and so forth); length of follow-up (how long shall the follow-up be?); internal and external factors (change of policies). These contradictory elements may be considered as dichotomous (all or nothing) (Dr. Latessa, May 31, slide no. 5).

The proximal outcome is measured by a psychological test, which is done before and after the programme is implemented and completed. This will measure the change in offender's dynamic risk (needs) before, during and upon completion of the programme.

The impact/distal (outcome) evaluation shows the effectiveness of the offence-specific programme in the reduction of the reoffending rate. It aims to determine the changes attributed to the intervention that is being assessed. The strongest research methodology is a randomized experiment, which if done properly, will produce the most credible conclusion on the effect of the programme. This is because the resulting intervention and control groups differ from one another only by chance.

However, the randomized field experiments approach is not appropriate for sex-offender treatment due to ethical implications (Marshall & Marshall, 2007), and this can also be said for other types of offences. Therefore, the quasi-experimental impact evaluations can instead be used when a randomized experiment is not feasible to assign targets to intervention and control conditions (Method of Evaluation, pp. 7 of Ms. Yamamoto's IP).

5. Evaluating the Programme Itself: Process Evaluation

Examining the "input" of a programme or quality of the programme is usually referred to as a process evaluation. It helps determine whether the programme is operating efficiently as well as the integrity of the programme. To measure the process or the quality of the programme, the Correctional Program Checklist (CPC) was developed to assess correctional intervention programmes and is also used to ascertain how closely correctional programmes meet known principles of effective intervention (Dr. Latessa, May 31,

pp. 11). However, it is also recommended that the cost effectiveness and constant review of the Programme be included in the checklist since, in the real world, funding is of high importance to such programmes.

B. The Current Situation of Correctional Programmes in Each Participant's Country

1. Japan — Corrections

- There are assessment tools not for general but for specific offenders (drug, sex and alcoholic).
- CBT-based programmes are implemented for specific offenders (drug, sex and alcoholic) who are assessed by using these specific tools.
- Outcome evaluations are implemented for these specific programmes. Especially for sex-offender treatment programmes; process evaluations are implemented, too.

2. Kenya — Probation

- The individual treatment programme is determined through the risk/needs assessment. However, depending on the region, the risk/need is adjusted since different regions have different traditions, thereby varying the approach to the evidence-based treatment that is being implemented. Through follow-ups, the results indicate that offenders benefit.
- Kenya has a system for the evaluation and classification of inmates of low, medium and high risk.

3. Maldives — Corrections and Probation

- There are some assessment tools for general and drug offenders. They are classified according to their risk assessment, and treatment is matched according to their needs.
- Therapeutic-community-based programmes are implemented for drug offenders.
- Outcome evaluation is implemented only for calculating recidivism, but it is not used for estimating process.

4. Samoa — Probation

- There is a need for assessment tools and relevant treatment programmes depending on their risk/needs-level evaluation.
- In Samoa, basic programmes such as life skills and vocational training in arts and crafts are available in the probation and parole services while referrals are made to non-governmental organizations for other services which are not offered. There is generally a lack of programmes in Samoa related to specialized areas such as sex, violent propensity, and drugs and alcohol.
- There is a need for process and outcome evaluation.

5. South Korea — Corrections

- There are some assessment tools for general offenders but none for specific offenders.
- CBT-based programmes are implemented for general offenders. It means that we use some CBT-programmes focused on security rather than reducing recidivism, and the result of assessment tools is not usually considered for the treatment.
- Outcome evaluation is implemented only for calculating recidivism rates and correctional-accidents rates, but there is no process for evaluation.

6. Philippines — Jail

- The detainees are assessed using the security risk to identify the low-, medium- and high-risk detainees and undergo an interview process during admission to identify their needs.
- From the information gathered, the different jail programmes for their development/rehabilitation are introduced during the orientation stage; however participation is optional. The jail programme has no evidence-based approach to determine its success.
- There are no evidence-based evaluation tools in the Philippines.

7. Thailand — Corrections

- There are no specific assessment tools for general offenders. Security is the priority rather than reducing recidivism.
- CBT-based programmes are not usually considered for the treatment. There are two rehabilitation programmes for drug offenders: therapeutic-community and rehabilitation-camp programmes.
- The need for process and outcome evaluation exists in Thailand

8. Vanuatu — Corrections and Probation

- There are assessment tools for general offenders but not for specific offenders.
- The Programmes include: admission, classification, spiritual counselling, cell visitation, family visitation, life-skills training, parental counselling, community work, and sports and recreation. CBT-based programmes are not available to target specific offences (e.g. sex and drug offences)
- Vanuatu does not have any outcome or process evaluation; however, the existing assessment programmes that have been listed were utilized for all offence types.

C. The Challenges and Solutions in Implementing the Evidence-Based Treatment Programme

The evidence-based treatment of offenders is a new approach primarily introduced to change the behaviour of an offender and thus reduce recidivism. Usually when something new is being introduced, different reactions are expected both from the offender and the staff that will cause difficulties in its implementation. As such, Group 2 has identified four general categories of problem areas that need to be addressed in order to have an orderly and smooth implementation. Solutions are enumerated in reference to the lectures and experiences of the visiting experts and from the group members' own countries.

First, the **Staff**. Problems such as untrained staff, job rotation, lack of technical staff, lack of motivation, and resistance to change were identified. In order to address these issues, staff should be given the right training in order to enhance their skills and thus increase their knowledge of the new programme. Utilization of a checklist and monitoring of the programme should be implemented to ensure quality. The assurance that staff handling the programme will not be easily transferred from one job to another should be taken into consideration by the administration. However, in the event that such is inevitable, simplifying the tools being used in the programme should be considered in order to easily share information.

It was also recognized that technical staff are the right people to handle the treatment programme of the offender. The hiring of additional staff with special skills, such as psychologists and sociologists, may be an option. However, due to budgetary constraints, the hiring of technical staff may be addressed by seeking the assistance of stakeholders, including consultants and university specialists. In this regard, other staff may be utilized by undergoing training on scientific-evaluation tools and developing skills in handling treatment programmes. It is also important for the staff to be motivated in performing their daily duties. Communication between all the staff members should be open, not only within the treatment department but also beyond. According to Mr. Leo's lecture: "Having a Shared Vision is not enough. We need Vision-aligned staff" to achieve our goal. Stress management support should be made easily available to anyone who is experiencing a crisis situation. According to Mr. Leo, a support team should be accessible whenever a staff member has a significant problem resulting from work or family.

Second, **Programme**. In the utilization of programmes developed from foreign jurisdictions, it does not mean that such programmes are applicable and will be successful in the recipient country. There are precautions that should be taken in using such programmes, and the following factors were identified as relevant: cultural conflict, lack of consistency, lack of evaluation tools and lack of inmate's motivation. These may be addressed by tailoring the foreign programmes to suit the present need of the recipient country. Operation Manuals should be the guiding principle in the implementation of each programme including the evaluation measures that will be applied to protect the integrity and sustainability of the programme to the offenders. The overall cooperation of all staff should be well organized in order to ensure smooth implementation. It is expected that for the programme to have integrity in its implementation, each staff member should assume the necessary actions and responsibilities of monitoring by use of scientific tools. This should occur regularly by relatively experienced staff and/or an independent specialist.

Third, **Capital Resources**. Whenever a new programme is being implemented, the problems of funds and infrastructure are always identified as one of the most important parts in planning. Funds are essential in order to have a smooth and successful programme implementation. Funding should be allocated for additional programmes by government. However, in the event that no budget is allocated or only a small amount is given, the donor-partners may be tapped to help the programme. The utilization of “tri-media” to increase public awareness will help support the success of the programme, including inmates’ hopes for reintegration into society. Reduction of recidivism will reduce the costs of operating prisons/jails. Presenting the success rates of treatment programmes will help raise budget allocations. Prison/jail congestion may be addressed whenever funds are appropriated for the construction of new infrastructure and programmes may attain their goals of success. Suitable venues for the programme should be made available at all times.

Fourth, **Information**. Communication plays a vital role in the success of programme implementation. Technology, networking and lack of cooperation from the different working groups are inevitable problems. To address such issues, appropriate information technology, such as electronic databases (e.g. Integrated Offender Management Systems), should be provided in order to gain easy access to immediate information and sharing of information online will increase the speed of record access and retrieval to/from other relevant agencies. With the use of modern technology, problems of geographical remoteness can be solved.

III. CONCLUSION

After extensive discussions on the theory, participating countries’ situations, the challenges and solutions in introducing the evidence-based offender treatment programme, Group 2 reached a consensus on the following recommendations:

- Staff should be given the right training in order to enhance their skills and, thus, increase their knowledge of the new programme.
- In order to increase the number of staff to implement the treatment, hire additional staff with special skills, such as psychologists and sociologists.
- Communication between all staff members should be open, not only within the treatment department but also beyond.
- In the utilization of programmes developed from foreign jurisdictions, programmes should be adjusted accordingly to match the recipient country’s situation.
- Operation Manuals should outline policies and procedures which will allow consistency in the implementation of the programme. To safeguard the integrity of the programme, regular monitoring using scientific tools is needed.
- The utilization of the “tri-media” to increase public awareness will help support the success of the programme, including inmates’ hopes for reintegration into society. Presenting the success rates of treatment programmes will help raise budget allocations.
- Appropriate information technology, such as electronic databases (e.g. Integrated Offender Management Systems), should be provided in order to gain easy access and retrieval of information online between relevant government agencies.