

# An Evidence Review of Recidivism and Policy Responses

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## **Foreword**

I am delighted to publish this important research report on recidivism by Professor Ian O'Donnell of UCD.

A commitment to developing a strong evidence base for the policy and other work of the Department was an essential part of the radical transformation of the Department undertaken in 2019, and was also reflected in our 2018-2020 Data and Research Strategy. As we continue to establish new ways of working in our transformed organisation, we will seek to continuously improve our capability in the development of evidence based work. As part of this process, we have already shared two other pieces of research. Our first report focused on the important area of victims' interactions with the criminal justice system. The second report focused on the area of confidence in the criminal justice system. This third report deals with the rather complex nature of recidivism in crime and related policy responses.

Recidivism is a broad term that refers to relapse of criminal behaviour, which can include a range of outcomes, including rearrests, reconviction, and reimprisonment. According to the most recent figures from the CSO 45.8% of prisoners released in 2012 reoffend within three years of their release while 43.3% of offenders managed by the Probation Service reoffend within three years (based on 2013 cohort). Against this backdrop, an offender management strategy and subsequent programmes targeting offenders across different crime categories to reduce recidivism have been developed. One example of such a programme is the Joint Agency Response to Crime ('J-ARC'), a multi-agency response to the supervision and rehabilitation of offenders which commenced in 2014. The programme aims to target prolific offenders who are responsible for large amounts of crime. In order to reduce crime and enhance public safety, the selected prolific offenders are managed through the integration of policy and practice between the J-ARC agencies. Another example is the Community Care Scheme (CSS) developed in collaboration with the Probation Service in response to prison overcrowding. This aims to address the recidivism levels of prisoners serving sentences of between 3 and 12 months.

With this piece of work Prof. Ian O'Donnell has provided us with much food for thought regarding factors underpinning recidivistic offending behaviour; public policy interventions that tackle such behaviour; and the effectiveness of these interventions. Throughout the work he addresses methodological issues of the measurement of recidivism, interpretation of these measures, the scope of various interventions and programme integrity.

I commend Prof. O'Donnell for the breadth of material covered and the in-depth level of analysis he brought to this work. I am certain that many of the methodologies and interventions referred to in this report will provide significant assistance to our efforts and I look forward to further conversations on the matter.

Aidan O'Driscoll
Secretary General
Department of Justice and Equality

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# **Glossary**

CBT the interplay between thinking, feeling, and behaving is explored in

Cognitive Behavioural Therapy.

Control group receives no treatment and provides baseline for comparative

analyses.

Dark figure difference between number of crimes committed and officially

recorded.

Deterrence criminal behaviour is inhibited for fear of the consequences.

Dynamic risk factors predictors of recidivism that are amenable to change following

intervention.

Intention to treat analysis includes all participants as originally allocated with no distinction

between programme completers and dropouts.

Labelling theory identity and behaviour are influenced by the terms used to describe

an individual.

Logistic regression statistical method for predicting binary (either/or) outcomes.

Meta-analysis technique for synthesising results of multiple studies that examine

the same issue.

Naïve comparison description of unadjusted results.

Per-protocol analysis includes only participants who completed programme.

Propensity score matching statistical technique that uses relevant background information to

estimate probability that individual will be in one condition rather

than another.

Quasi-experimental design manipulates independent variable without randomisation.

Rational choice theory decision about whether to commit crime results from a calculation

of anticipated costs and benefits.

RCT the 'gold standard' in evaluation research is the Randomised

Controlled Trial where participants are allocated by chance to

treatment and non-treatment conditions.

Recidivism reversion to criminal behaviour measured via self-report, rearrest,

reconviction or reimprisonment.

RNR principles thought to underpin effective interventions (Risk-Need-

Responsivity).

Selection effect if background characteristics affect both choice of intervention and

likelihood of recidivism, spurious relationships might be interpreted

as causal.

Social learning theory behaviours are shaped through observation, imitation and

reinforcement / punishment.

Static risk factors aspects of an offender's history that are predictive of recidivism but

not amenable to intervention.

Statistical significance likelihood that relationship between variables is explained by

something other than chance.

Survival analysis statistical method of controlling for variable follow-up intervals.

# **Executive summary**

#### Introduction

Recidivism is defined variously as reoffending, rearrest, reconviction or reimprisonment. It is measured through self-report and data captured by police, prosecutors, courts, and agencies involved in sentence administration. When interpreted with appropriate caution, it is a relevant measure of the performance of a criminal justice system.

The purpose of this report is to review European research, published in English between 1990 and 2019, with a focus on articles that appeared in leading, peer-reviewed journals. The approach taken to the selection of articles ensured that they were of a consistently high quality.

There are challenges extrapolating from countries where the data are more reliable, the linkages across agencies are better, the system has different priorities, and the administration of justice is organised in a way that has no obvious parallel in Ireland.

#### **Dimensions**

While initially steep, the overall rate of recidivism soon reaches a plateau and then tapers off. A two-year follow-up period will generally suffice for analytical purposes, except for sex offenders, whose base rate of reoffending is low, and for whom extended monitoring may be necessary.

Static risk factors are aspects of an offender's history that are predictive of recidivism but cannot be changed. They include (young) age at first offence and number of previous convictions.

Dynamic risk factors associated with recidivism include unemployment and substance misuse. These are amenable to intervention, and the research suggests, for example, that employment opportunities are grasped by those who have decided to turn away from crime

If people who come into conflict with the law perceive their treatment as procedurally fair this may reduce the likelihood of future offending. Procedural unfairness communicates disrespect and disregard, leading to further alienation, resistance and noncompliance.

#### Interventions

There is a growing body of evidence that short terms of imprisonment are less effective in terms of reducing recidivism than suspended sentences or community service. They are also much more expensive to administer.

Planned and structured early release, including parole, may reduce recidivism.

Generally speaking, treatment programmes can be demonstrably effective, but care is required when interpreting results – and generalising from them – on account of widespread methodological shortcomings including small samples, selection effects, and the lack of properly-matched comparison groups.

A measure of motivation and readiness to change should be included in any analysis.

In assessments of programme effectiveness, it is essential to take account of those who do not complete treatment, for whom outcomes are typically less favourable. This may be because non-completers share characteristics with those who are prone to recidivism in that they are younger, have higher risk profiles, more convictions and fewer community ties. However, it is also possible that non-completion itself is detrimental with respect to future offending and, in some cases, it may be better to do nothing than to begin, but drop out of, a programme.

When interventions are being delivered it is essential that they are properly targeted and satisfy the demands of programme integrity. The training and personal qualities of those charged with delivering interventions may have an impact on outcomes and research should not be limited to the client group. It may be better, in some cases, to do nothing than to implement a programme badly.

Assessments of change require a focus on differences that are clinically relevant as well as statistically significant. A pattern of results that is meaningful in a statistical sense, in that it is unlikely to be random, may be of no great practical consequence.

As a group, sex offenders have received a great deal of attention and some treatment programmes have led to statistically significant – but modest – reductions in recidivism.

The results of interventions aimed at preventing repeat domestic violence through education and attitudinal change are disappointing.

#### Lessons

On balance, the evidence points to a significant treatment effect associated with cognitive behavioural interventions delivered both in community and custodial settings. For substance misuse, public health-based harm-minimisation approaches seem to hold most promise.

The reviewed literature stresses the importance of proceeding cautiously, remaining alive to the challenges that beset interpretation and generalisability, and offering careful, focused conclusions that are always open to revision.

## 1. INTRODUCTION

Breaking the cycle of offending is a pressing challenge for societies everywhere. It is essential for promoting community safety and vitality, controlling expenditure on the criminal justice system, and minimising the collateral consequences for offenders and their families that accompany repeat convictions. As the number of people in prison and under community supervision increases so too does the need for successful reintegration. This research report provides a critical assessment of the evidence pertaining to recidivism. It aims to be a state-of-the-art review that can be periodically updated and that might set the parameters for a piece of empirical research. It identifies the limitations of existing studies (and how they might be rectified) as well as highlighting deficits in understanding (and how they might be filled).

There may be lessons in what follows for the legislature (regarding possible law reform), the judiciary (about the relative efficacy of different sentencing options), policy makers and practitioners (regarding what works, how, and for whom). Knowing the characteristics of recidivism-prone individuals or situations will allow interventions to be targeted with greater precision and confidence. This is not only to the advantage of the individuals concerned and their families, but there is a potential diffusion of benefits to the wider community. Social inclusion is promoted. Trust and civic participation are increased. This goes some way towards realising the Department of Justice and Equality's vision of "... a safe, fair and inclusive Ireland".

The purpose of this project was to review European research, published in English in peer-reviewed journals between 1990 and 2019. Europe was defined widely to include the 47 member states of the Council of Europe rather than being limited to the European Union that no longer includes the UK, where a significant body of criminal justice research exists. Three primary areas were addressed:

- (i) factors underpinning recidivist and prolific offending behaviour;
- (ii) public policy interventions that tackle recidivism and prolific offending; and
- (iii) effectiveness of these interventions and likelihood of successful transplantation to an Irish context.

The chapter structure of the report reflects the foregoing priorities. Chapter 2 sets out what can be learned from the available research about key dimensions of recidivism in terms of rates and risk factors. Chapter 3 addresses a variety of interventions ranging from court disposals to treatment programmes administered in community and custodial settings. In Chapter 4 the focus shifts to lessons that might be learned from the European experience, with an emphasis on limitations of method and interpretation. There is a focus throughout on the extent to which interventions, and

outcomes, vary by offence type. Attention is given to programme design as well as singling out the correlates (and, ideally, causes) of success or failure (however defined). The extent to which any initiatives may be generalisable to other jurisdictional contexts is probed with a view to identifying core, transferable features.

Consideration is given to the theories underlying approaches to preventing / reducing recidivism, the various agencies charged with the task, the governance arrangements that are put in place, the variety of intervention sites, and the kinds of metrics that have been developed to capture impact. Recidivism is generally defined as reoffending, rearrest, reconviction or reimprisonment. The latter three categories are proxies for the first despite the terms often being used interchangeably. But not all crimes are reported, let alone detected, and there is a process of attrition at work here with levels tapering from offence to imprisonment. (Sometimes a wider definition is used, to include breach of supervision conditions or revocation of licence; neither necessarily involves the commission of a new offence, but either can result in imprisonment.)

Cooke and Michie (1998: 171) set out five reasons why recidivism data are important for policy and practice, namely that they:

- 1. Provide baseline data that assist decision making in sentencing and parole. This allows for more reliable risk prediction.
- 2. Allow evaluation of the relative efficacy of various sentencing options.
- 3. Facilitate assessment of the impact of offender management programmes.
- 4. Inform prison planning both in terms of the overall number of places required and the number of places on specific rehabilitative programmes.
- 5. Enable modelling of the likely impact on reconviction rates or prisoner numbers of changes to sentencing or parole policy.

To this list might be added the possibility that the availability of reliable information in this area might stimulate interest in criminological research more generally; something that has been sorely lacking in an Irish context.<sup>1</sup>

#### 1.1 Methods

This study sought to identify, collect and analyse peer-reviewed journal articles pertaining to recidivism. A transparent search strategy was adopted to minimise the likelihood of researcher bias. Given that recent findings in recidivism research, as opposed to the historical development

<sup>&</sup>lt;sup>1</sup> The UCD Institute of Criminology was established in 2000 and has been to the forefront in terms of empirical research and postgraduate education. However, the research infrastructure remains slight and funding is scarce.

of the concept, were the main focus, the search period was limited to articles published between January 1990 and May 2019. In order to identify the relevant articles, an exhaustive search of twelve major electronic databases was carried out, namely:

- 1. Academic Search Complete (EBSCO)
- 2. Scopus
- 3. Criminal Justice Journals (Hein)
- 4. PsycArticles (ProQuest)
- 5. PsycInfo (ProQuest)
- 6. Social Science Full Text (H.W. Wilson)
- 7. NCJRS Abstracts
- 8. Annual Reviews Journals
- 9. Applied Social Sciences Index and Abstracts
- 10. JSTOR
- 11. Science Direct
- 12. Web of Science

These databases captured recidivism research from criminological, sociological, psychological and medical perspectives, ensuring that a diverse and interdisciplinary range of perspectives was covered.<sup>2</sup>

The volume of subject-specific material is very large. For example, an all-fields SCOPUS search for 'recidivism' executed on 16 September 2019, without any filters applied, yielded 34,438 hits. (The volume of publications in the area is growing swiftly. The same search carried out six months earlier (26 March) when the tender for this research was being drafted resulted in 32,735 hits.)<sup>3</sup>

Each database was searched using the following key terms: recidivism; recidivist; recidivate; reoffending; rearrest; reconviction; reimprisonment; re-entry AND crime; desistance; persistent OR prolific OR repeat OR priority offender; offender management; reducing offending; and relapse into crime. The search terms were originally entered into the title, key word, abstract and paper fields, but the number of articles generated proved too voluminous. As a result, they were entered into the title field only.

<sup>&</sup>lt;sup>2</sup> The contents of the Oxford Research Encyclopedia of Criminology and Criminal Justice, Oxford Bibliographies in Criminology, and the Wiley Encyclopedia of Criminology and Criminal Justice were reviewed. Unsurprisingly, they contained little of specific relevance, being descriptive overviews of the field rather than attempts to present new empirical findings.

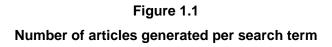
<sup>&</sup>lt;sup>3</sup> The upward trajectory has continued and, on 28 April 2020, when this report was being finalised, the number of hits stood at 36,369.

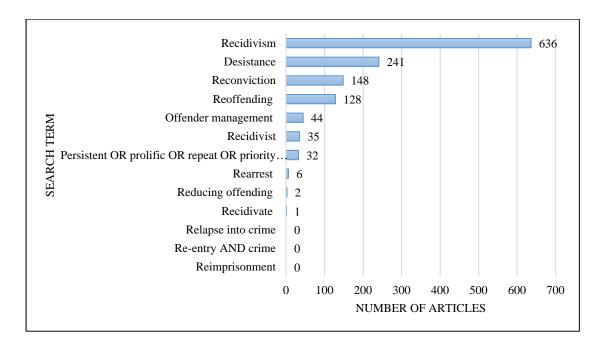
Two primary inclusion criteria were used when determining the initial sample. First, the article had to be written in English. Secondly, the article had to report findings pertaining to a Council of Europe country; though it was acceptable if data from elsewhere were also drawn upon for comparative purposes. This geographic inclusion criterion was decided upon to ensure a focus on studies whose findings and policy recommendations were potentially applicable – and transferable – to an Irish context. Geographic filters were availed of where possible to refine the search results. In the case of databases which lacked a geographic filter, each article title was examined and those based exclusively on research conducted in non-Council of Europe countries were discarded. This generated a total of 1,273 articles. Table 1.1 and Figure 1.1 provide a summary of the number of articles generated per database and per search term respectively following application of the primary inclusion criteria.

Table 1.1

Number of articles generated per database

| Database                                    | Number of articles |
|---------------------------------------------|--------------------|
| Academic Search Complete (EBSCO)            | 52                 |
| Scopus                                      | 538                |
| Criminal Justice Journals (Hein)            | 27                 |
| PsycArticles (ProQuest)                     | 17                 |
| PsycInfo (ProQuest)                         | 313                |
| Social Sciences Full Text (H.W. Wilson)     | 80                 |
| NCJRS Abstracts                             | 90                 |
| Annual Reviews Journals                     | 0                  |
| Applied Social Sciences Index and Abstracts | 42                 |
| JSTOR                                       | 53                 |
| Science Direct                              | 55                 |
| Web of Science                              | 6                  |





The 1,273 articles generated by these search criteria were exported to EndNote via an RIS file. As the lists generated by the various databases tended to overlap, duplicates were eliminated using the relevant function on EndNote. A manual search of the sample was also carried out to ensure all double entries had been removed. Despite the excision of over 500 duplicate articles, the sample size remained large, at 766 articles.

This was an impractical volume of material to analyse within the budgetary and time constraints of the project. As a result, an additional selection criterion was developed to refine the sample. Articles were sorted based on their journal of publication, and these journal titles were manually cross-checked with those included on the Criminology and Penology Journal List of the Social Sciences Citation Index. This index, developed by Clarivate Analytics, comprises leading, internationally recognised academic journals. It was reasoned that if the article in question had appeared in one of the 65 journals ranked on the Criminology and Penology Journal List, this was a benchmark of quality which ensured that only refereed articles exemplifying academic excellence were included in the sample. These are the best-established and most highly regarded outlets in the field and publication therein is a mark of distinction. This reduced the tally to 310 articles.

Three academics with significant collective expertise in the field of criminology rated the 310 articles (based on titles and abstracts) with a score of zero or one based on stipulated guidelines. Only articles which contained policy initiatives to reduce recidivism rates, referred to causes and correlates of recidivism, included an evaluation of the effectiveness of interventions or programmes pertaining to recidivism and/or were premised on research conducted in the Council of Europe

could receive a score of one. Articles which solely examined the psychometric properties or predictive validity of various risk assessment tools received a score of zero.

Each reviewer undertook this rating independently then convened for a workshop during which the scores were collated by a colleague who had not been involved in the review process. Every article received an aggregate score of between zero and three. Only articles which received scores of two and three were included in the final sample; this corresponded to 43 and 46 articles respectively. This final sample of 89 articles – containing studies from Austria, Denmark, Iceland, Malta, the Netherlands, Norway, Spain, Sweden, Switzerland, and the UK as well as Ireland – was downloaded, read in full by the author, and analysed.<sup>4</sup> Table 1.2 summarises the searching and funnelling process that yielded the final sample.

Table 1.2
Sample selection

| Number of articles identified through database | 1,273 |
|------------------------------------------------|-------|
| searching                                      |       |
| Number of articles following deduplication     | 766   |
|                                                |       |
| Number of articles following cross-check with  | 310   |
| Criminology and Penology Journal List          |       |
| Number of articles remaining after tripartite  | 89    |
| review process                                 |       |

#### 1.2 Caveats

One weakness of this report is that unpublished findings are omitted.<sup>5</sup> Similarly, work that has not been written in, or translated into, English will not have been captured. Studies which did not achieve statistically significant results (i.e., where observed relationships could be due to chance)

<sup>&</sup>lt;sup>4</sup> Upon close reading it became evident that a small number of articles (e.g., Berghuis 2018; De Claire and Dixon 2017; Newton et al., 2018) confined themselves to US data. This was not clear from titles, abstracts, or indeed author affiliations (Maria Berghuis is based the Netherlands, Karen De Claire and Louise Dixon work in the UK, Danielle Newton and her colleagues are associated with Australian universities). The findings from these papers are outside the parameters of this report, but they remain in the bibliography in order to maintain the integrity of the search process.

<sup>&</sup>lt;sup>5</sup> This is unlikely to have been a critical shortcoming. Koehler et al. (2014) searched online databases for studies of the impact of drug treatment on recidivism in Europe. This was supplemented with a survey of key informants in all 27 EU member states. Around half of the informants provided details of drug treatment programmes that had been evaluated, but none reached an acceptable standard of methodological rigour. In other words, the online database search was sufficient to identify all of the extant high-quality research.

are less likely to be published; this means that it will be difficult to identify factors that may militate against programme success. Even striking patterns of results need to be treated with a measure of caution unless they can be independently replicated. Also, there may be some relevant papers that were not discovered because the chosen keywords did not appear in their titles.<sup>6</sup>

Constraints of funding and time meant that the scope of the project was restricted. It was not possible to include government reports, PhD dissertations, books, working papers, reviews that did not appear in the journals selected for inclusion, or documents prepared by non-governmental organisations or intergovernmental bodies.<sup>7</sup> Any of the foregoing might contain useful findings (although it must be said that if the results are strong they are likely to end up as a peer-reviewed paper at some stage and that the priority of social scientists – from the point of view of discoverability – is to produce articles rather than books so it is likely that the search strategy located much of the important published work).

In summary, the emphasis, given the resources available to complete the review, was on papers in leading journals, published in the English language over a defined period of time. While it must be acknowledged that a different selection strategy may have generated a different final sample, the articles identified for this report would likely form the core of any review in the area.

## 1.3 Approach

Hopkins and Wickson (2013: 596) put it well when they called for programme rationales that were "plausible" (i.e., likely to have the desired effect), implementation processes that were "doable" (i.e., could be carried out within reasonable temporal and financial parameters and are in accord with prevailing political priorities), and desired outcomes that were "testable" (i.e., the underlying theory of change has been properly articulated in advance and is amenable to rigorous and meaningful evaluation). To this I would add a fourth and final component, namely "translatable" (i.e., the potential for transplanting what has proven successful elsewhere to an Irish context). This fourfold scheme underpins the approach taken to the studies reviewed in this report where the emphasis is on identifying approaches that are plausible, doable, testable and translatable.

Rather than being an academic exercise designed to withstand the rigours of the peer review process, this report is aimed at a broad range of stakeholders across the criminal justice sector

<sup>&</sup>lt;sup>6</sup> This is probably not a major concern given authors' (and publishers') desire to ensure that research findings are targeted at the correct audience in the interests of maximising potential 'impact'. Academics are only too well aware of the need to devise titles that accurately represent the content appearing beneath them.

<sup>&</sup>lt;sup>7</sup> This includes, for example, several Campbell Collaboration reviews that address cognate areas (see: <a href="www.campbellcollaboration.org">www.campbellcollaboration.org</a>) and the *Introductory Handbook on the Prevention of Recidivism and the Social Reintegration of Offenders* published in 2012 by the United Nations Office on Drugs and Crime.

including policy makers, practitioners and the judiciary in the hope that it might set the context for an empirical study in due course. If what follows sets out some of the pitfalls associated with work in this area as well as highlighting some examples of good practice and some pointers for future research, it will have achieved its ambition.

# 2. DIMENSIONS

What can be gleaned about national recidivism rates from the 89 papers reviewed for this report is summarised in Table 2.1. Clearly the deficit in understanding is not limited to Ireland. Of the 47 countries in the Council of Europe, no data were available in the sources consulted for 41 (the UK is counted as a single jurisdiction) and what has been published is by now somewhat dated.<sup>8</sup> Follow-up periods vary (from six to 216 months), and cross-national comparisons can be fraught with difficulty, but the limited available evidence, which is based on official statistics rather than self-reports, points to a slowing in the rate of recidivism over time and suggests that the trend in reimprisonment in Ireland is closer to that in Scotland than to the other countries shown in Table 2.1, which are generally known for their temperate penal climates.

Table 2.1
Recidivism in Europe

|                              | Released  | Follow-up<br>(months) | Reimprisoned (per cent) | Reconvicted per cent) |
|------------------------------|-----------|-----------------------|-------------------------|-----------------------|
| England & Wales <sup>1</sup> | 1998      | 24                    | n/a                     | 58                    |
| Iceland <sup>2</sup>         | 1994-1998 | 12                    | 6                       | 11                    |
|                              |           | 36                    | 28                      | 37                    |
|                              |           | 60                    | 49                      | 53                    |
|                              |           |                       |                         |                       |
| Ireland <sup>3</sup>         | 2001-2004 | 12                    | 27                      | n/a                   |
|                              |           | 24                    | 39                      | n/a                   |
|                              |           | 36                    | 45                      | n/a                   |
|                              |           | 48                    | 49                      | n/a                   |
|                              |           |                       |                         |                       |
| Malta <sup>4</sup>           | 1976-1994 | 12                    | 12                      | 15                    |
|                              |           | 36                    | 25                      | 30                    |
|                              |           | 72                    | 32                      | 42                    |
|                              |           | 216                   | 42                      | 52                    |

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<sup>&</sup>lt;sup>8</sup> It is possible, of course, that additional data would be available in the reports of national statistics bodies or in documents produced by justice ministries or related agencies; materials that would not have been identified by the search strategy adopted for this report.

| Netherlands <sup>5</sup> | 2010-2013 | 18 | n/a | 46  |
|--------------------------|-----------|----|-----|-----|
|                          | 2010-2011 | 6  | 11  | 20  |
|                          |           |    |     |     |
| Norway <sup>6</sup>      | 2003-2006 | 36 | 27  | n/a |
|                          | 2005-2008 | 12 | 17  | 23  |
|                          |           | 24 | 22  | 31  |
|                          |           | 36 | 27  | 36  |
|                          |           | 48 | 30  | 39  |
|                          |           |    |     |     |
| Scotland <sup>7</sup>    | 1989-1995 | 24 | 48  | 72  |
|                          |           | 36 | 51  | 73  |
|                          |           | 48 | 53  | 74  |

#### Sources:

- 1. Bowles and Florackis (2007)
- 2. Baumer et al. (2002)
- 3. O'Donnell et al. (2008)
- 4. Baumer (1997)
- 5. Beijersbergen et al. (2016) and Wermink et al. (2018)
- 6. Skardhamar and Telle (2012) and Andersen and Skardhamar (2017)
- 7. Cooke and Michie (1998)

#### Caveats / aids to interpretation

It is vital to be clear about what (and who) is being measured and the length of the follow-up period. It may also be necessary to take account of national contextual factors. For example, Andersen and Skardhamar (2017) reminded us of the importance of recognising that, "... to a greater extent than other countries (including the Nordic ones), Norway imposes imprisonment and other serious sanctions on traffic offenders. As this is a particularly low risk group in terms of reoffending, recidivism rates are deflated" (p. 616). Table 2.2 shows the degree of variation for samples of persons arrested / convicted / released from prison. This table gives 36 different measures. Generally speaking, the level of recidivism was highest in the sample who had previously been imprisoned and lowest in the sample who had previously been arrested. Limiting our attention to the one-year follow-up, for example, it is clear that the latter group was much less likely to be imprisoned than the former (9.4 per cent vs 16.7 per cent). The point is that even where data quality is very high, as in the Nordic countries, careful interpretation is required.

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<sup>&</sup>lt;sup>9</sup> Similarly, Baumer et al. (2002) reported that: "These reconviction rates exclude convictions for crimes punishable only by fines. Thus, the results ... underestimate overall reconviction rates for persons released from Iceland's prisons" (p. 49, fn 6).

Table 2.2
Recidivism rates, Norway

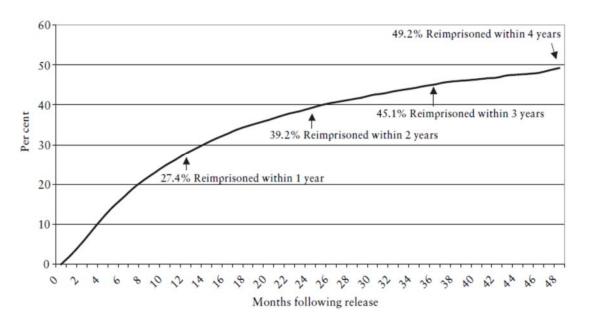
|                                         |            | Percentages |         |         |         |
|-----------------------------------------|------------|-------------|---------|---------|---------|
| Measure                                 | Sample     | I year      | 2 years | 3 years | 4 years |
| Rearrest                                | Arrested   | 28.9        | 39.2    | 44.9    | 48.5    |
|                                         | Convicted  | 30.6        | 42.2    | 48.3    | 52.2    |
|                                         | Imprisoned | 32.3        | 42.5    | 48.6    | 53.0    |
| Reconviction                            | Arrested   | 15.7        | 23.0    | 27.6    | 30.5    |
|                                         | Convicted  | 20.4        | 29.4    | 34.7    | 37.8    |
|                                         | Imprisoned | 22.6        | 30.6    | 35.5    | 39.2    |
| Reimprisonment                          | Arrested   | 9.4         | 14.3    | 17.4    | 19.8    |
| ALL | Convicted  | 13.4        | 20.2    | 24.1    | 26.9    |
|                                         | Imprisoned | 16.7        | 22.5    | 26.6    | 29.8    |

Source: Andersen and Skardhamar (2017: 623)

#### 2.1 Overall rates

O'Donnell et al. (2008) followed up all prisoner releases in Ireland between 1 January 2001 and 30 November 2004 (n=19,955) for between one month and 48 months. The pattern they found was of a high rate of reimprisonment in the early post-release period that slowed down considerably after two years and then reached a plateau beyond which little additional recidivism was observed. This trend of a steep initial upswing and then a flattening is shown in Figure 2.1 and seems typical (with some variation for sex offenders as explained below). In Spain, Cid (2009) found that the reimprisonment rate was steepest during the first two years after release or the imposition of a suspended prison sentence. Cooke and Michie (1998), in Scotland, also found that the rate of reconviction was steepest during the first two years post-release and then tapered off: "... reconviction is most likely in the first year after release and very unlikely after two years" (p. 180). They found the same trend for reimprisonment.

Figure 2.1
Recidivism rates for released prisoners, Ireland



Source: O'Donnell et al. (2008: 132)

Bowles and Florackis (2007) studied 34,126 offenders convicted in England and Wales who were released from prison during 1998. This comprised everyone released during the year for whom complete records were available (88 per cent of the total). By the end of the two-year follow-up period, 58 per cent had been reconvicted with most of them coming to attention again relatively quickly. Breaking down the time after release into six-month intervals, they found that 42 per cent of convictions occurred during the first six months, 31 per cent in the next six months, 17 per cent between 12 and 18 months, and 10 per cent in the final phase (18 to 24 months).

## 2.2 Special groups

Table 2.1 presents the limited amount of data available in the papers under review that refer to national samples and aggregate levels of recidivism. We can learn something more from the literature about particular offender groups and this is addressed next.

#### Homicide

Sturup and Lindqvist (2014) tracked a cohort of offenders in Sweden (n=153; comprising 139 males and 14 females) who had committed homicide in the 1970s. The follow-up period ranged from 27 to 37 years, but this included any time spent in custody; the authors could not access the data that would have allowed them to estimate how long individuals had been released prior to reoffending. Limiting the focus to major violent crimes recorded on the national register for criminal convictions,

the overall recidivism rate was 10 per cent and the average time taken to reoffend was over nine years. Five individuals (three per cent) killed again, after an average of five years. Significant risk factors were young age and presence of a psychotic disorder on the part of the perpetrator, and victims who were male, known to the offender, and intoxicated.

#### Property crime

Baumer (1997) found that property offenders in Malta were more likely to be reconvicted and reimprisoned than violent offenders. There was no difference between drug offenders and non-drug offenders. Beijersbergen et al. (2016) found that prisoners convicted of violence or drug offences in the Netherlands were less likely to be reconvicted than those convicted of property crimes. Cid (2009) found offence type was not related to recidivism in Spain, but his categorisation was perhaps excessively broad: property offences versus the rest. Brownlee (1995) found that burglars in the UK were more likely to be reconvicted than persons convicted of other offences.

#### Sex offenders

Sexual reoffending has a low base rate, and this can make trends difficult to discern, especially in the short term. Cann et al. (2004) followed up all 419 adult male sex offenders released from prison in England and Wales during 1979. The follow-up period was unusually extensive at 21 years. There were three main findings: 24.6 per cent were reconvicted for a sexual offence; 21.7 per cent were reconvicted for a non-sexual violent offence; and 61.8 per cent received a new conviction of some description

The time to conviction was lengthy and contrasted with the general picture, described above, which is for new convictions to be acquired early in the post-release period. As Table 2.3 shows, by the end of two years – a typical follow-up period – one in three of the sample had acquired a new general conviction and one in ten had been reconvicted of a sexual offence. By the end of 10 years these figures had jumped to more than half and one in five respectively and they continued to rise, albeit at a much slower rate until 21 years had elapsed.

Table 2.3

Reconviction rates for sex offenders, England and Wales

|                             | Type of reconviction         |                                     |                                     |  |  |
|-----------------------------|------------------------------|-------------------------------------|-------------------------------------|--|--|
| Follow-up period<br>(years) | Sexual cumulative number (%) | Violent<br>cumulative<br>number (%) | General<br>cumulative<br>number (%) |  |  |
| 2                           | 43 (10.3)                    | 31 (7.4)                            | 143 (34.1)                          |  |  |
| 5                           | 66 (15.8)                    | 60 (14.3)                           | 205 (48.9)                          |  |  |
| 10                          | 84 (20.0)                    | 75 (17.9)                           | 236 (56.3)                          |  |  |
| 21                          | 103 (24.6)                   | 91 (21.7)                           | 259 (61.8)                          |  |  |

Source: Cann et al. (2004: 5)

Cann et al. (2004) noted that the entire sample was not at liberty for the full 21-year-period, but the data required to calculate and account for any periods in custody were not available. The authors did not mention mortality, but it is very likely that at least some of the sample died during the follow-up period (age at release ranged from 15-76) so could not have been 'at risk' of reoffending for the duration. In combination, these factors mean that their reconviction figures are minimum estimates. Also, the 'dark figure' of unreported or unrecorded crime is large for sexual offences and the rate of attrition is high, again meaning that the official figures are incomplete measures.

Craissati et al. (2009) found a sexual reconviction rate of two per cent in a sample of sex offenders who had been living in the community in southeast London for four years. When the follow-up period was extended to nine years, the sexual reconviction rate rose to 12 per cent. A later study by Craissati et al. (2011) used a wider definition of 'sexually risky behaviours', based on soft information such as police intelligence, as an outcome variable, and found what they deemed to be a "... 'truer' sexual re-offending rate of 20 per cent" (p. 153). The sexually risky behaviours in question included reconvictions, rearrests (whatever the outcome), and recalls to custody (even if no conviction followed). Craissati et al. (2011) found that "... the average time to sexual reconviction was four-and-a-half years for child molesters and three years three months for rapists. Overall, rapists were reconvicted more often and more quickly than child molesters, although these differences were not always significant" (p. 162).

Falshaw et al. (2003) followed up 173 participants in a community-based sex offender treatment programme in England's Thames Valley area. They had completed treatment between 1995 and 1999 and were followed up for an average of 3.9 years (range: two years to 5.9 years). There was some variation in the estimates of reconviction according to the source accessed but the Police National Computer (PNC) showed that nine per cent had been reconvicted of a sexual offence.

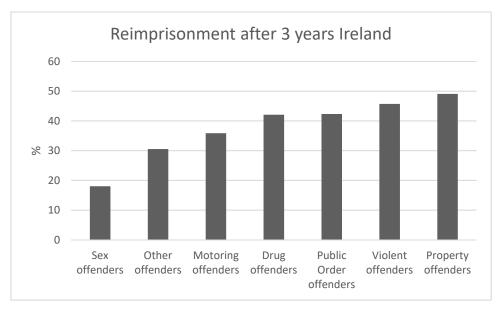
(The rate was lower – three per cent – when the Offenders Index database maintained by the Home Office was used.)

Information was also gathered on any offence-related sexual behaviour (some of which may ultimately lead to a conviction). There is merit to this approach in that the usually accepted metric – reconviction – is itself a proxy for reoffending, so why not use other proxies that might be closer to the behaviour in question? This might be a more effective strategy – and one more likely to find favour with those for whom evidence is required as a matter of priority – than extending the follow-up period by a decade. Broadening the outcome measure to include reports of sexually concerning behaviour (legal or illegal), from probation, health, and social services, boosted the level of recidivism to 16 per cent; up by a factor of 1.8 compared with the PNC figure. Combining all of the available sources yielded a base rate of recidivism of 21 per cent. Falshaw et al. (2003) The authors concluded that: "Not only does using [unofficial] sexual recidivism as an additional outcome measure boost the current low base rate of sexual reconviction, but it also provides a more sensitive indicator of treatment success" (p. 213).

Also in England and Wales, Bowles and Florackis (2007) found low reconviction rates for sex offenders (18 per cent over two years compared with 38 per cent for drug offences and 47 per cent for violence). Craig (2011) followed up a sample of convicted offenders referred to a regional secure unit in the United Kingdom for assessment as outpatients between 1992 and 1995 (n=131; of whom 85 were (contact) sexual offenders and 46 were non-sexual violent offenders). The focus of the study was on the relationship between age and recidivism. The sample was divided into four age categories: less than or equal to 24 years, 25-34, 35-44 and 45 or above. Recidivism was defined as reconviction at up to five years follow-up. Violent offenders were reconvicted at twice the rate of sexual offenders (63 per cent vs 28 per cent). Overall, there was an almost linear inverse relationship between age group and recidivism, with members of the youngest group being reconvicted most frequently. The exception was for the small number reconvicted of a sex offence, among whom the oldest age band (45 or above) had the highest reconviction rate. Cooke and Michie (1998) found that reconviction and reimprisonment rates were lower in Scotland for those whose offence involved sex or violence.

These patterns are found also outside the UK. In a study of serious juvenile offenders in the Netherlands, Mulder et al. (2010) found "... considerably lower rates of recidivism in sex offenders" (p. 35). O'Donnell et al. (2008) found that, as a group, sex offenders released from custody in Ireland were the least likely to be reimprisoned within three years (18 per cent). (Property offenders were most likely (49 per cent) to find themselves behind bars again over the same period with persons who had served time for other crimes falling between these extremes.) This trend is shown in Figure 2.2.

Figure 2.2
Reimprisonment after three years, Ireland



Source: O'Donnell et al. (2008: 136)

In a study of a nationally representative sample in Austria, Rettenberger et al. (2014) followed up 1,115 male sex offenders, whose crimes had been registered between 2001 and 2009, for at least 30 months after their release from prison (range: 30-125 months; average: 77 months). Around half were child molesters (victims under 14 years of age) and the other half were rapists (victims aged 14 or over). After the typical follow-up period of two years the overall level of recidivism was 18 per cent, with reconvictions for violence coming to eight per cent, and two per cent having been convicted of a new sexual offence. Five years post-release the figures were 31 per cent, 17 per cent and six per cent respectively. By ten years, the numbers followed up were small, but the increase was slightest for new sexual offending with overall rates of 41 per cent, 33 per cent, and eight per cent. The sexual recidivism rate was higher for child molesters than rapists (eight per cent vs four per cent after five years but narrowing to eight per cent vs seven per cent after 10 years). However, rapists had higher levels of violent and general recidivism.

Rettenberger et al. (2014) also compared first-time sexual offenders (the overwhelming majority) with those who had a prior record for such offending. At the five-year follow-up the first timers were significantly less likely to have acquired a new conviction for a sexual offence (five per cent vs 13 per cent) or for violence more generally (16 per cent vs 25 per cent). While the likelihood of violent recidivism decreased along with age there was no such relationship for sexual recidivism, with the authors reporting that, "... the simple formula of the aging effect—the older the sex offender, the lower the recidivism risk for sexual violence—could not be applied" (p. 440).

The authors suggested that it would be profitable if future research disaggregated child molesters by the sex of their victim and whether the offence was intra- or extra-familial. They also cautioned that the number of offenders dwindled considerably as the follow-up period was extended and that a reliance on official data will lead to an underestimate of the level of sexual offending. However, these criticisms are hardly unique and could be raised against most research in the area. It seems reasonable to conclude that, on account of its scale and representativeness, this study has generated findings that can be considered robust in an Austrian context and that are very useful from a comparative perspective.

Despite their low recidivism rates, sex offenders remain the focus of a great deal of research. The high concern that they excite, which is amplified by media coverage, may help to explain why the evidence of disproportionately low recidivism rates does not redound to their advantage in terms of sentencing discounts or a more generous approach towards early release.

#### Fine defaulters

One of the most striking patterns uncovered by O'Donnell et al. (2008) was the high recidivism rate for fine defaulters:

... controlling for a wide array of factors, persons who served a prison term for defaulting on a fine ... exhibited significantly higher reimprisonment rates than those who received an immediate sentence of imprisonment. In the former cases, the initial sanction was a fine but the consequence of defaulting on payment was custody ... looking at the full follow-up period we estimate that fine defaulters are two times more likely to be reimprisoned than those who were imprisoned for an offence straight away (85.4 per cent vs 42 per cent).

#### They continued:

If fine defaulters were kept out of prison the overall rate of recidivism would be reduced from 49 per cent to 42 per cent ... Furthermore, the number of prisoners released each year would fall by 9 per cent. Finally, the cost savings would be considerable. As these are individuals who have committed minor offences and who judges were prepared to leave at liberty in the first place, there is no real threat to public safety. Surely this is a package of benefits that will exercise an irresistible appeal? (p. 138)

The provisions of the Fines (Payment and Recovery) Act, 2014 were commenced in January 2016 and have substantially reduced the number of fine defaulters ending up in prison in Ireland, from 9,883 in 2015 to 455 in 2018.

#### Serious iuvenile offenders

In a study carried out in the Netherlands, Mulder et al. (2010) examined the factors associated with recidivism in a sample of juvenile offenders (age 13 to 19 at commencement of treatment) who had been placed in an institution for compulsory treatment between 1995 and 2004. This was the most severe sanction available for offenders and the sentence could range from two to six years. Those who received this sentence were in the top five per cent of the most serious offenders.

A group of 728 juveniles was followed up post release for between two and eleven years and the number of reconvictions was counted. Overall, 80 per cent recidivated with 63 per cent acquiring a new conviction for an offence of violence and five per cent for a sexual offence. The average number of offences after treatment was seven and the average time to reoffending was 16 months (range: 0 to 97 months). The factors associated with increased recidivism included antisocial behaviour during treatment (e.g., aggression, an uncooperative attitude), family problems (e.g., parental substance abuse, domestic violence), offence history (e.g., high number of prior offences, low age at first conviction), and lack of conscience and empathy.

Although the explanatory power of these variables was low, and Mulder et al. (2010) were at pains to point out that their findings must be viewed as preliminary and indicative rather than final and definitive, they were encouraged by the fact that all of the identified risk factors were dynamic and, as such, amenable to change. In their words: "This is hopeful because it should be easy to identify such problems during treatment and adjust the treatment and also the aftercare/supervision package accordingly" (p. 34).

#### 2.3 Static risk factors

Static risk factors are aspects of offenders' histories that are predictive of recidivism but not amenable to intervention. They are heavily relied upon in actuarial assessments of risk. While some are strongly correlated with future behaviour their immutable nature means that they cannot be used to measure changes in levels of risk over time. Not every factor is mentioned in every article that considers this issue and what follows is primarily concerned with statistically significant differences.

#### Previous offence history

The more extensive an individual's criminal history, the more likely they are to reoffend. Brownlee (1995) found a positive correlation between the number of previous convictions and the likelihood of a subsequent conviction in the UK. Cid (2009) found that criminal record and previous incarceration were significantly associated with risk of recidivism in Spain. Cooke and Michie (1998) found that recidivism rates were much higher for the men in their Scottish sample who had acquired a criminal record as children: "A year after release those with a childhood conviction are

twice as likely to be reconvicted" (p. 182). There was a positive correlation between number of court appearances and convictions, both as children and adults, on recidivism. The more frequently an individual had offended in the past the more likely they were to reoffend.

O'Donnell et al. (2008) were limited in the extent to which they could incorporate criminal record as a variable in their study. But they found clear evidence that a recent prison committal was a strong predictor of a subsequent one. By the end of their four-year follow-up, and after adjusting for other factors, about 60 per cent of those with prison experience in the recent past had been reimprisoned compared to about 36 per cent of those without.

In England and Wales, Bowles and Florackis (2007) found that the greater the number of previous convictions the higher the probability that another would be acquired. They also found that this relationship weakened as age increased. Baumer (1997) identified a positive correlation between number of previous convictions and likelihood of reconviction / reimprisonment in Malta, with each additional prior conviction increasing the likelihood of reconviction by around 23 per cent. In the Netherlands, Beijersbergen et al. (2016) found that prisoners with fewer prior convictions were less likely to be reconvicted. Cooke and Michie (1998) found that recidivism rates were higher for men in Scotland who had served a previous prison sentence.

After a meta-analysis of 57 published studies of the effect of gender on recidivism, Collins (2010) arrived at the conclusion that "... criminal history was the factor that most consistently predicted violent recidivism" (p. 678).

#### Gender

Baumer (1997) found that men were more likely to be reconvicted and reimprisoned in Malta. Helmond et al. (2015) found higher rates for boys in the Netherlands. In a study of 14 to 18-year-old offenders in Spain, Jara et al. (2016) found significantly higher recidivism rates for boys. In Ireland, O'Donnell et al. (2008) found a higher level of recidivism for men released from prison, but the effect was small, with a predicted probability of reimprisonment within 48 months that was about five percentage points higher for men than for women. In Scotland, Cooke and Michie (1998) found that the time to reconviction was shorter for women, but that there was no difference in terms of reimprisonment rates. Bowles and Florackis (2007) found that, in England and Wales, "... the discrepancy between the risk of reconviction for males and females became weaker as the number of previous convictions increased" (p. 365). Cid (2009), in Spain, found no difference by gender.

## 2.4 Dynamic risk factors

Dynamic risk factors are amenable to change following intervention. They are sometimes subdivided into acute and stable. The latter are relatively enduring individual characteristics such

as cognitive distortions, lack of victim empathy and pathways to sexual arousal, while the former can change more rapidly such as substance misuse, employment status or isolation.

#### **Employment**

Cid (2009) found that financial problems (defined as the inability to pay legal fees, compensation or fines) were related to recidivism in a Spanish sample. Cooke and Michie (1998) found that unemployment was related to reconviction and reimprisonment in Scotland. O'Donnell et al. (2008) found a statistically significant relationship between unemployment and reimprisonment. Low levels of educational attainment and poor literacy were also associated with an elevated risk of reimprisonment.

Skardhamar and Telle (2012) carried out a detailed exploration of the relationship between employment and recidivism (defined as police records of crimes that were detected and solved) among released prisoners in Norway. Every resident in Norway has a unique identification number that allows the linking of administrative data from a variety of registers. These registers are generally complete and are a highly reliable and comprehensive resource. In this study, prison records were linked with police records and those relating to education, social welfare, income, and employment status.

Following every prisoner released during 2003 (n=7,476), on a month by month basis until the end of 2006, Skardhamar and Telle (2012) found that there was a gradual increase in employment rates over time and that the risk of recidivism was substantially reduced among those who found employment compared with those who did not (33 per cent vs 71 per cent). Those involved in education or labour market programmes of one kind or another also displayed lower levels of recidivism (41 per cent and 47 per cent respectively). Those in receipt of social welfare benefits had almost as high a level of recidivism as the unemployed (68 per cent vs 71 per cent). Higher levels of educational attainment were associated with lower levels of recidivism.

The authors did not examine qualitative aspects of the job such as its stability, working conditions, type of contract or hours worked, and they recommended that these factors be incorporated into any further research. Nevertheless, their conclusion, and its policy implications, were clear: "... individuals who are motivated to establish a life without crime need an opportunity to make that transition. It is likely that work can provide such an opportunity" (p. 648).

In another study, also in Norway, that focused specifically on a sample of recidivist males (n=783) who became unemployed in the period 2001 to 2006, Skardhamar and Savolainen (2014) found that the timing of the transition to employment was crucial: "... the results showed that most offenders had desisted prior to the employment transition and that becoming employed was not associated with further reductions in criminal behaviour" (p. 263). It was very rare for offenders to

move into employment during an active phase of their criminal career. In other words, the transition to employment was a consequence of desistance rather than a cause of it. For this sample at least, it would not be correct to state that that recidivism rates fell because of the protective factors offered by employment. There is a danger here of confusing correlation with causation.

The message seems to be that employment opportunities are grasped by those who have decided to turn away from crime. This does not lessen the importance of ensuring that such opportunities are on offer, but it means that we must not think that finding jobs for offenders will automatically trigger a cessation in criminal activity. For those ready to change the right incentives need to be readily available.

Ramakers et al. (2017) moved away from a focus on whether employment per se reduced recidivism risk. In a study involving 714 Dutch ex-prisoners they examined how the type of job found impacted on recidivism (defined as new charges registered with the Prosecutor's Office) in the first six months after release. Several measures were used, including whether the individual was an employee or self-employed, whether they regained their former job, the commitment required in terms of hours worked, duration of employment, and occupational level. Overall, new charges were registered against one in three of the sample and were more likely for those who were unemployed than not (37 per cent vs 26 per cent). However, using propensity score matching – a statistical technique that draws on relevant background information to estimate the probability that an individual will be in one condition rather than another – the authors concluded that when pre-existing differences were taken into account the relationship between employment and recidivism risk disappeared. As they put it: "A key finding was that the mere presence or absence of a job did not reduce ex-prisoners' recidivism risks after confounding factors were controlled for" (p 1811).

When the focus was narrowed to those who had found a job it became evident that the type of employment was an important consideration. Those who remained in the same job for the full sixmonth follow-up period, or were working at a higher occupational level, were less likely to recidivate. In other words, it is not just any job that reduces the likelihood of recidivism, but a job with certain characteristics. Ramakers et al. (2017) acknowledged the practical difficulties associated with directing ex-prisoners towards stable and well-paid jobs given their often low levels of education and training, to say nothing of the likely societal response if better jobs were reserved for those who had come into conflict with the law.

#### Marriage

Beijersbergen et al. (2016) found that prisoners with a partner in the Netherlands were less likely to be reconvicted. Skardhamar and Telle (2012) found that recidivism rates in Norway were lowest among married and cohabiting couples who had children together. In her review, Collins (2010)

found a strong negative relationship between marriage and recidivism, at least for men; recidivists were less likely to be married. However, Cooke and Michie (1998), in Scotland, found that marital status was not related to the likelihood of reconviction or reimprisonment.

#### Substance misuse

Cid (2009) found that drug abuse was significantly associated with risk of recidivism in Spain. Cooke and Michie (1998) found that drug abuse was related to reconviction in Scotland, but that problematic alcohol use was not. The same applied to subsequent imprisonment. Collins (2010) found that drug and alcohol use were strongly correlated with violent recidivism.

#### Age

Generally speaking, there is an inverse relationship between age and the probability of recidivism: as the former rises the latter falls. (The exception is during adolescence where they rise in tandem.) O'Donnell et al. (2008) found that reimprisonment rates within 48 months of release were half as high again for offenders under 21 compared with those aged 30 and older (i.e., 60 per cent vs 40 per cent). In a study of all prisoner releases in Norway during a single year, Skardhamar and Telle (2012) found that recidivism rates were highest for the youngest individuals. Baumer (1997) discovered that young prisoners in Malta were more likely to be reconvicted and reimprisoned with each additional year of age reducing the likelihood of reconviction by around five per cent. In the Netherlands, Beijersbergen et al. (2016) found that older prisoners were less likely to be reconvicted. In Scotland, Cooke and Michie (1998) found that those who were aged over 30 when released were half as likely to be reconvicted within two years as their younger counterparts (40 per cent vs 80 per cent). By contrast, Cid (2009) found that age was not related to recidivism in Spain when he compared those aged over or under 29.5 years.

(Age can also be a static risk factor. In Scotland, Cooke and Michie (1998) found that the younger the person was at first conviction, the greater the likelihood of a subsequent conviction. The same applied to subsequent imprisonment.)

#### Place of residence

O'Donnell et al. (2008) found that recidivism rates were significantly lower among those with a Dublin address (city or county) compared to those with addresses anywhere else in Ireland: "By the end of the 48-month follow-up period, those from the Dublin area exhibited reimprisonment rates that were about 8 percentage points lower than those from elsewhere. Although not substantial in absolute terms, this is a statistically significant difference and it is intriguing that it emerges even after accounting for differences across geographic areas in the composition of persons released from prison, the types of offences for which they served time and the length of their confinement" (p. 137). This was attributed to better access to employment opportunities and drug treatment in the capital as well as proximity to family and community supports.

#### 2.5 Fairness

Beijersbergen et al. (2016) found that the way someone feels they have been treated can influence their future behaviour: "Although the effect was small, prisoners who felt treated in a procedurally just manner during imprisonment were less likely to be reconvicted in the 18 months after release. No evidence was found for a mediating role of legitimacy" (p. 63). Fairness and decency are important, and it is within the power of those who work within the criminal justice system to provide (and enhance) them.

If prisoners feel that the rules are clear and that they are applied consistently and without bias, that they are treated with dignity and respect and their views are heard, they are more likely to comply with the law. A procedurally fair system demonstrates to those subjected to it that they are of value, no matter what they may have done. Procedural unfairness communicates disrespect and disregard and leads to further alienation, resistance and noncompliance. As Beijersbergen et al. (2016) put it: "In probability terms, keeping all the prisoners' background characteristics at the average, a prisoner who, for example, evaluates his treatment in the correctional facility as procedurally just ... is 5.3 per cent less likely to get reconvicted after his release than a prisoner with a neutral procedural justice judgment" (p. 74).

### 2.6 Meta-analysis

Eisenberg et al. (2019) conducted a meta-analysis of 27 studies of recidivism in a unique population of 116,982 adult offenders who were under community supervision or receiving treatment in a non-custodial setting. Recidivism was defined as "... a new arrest, reconviction, or violation of judicial conditions" (p. 736). This research team identified sixteen broad risk domains which are summarised in Table 2.4.

Table 2.4
Static and dynamic risk factors

| Biok Domoin                           | Chatia           | Every place of included wick factors                                                                                                                                       |
|---------------------------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Risk Domain                           | Static<br>and/or | Examples of included risk factors                                                                                                                                          |
|                                       | Dynamic          |                                                                                                                                                                            |
| 1. Criminal History                   | Static           | Criminality in adulthood, early antisocial behaviour, escape from                                                                                                          |
| 1. Orininal History                   | Otatio           | prison/clinic, having spent time in prison, history of property offenses/sex                                                                                               |
|                                       |                  | offenses/violent behaviour, previous violations of judicial conditions,                                                                                                    |
|                                       |                  | adjustment problems in prison/clinic, previous convictions/offenses                                                                                                        |
| 2. Antisocial Pattern                 | Static           | Antisocial pattern of behaviour                                                                                                                                            |
|                                       | Dynamic          | Current general acceptance of criminal behaviour                                                                                                                           |
| 3. Antisocial Attitude                | Dynamic          | Procriminal attitude/orientation, lack of concern for others, antisocial scale score, abusive attitude                                                                     |
| 4. Criminal Friends                   | Dynamic          | Social influences towards criminal behaviour, (general social)                                                                                                             |
| E Cubatanaa Abusa                     | Static           | rejection/loneliness, antisocial companions, criminal friends, abusive friends                                                                                             |
| 5. Substance Abuse                    |                  | History of alcohol/drug problems, (severe) drug abuse                                                                                                                      |
|                                       | Dynamic          | Current alcohol/drug problems, (severe) drug abuse                                                                                                                         |
| 6. Education/Employment               | Static           | History of dysfunctional behaviour during education and/or work                                                                                                            |
|                                       | Dynamic          | Current dysfunctional behaviour during education and/or work                                                                                                               |
| 7. Family/Partner                     | Static           | History of:                                                                                                                                                                |
|                                       | Dynamic          | Marital or relational problems, lack of (family) support, marital dissatisfaction, family problems, relational instability, non-supporting partner, lack of social support |
| 8. Personal/Psychological<br>Problems | Static           | History of:                                                                                                                                                                |
|                                       | Dynamic          | Personal problems, subjective well-being, (un)fulfilment, stress,                                                                                                          |
|                                       |                  | anxiety/depression symptoms, psychosis, social/mental health, emotional                                                                                                    |
|                                       |                  | instability, emotional regulation, mental health problems, personality type:                                                                                               |
| 9. Living Situation                   | Static           | aggressive/dependant/neurotic Immigration and History of:                                                                                                                  |
|                                       | Dynamic          | Subjective well-being, living environment, accommodation, residence,                                                                                                       |
|                                       | Dynamic          | effects of neighbourhood: disadvantaged neighbourhood/stability of residence                                                                                               |
| 10. Treatment                         | Static           | Negative attitude toward treatment (in the past)                                                                                                                           |
|                                       | Dynamic          | Non-cooperation with treatment                                                                                                                                             |
| 11. Financial Problems                | Dynamic          | Subjective well-being concerning finances, financial difficulties, income >US\$10,000                                                                                      |
| 12. Leisure                           | Dynamic          | Lack of prosocial leisure/recreation, subjective well-being, leisure, and lack of social participation                                                                     |
| 13. Age at risk                       | Static           | Age at risk of recidivism                                                                                                                                                  |
| 14. Gender                            | Static           | Being male                                                                                                                                                                 |
| 15. Race/Ethnicity                    | Static           | Belonging to the ethnic/racial majority                                                                                                                                    |
| 16. Self-esteem                       | Dynamic          | Lack of self-esteem, self-confidence, self-efficacy or belief in ability to reach life goals                                                                               |

<sup>\*</sup>Subjective well-being refers to an instrument to measure subjective well-being reported by the offender over several domains used in the study to predict recidivism

Source: Eisenberg et al. (2019: 739)

These risk domains were positively associated with general recidivism with the strongest correlations being found for criminal history and an anti-social pattern of behaviour (both static factors). Narrowing the focus to violent recidivism, and to 11 of the 16 risk domains, Eisenberg et al. (2019) found that, with the exception of financial problems, all correlated significantly, with the strongest effects again being found for criminal history and an anti-social pattern of behaviour. There was one further refinement to the analysis: "However, when risk domains included both static and dynamic risk factors, the dynamic risk factors were more strongly predictive of general and violent recidivism compared with the static risk factors. This was found for substance abuse, education/employment, family/partner, and personal/psychological problems" (p. 744). These risk factors were not significantly moderated by gender, race/ethnicity, or type of recidivism (i.e., rearrest or reconviction).

# 3. INTERVENTIONS

The papers under review offer a diversity of perspectives on the relationship between the choice of sanction and the risk of recidivism as well as on the impact of a variety of treatment programmes delivered in custodial and community settings. These issues are considered next.

# 3.1 Sentencing

In a Spanish study, Cid (2009) compared offenders who were sentenced to immediate imprisonment with a comparison group who received suspended prison sentences. He hypothesised that if imprisonment had a specific deterrent effect it would reduce future offending as those who had experienced it would not wish to do so again; when contemplating crime the costs would be seen to outweigh any benefits (according to the principles of rational choice theory). By contrast, he suggested that, according to the tenets of labelling theory, imprisonment would increase recidivism to a greater degree than a non-custodial sanction. There are two elements to the purported criminogenic effect. First, that some prisoners may internalise the criminal label with predictably adverse implications for their behaviour. Secondly, the adverse implications of a prison record for building community ties and finding employment. A third possibility, not explored by Cid, is that imprisonment leads to recidivism because it fractures supportive social networks (or, indeed, makes individuals vulnerable to police targeting). Also, it may be that for individuals with long criminal records the marginal effects of deterrence, stigma, and labelling have dwindled to the point of insignificance.

Recidivism was defined as imprisonment (whether on remand or under sentence) and, controlling for known risk factors such as previous criminal record, Cid (2009) found that the rate was lower for the group who had received suspended sentences. He concluded: "The findings of this research provide empirical support for labelling theory: my findings suggest that prison sanctions do not reduce recidivism more effectively than suspended sentences. On the contrary, the risk of recidivism increases when the offender is imprisoned" (p. 471).

Killias et al. (2010) compared community service with a short term of imprisonment (up to 14 days) in Switzerland. Brief periods in custody are said to be harmful because they are too short to allow for therapeutic interventions or a meaningful incapacitative effect while disrupting employment, family and community ties and exposing offenders to criminal peers. For these reasons, community service has been widely introduced as an alternative sanction.

Most research in the area has been quasi-experimental (i.e., the independent variable is manipulated but without randomisation) and has tended to show lower rates of reoffending after

community service. But this research is systematically biased in that the worst offenders are prone to be sent to prison while those for whom the outlook is more favourable, and the risk lower, receive community service. Evaluators have attempted to control for these factors by taking account of age, previous record, nature of offence and so forth, but not every relevant variable is amenable to statistical adjustment (e.g., there are substantial difficulties associated with taking matters such as domestic environment, peer group, alcohol misuse and financial difficulties into consideration). The only way to overcome systematic bias is via a true experiment and Killias et al. (2010) is a rare example of a study that has been designed to isolate the effect of the sanction through random allocation to either imprisonment or community service. This means that its results must be taken seriously.

The authors noted that their experiment was legally unproblematic in that those sentenced to community service as an alternative to prison must consent to same and, in the event that they do not, the default sanction (imprisonment) is imposed; indeed, a small number (five in total) opted to go to prison instead of accepting community service. Nonetheless, the experiment faced "formidable" resistance from social workers, criminal justice administrators and some sections of the media, only going ahead because of the steadfast support of the local director of correctional services, who was committed to evidence-based policy making, and what the authors describe as "a courageous Minister of Justice" (p. 119).

The follow-up period extended to 11 years. By the end of year five there were no differences between the groups in terms of reconviction rates. The same applied at the end of year eleven when 58 per cent of those in the custody group had acquired a new conviction compared with 53 per cent in the community service group, a small but not statistically significant difference. Nor were there differences in terms of the number of new convictions or their seriousness.

By the end of the follow-up period the ex-prisoners (n=38) were better off financially, more tax compliant and no different from those who had been sentenced to community service (n=80) in terms of employment or marital status. Killias et al. (2010) concluded that: "The results suggest that community service does not reduce the odds of later reoffending or improve social integration when compared to imprisonment" (p. 126). This does not show that short bursts of custody are more effective than community service in terms of reducing reoffending, but nor does it show that they are inherently more harmful. A brief period of imprisonment did not have the anticipated adverse impact on social integration afterwards.

Killias et al. (2010) concluded that "... legislators should no longer suppress short prison sentences arguing that they are harmful and pay more attention to aspects beyond special deterrence and rehabilitation" (p. 128). These aspects include proportionality, cost, ease of administration, and

prison population inflation. This was a useful study in that it highlighted – for minor offenders in Switzerland, at least – some of the concerns about short-prison sentences may be off target.

It must be noted, however, that the weak effects may be related to the brief duration of imprisonment and the fact that most of those who were sentenced to custody were eligible to reside at a half-way house from which they could travel to and from work and they spent their recreational time and weekends away from other prisoners. More severe, or longer, custodial periods may have a more obviously detrimental effect. Also, the sample size was small (n=118) and the findings need to be replicated in other countries.<sup>10</sup>

Klement (2015) studied offenders in Denmark who had been assessed as suitable for community service by the Danish Prison and Probation Service, and who had been sentenced either to prison or community service. This study, like that of Killias et al. (2010), was published in the *Journal of Experimental Criminology*. Although not a true experiment, and as a result vulnerable to the possibility of selection bias, it addressed a number of the concerns highlighted by Killias et al. (2010). The sample was larger (n=1,602), the variety of offences committed was greater (traffic offenders were excluded on the basis that they seldom received prison terms), and participants were matched on a wide range of background variables (including age at first offence, number of previous convictions, crime type, gender, level of educational attainment, employment status, housing situation, address, marital and family situation, history of alcohol and drug abuse).

Community service in Denmark is imposed in conjunction with a suspended prison sentence, generally in cases that would otherwise result in a custodial term of a year or less. The eligibility assessment focuses primarily on the offender's suitability for CS and their personal and social circumstances rather than on the crime committed or the likely sentence. The follow-up periods were one and three years from release from prison or from the date when community service was imposed. Klement (2015) concluded that "... reconviction is significantly lower among offenders sentenced to CS as opposed to those sentenced to imprisonment" (p. 250). In addition to its crime reductive effect it was less intrusive and less expensive. The positive effects of community service, in other words, outweighed the specific deterrent effective of imprisonment. Klement acknowledged that there may be general deterrent or retributive arguments in favour of custody that were not amenable to investigation in his study.

Wermink et al. (2010) compared recidivism after community service with that after short-term imprisonment in the Netherlands. The focus was on all offenders aged 18 to 50 so sentenced in

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<sup>&</sup>lt;sup>10</sup> Klement (2015) observed that community service in Switzerland generally involved eight hours of work per day thereby making it incompatible with continued employment. He argued that, under such conditions, residence at a half-way house where employment was not disrupted and the regime was relatively relaxed, may be more reintegrative than community service.

1997, who had not previously been sentenced to imprisonment or community service. The exclusion of those who had received a similar sanction in the past was "... to prevent interference from feed-back effects" (p. 411) meaning that the prior sanction may influence the choice of the current sanction as well as post-sanction recidivism. This is an important, and rarely made, adjustment. If those sentenced to community service had committed less serious offences or had less extensive criminal records then these variables, rather than the impact of the sanction per se, might explain any observed difference.

To account for possible bias due to selection of offenders into these types of sanctions Wermink et al. (2010) controlled for a large set of potentially confounding variables, including sex, age, nationality, nature and severity of offence, and criminal career since age 12. The first stage was to match on age category, offence, and sentence length. The second was to calculate propensity scores (i.e., the probability for each individual of being sentenced to community service), thereby taking into account variables known to favour one or other of the sanctioning outcomes (e.g., that women, younger offenders and those born in the Netherlands are more likely to be given community service). Offenders were matched, one by one, on propensity score.

Propensity score analyses attempt to approximate the conditions of a randomised experiment and this sophisticated matching process made the groups as comparable as possible for a quasi-experimental design, resulting in a final sample of 2,116 individuals who had received community service (the experimental group) and were carefully matched with 2,116 who had been given a prison term of less than six months (the control group). The authors concluded that:

After applying the matching strategies, no statistically significant differences between the experimental and control group remain. This implies that we can be confident that differences in post-sentence convictions do not reflect already existing differences in the observed variables between the experimental and control group. (p. 343)

Deterrence theory predicts that recidivism rates will be higher after community service than after a prison term. On the other hand, learning theory (e.g., exposure to positive role models) anticipates the opposite effect. Imprisonment is more likely to fracture social bonds thereby weakening commitment to conventional society, and is more stigmatising than community service as it affixes a criminal label that is more difficult to remove; these factors would suggest higher recidivism rates after imprisonment than community service. In other words, criminological theories generate conflicting hypotheses and empirical research is required to tease out the relationship between recidivism and type of sanction.

Utilising a follow-up period of five years, Wermink et al. (2010) found significantly lower rates of recidivism (measured by average annual number of convictions) for those sentenced to community

service for the first time as opposed to those who received their first short prison term. "In relative terms", they concluded, "community service leads to a reduction in recidivism of 46.8 per cent compared to recidivism after imprisonment" (p. 343). This effect was strongly evident in the short-term (one year) and in the long term (eight years), for all offences and for violent and property offences separately.

As the authors acknowledged, there was always a chance that the effects resulted from unobserved variables including life circumstances such as marital or employment status (or, indeed, mental health issues or drug and alcohol misuse) that had not been included in the model. It is impossible to guard against every possibility that hidden bias will influence results. Wermink et al. (2010) applied a test to explore the robustness of their results against hidden bias – the Rosenbaum bounds method – and concluded that it was not a significant concern.

Returning to the question of theory, Wermink et al. (2010) observed that: "With the required prudence, we can conclude from our results that deterrence does not play a dominant role in the total of effects of community service and imprisonment on recidivism" (p. 347). This was an important study given the size and representativeness of the sample, the care taken to match cases, and the test for hidden bias that was applied. It showed that, all things considered, for those receiving their first sanction (other than a fine), community service was more effective than imprisonment in terms of reducing recidivism. While the same may not apply to those with extensive histories of punishment, the policy and sentencing implications are very clear for the group in question: if prison or community service is being considered for the first time, the evidence strongly suggests that the latter will have the greatest impact in terms of future community safety.

In a later study, Wermink et al. (2018) looked at the relationship between sentence length and recidivism with a view to identifying the existence of a specific deterrent effect (i.e., did longer sentences reduce the likelihood of future offending?). They collected data on three measures of recidivism – new charges, reconviction and reimprisonment – over six months in a national study of 1,467 male Dutch prisoners. The time spent in custody was typically short, with only 20 per cent serving more than six months. In a sophisticated study using a propensity score methodology to minimise selection bias, these researchers found no relationship between the length of imprisonment (up to 15 months, with an average of 4.1 months) and any of the three outcome measures:

In short, our results show no evidence for a relationship between time served and each recidivism outcome, and therefore seem to suggest that, based on the first high-risk months after release, there are no crime-control benefits in terms of recidivism of imprisoning individuals for a longer period. (p. 1077)

Wermink et al. (2018) argued that the policy implications of their findings were clear, namely that if longer prison terms do not reduce recidivism levels, a more emphatic shift of focus to community sanctions and measures might pay dividends. They closed their paper with the comment that: "These research findings make it necessary to reexamine the role of imprisonment in contemporary justice policy" (p. 1083).

Also in the Netherlands, Aarten et al. (2014) compared the relative efficacy of short prison terms (up to six months) and fully suspended sentences in terms of their impact on recidivism. These authors commented on the major methodological limitation of other studies (including, they argue, Cid (2009) who examined same issue), namely that:

Differences found in recidivism rates cannot simply be attributed to the type of sanction, since selection processes may take place when offenders are sentenced to suspended sentences or imprisonment. Moreover, although the studies included comparison groups, these were not matched on key variables that predict the imposition of the sanction. (p. 703)

To overcome this issue the authors used propensity score matching to take account of age, race, gender, criminal history, nature and seriousness of offence, age of first contact with criminal justice system, place of conviction, and sentence length. Their sample consisted of 2,115 adults convicted in 2006 in courts in Amsterdam and The Hague, one quarter of whom received a fully suspended sentence without an accompanying sentence of any other kind and three quarters of whom were sentenced to immediate custody. Recidivism was defined as a new conviction by a public prosecutor or judge. Minor offences (mostly traffic matters) were excluded. The follow-up period was between 4.5 and 5.5 years. Aarten et al. (2014) were interested in three sets of comparisons:

- 1. Suspended prison sentences vs short-term imprisonment in general.
- 2. First offenders given suspended prison sentences vs first offenders sentenced to short-term imprisonment.
- 3. Recidivists given suspended prison sentences vs recidivists sentenced to short-term imprisonment.

Once matched, no significant differences were found in the overall risk of reconviction between the two sentences. The authors accepted that this finding was somewhat surprising when considered in light of criminological theory regarding deterrence, labelling and social control and suggested that it might be explained by variables not taken into account in the matching process such as employment status and drug misuse. However, when the sample was disaggregated by criminal history it was found that first offenders given fully suspended prison sentences had a higher risk of being reconvicted than first offenders sentenced to short-term imprisonment. This finding seems

to support the deterrence hypothesis (i.e., imprisonment was unpleasant and the desire not to experience it again suppressed future criminality). The opposite was the case for recidivists; a finding that seems to support the social control hypothesis (i.e., remaining within the community meant that social bonds were not fractured).

While stronger than previous studies on account of the care taken to match the groups being compared, Aarten et al. (2014) acknowledged several limitations including the possible relevance of non-legal variables not included in the model because they were not recorded on the files (e.g., employment and drug use); the fact that they were limited to official data on convictions (thereby missing out on unrecorded or unpunished criminality); their inability to allocate offenders randomly; the reality that not all of the offenders in the sample could be successfully matched ("This unmatched group was older, more likely to be female, native, convicted of a violent offence and a first offender compared with their matched counterparts" (p. 720)); and the difficulties generalising from a sample drawn from two cities to the Netherlands as a whole or to other countries with different criminal justice arrangements and sentencing frameworks.

These criticisms are not exclusive to this study by any means. Even the most carefully designed research will be imperfect in terms of explanatory power and representativeness. There was one design issue specific to this study however that may have compromised the findings. This was the decision not to separate out suspended sentences that were imposed with special conditions (about one in four of the total) from those where imprisonment was simply held in abeyance with the offender expected to be of good behaviour. Conditions may include therapy, prohibition on drug misuse, behavioural skills training and probation supervision. In future research it will be necessary to tease out the impact of such additional measures on the likelihood of further offending.

In a Danish study, Andersen (2014) explored the impact of community service versus a short prison term (less than one year) on recidivism. His focus was on men who had committed violent crimes, drink driving and other motoring offences, and minor offences such as vandalism and shoplifting. He excluded anyone who had received both sanctions during the study period (1999 to 2001) as they would have been members of both the treatment and the control groups. The final sample was 6,042 (4,279 of whom had been sentenced to prison and 1,763 to community service). The follow-up was for two, three and four years, and recidivism was equated with a new conviction for anything except a road traffic offence. Those who had been sentenced to community service were reconvicted at a lower rate than the ex-prisoners. However, when the analysis was rerun controlling for nature of offence, previous convictions, age, marital status and education – variables on which those given community service tend to score more favourably – these overall differences dissipated to the point of insignificance.

Using a sample of 5,500 male offenders aged 18 to 50 drawn from 10 regions of England and Wales, Jolliffe and Hedderman (2015) compared those who had been incarcerated and were under post-release supervision with those who had received community orders that involved supervision. They found that within 12 months of leaving prison or beginning their community order, 39.2 per cent had reoffended (i.e., been reconvicted, absconded or breached bail conditions). Those who had been imprisoned offended more often, sooner, and more frequently and were more likely to receive a prison sentence. However, we know that those who are sentenced to custody differ on a range of demographic and criminal history characteristics from those who are given community punishments and that this makes it more likely that they will reoffend. Consequently, the naïve comparison of overall recidivism rates based on unadjusted results tells us little about the actual impact of custody.

Because many of the factors that predict sentencing decisions also predict reoffending, Jolliffe and Hedderman (2015) used propensity score matching to balance pre-existing differences between the groups. They identified 1,162 pairs that could be matched on age, ethnic group, criminal record, and prior custodial experience. The matching process was successful at minimising the substantial pre-existing differences between those who had been released from custody and those who had received a community sanction. This quasi-experimental approach allowed them to assess the relative impact of imprisonment having made the groups similar on a range of relevant variables. The results were clear. Of the 1,162 who had been imprisoned, 51 per cent had reoffended, compared to 44 per cent of the community sanction group. They committed significantly more offences and were reconvicted more swiftly. They were more likely to abscond or breach bail conditions. Two thirds of them were incarcerated within 12 months for a subsequent offence compared with one third of the community sanction group.

This was a well-executed study that found a robust pattern of results. However, like all research of this nature it is limited by the fact that matching can only be carried out on measured covariates and that potentially important factors such as drug use, family and community relationships, employment and so forth cannot be controlled. To take account of the possible impact of hidden bias, the authors used Rosenbaum's bounds method and reported a satisfactory outcome in line with that of Wermink et al. (2010). This is probably as much as can reasonably be expected of a quasi-experimental study and gives us confidence in the results.

Jolliffe and Hedderman (2015) concluded that prison did not achieve its objective of preventing further offending. Indeed, as they saw it: "The results of this research add to the growing evidence base, which suggests that the experience of prison can be criminogenic" (p. 1072). They spelled out one clear policy implication: "It is to be hoped that the consistency of the small but growing body of research, which clearly demonstrates that prison increases rather than decreases reoffending in like-for-like cases, may provide the evidence base to demonstrate that calling for

less prison cannot always be equated with being soft on crime and failing to care about victims" (p. 1072). The research could not tease out why prison had these adverse effects, but it is likely due to a combination of stigma, family and community dislocation, and structural impediments to finding secure employment and housing.

Deterrence theory is based upon the severity, certainty and celerity (swiftness; time between offence and sanction) of punishment. Andersen (2019) examined the third of these factors in the context of a policy reform in Denmark in 1994 that speeded up the processing of first-time common assault offenders. It specified that no more than 30 days should elapse between charge date and court proceedings, that the court proceedings should not exceed seven days, and that no more than 30 days should pass from when the sentenced offender received the call for imprisonment to their admission. (There was no time limit placed on the period between a sentence being imposed and the offender being summoned to prison, so the total duration of the process remained somewhat variable even after the reform.)

Andersen (2019) took advantage of the natural experiment that this policy change created by comparing a group processed under the old, slower, regime with a group dealt with more speedily. He studied all 15 to 19 year-old men charged with common assault and sentenced to imprisonment for the first time in the two years before (n= 256; control group) and after (n=265; treatment group) the reform. They were followed up through the records for 60 months and new charges were counted (excluding minor offences). The control group waited, on average, 13 months between charge and imprisonment, compared with seven months for the treatment group.

While the reform had the desired effect in terms of speeding up the criminal process it also led to more criminal recidivism, both regarding the probability of acquiring new charges and the average number of new charges. It would seem, then, that celerity is not of great significance when it comes to understanding deterrence. Andersen (2019) conceded that the policy implications of his study were unclear and that they may no longer be relevant given the changes to criminal justice in Denmark in the quarter century between the natural experiment he studied and the publication of his findings (e.g., some of those sentenced to imprisonment in the 1990s may today be given community service or subjected to home detention with electronic monitoring).

Turning their attention to crimes of serious violence, Baay et al. (2012) examined the impact of duration of imprisonment on recidivism among homicide offenders (n=621) convicted in the Netherlands between 1996 and 2004 and released before June 2008. The time served varied widely, from less than two years to more than eight years. They hypothesised that longer prison sentences would lead to an increase in recidivism because they weakened bonds with conventional society (social control theory) and increased exposure to criminal peers (prisons as 'universities of crime'; social learning theory).

Furthermore, they hypothesised that prisoners of Western origin and those with an intimate partner (and family) would be more likely to reoffend because they had stronger and closer ties and higher levels of labour market participation than single ex-prisoners from minority ethnic groups who were likely to experience social and economic marginalisation. The fact of their imprisonment led to a greater rupture in social bonds for the Dutch nationals, or Western immigrants, with partners than for those who were less securely integrated in the first place. Finally, they hypothesised that those with longer prior records would be less adversely affected by longer prison sentences as they already possessed pro-criminal attitudes and had learned whatever there was to learn from other prisoners.

Recidivism was defined as a reconviction for any violent (including homicide, assault, threats, sexual offences, extortion and robbery) or non-violent offence. The authors measured speed to recidivism (in months after release before new offence committed) and frequency of recidivism (number of offences, controlling for number of years at risk). The general recidivism rate was 51 per cent (36 per cent nonviolent and 16 per cent violent). Baay et al. (2012) found partial support for their hypotheses in that longer imprisonment systematically increased the frequency, but not the speed, of recidivism. For those with an intimate partner at the time of their conviction, length of imprisonment increased nonviolent recidivism frequency only. For Western offenders, length of imprisonment increased both speed and frequency of recidivism. The longer an individual's detention history the less imprisonment length increased recidivism frequency. The overall conclusion was that "... according to our study, length of imprisonment does not generally increase or decrease recidivism" (p. 274).

# 3.2 Early release

Ellis and Marshall (2000) defined parole as any system of discretionary early release that involved probation supervision in the community and the possibility of recall to prison in the event of non-compliance with the conditions of release. They studied the effects of parole on 9,168 determinate-sentence prisoners released in England and Wales during 1991. The sample was followed up for two years and any reconvictions during this period were noted.

There are two possible explanations of why prisoners released on parole may reoffend less frequently. The first is because the Parole Board has successfully identified the low risk cases. The second is that the act of placing trust in prisoners and holding them to their word leads to an improvement in behaviour. It is difficult to disentangle what might be called the 'selection effect' from the 'parole effect'. To overcome this difficulty Ellis and Marshall (2000) calculated predicted reconviction rates – based on factors such as number of previous convictions, age at first conviction and current offence type – for three groups: all released prisoners, and the subsets of

violent and sexual offenders. The predicted rates were compared with the actual rates for each group. This allowed them to isolate the 'parole effect'.

They found "... a small but consistent difference" (p. 306) in favour of parole across each of the three groups with smaller proportions of parolees reconvicted than would be expected based on their criminal history. The overall difference was 1.8 per cent (42.2 per cent vs 40.4 per cent), but the effect of parole was greatest for the more serious offenders. Reconvictions for violent offences were 12 per cent lower than predicted for those with a previous conviction for violence (14.2 per cent vs 16.2 per cent) and the (already low) rate for sex offenders was more than a third beneath the predicted level (two per cent vs 3.2 per cent).

In another analysis, prisoners who were granted parole were compared with those who were not and again the pattern of results was clear: a significantly lower reconviction rate for those in the former group regardless of whether the focus was on the aggregate picture or on sexual or violent offenders specifically (p. 311). They also found that prisoners on parole who were reconvicted within two years were reconvicted on significantly fewer occasions than prisoners released at the end of their sentences.

Finally, Ellis and Marshall (2000) examined time to reconviction and, once again, found that parole exercised a positive effect, significantly delaying the onset of reoffending. This effect was large and could not be wholly explained by probation supervision or the possibility that offenders on parole committed more serious offences that were dealt with in the Crown Court rather than the Magistrates' Court and that, as a result, took longer to proceed to a conviction.

While the follow-up period was relatively short, cumulatively, the findings were encouraging and the authors concluded that their results "... seem very positive indeed ... it is clear that parole has a positive effect in reducing reoffending" (p. 314). The study is somewhat dated and deals with a legislative environment very different to Ireland's, but it suggests that the early release of determinate sentence prisoners has an important role to play in crime prevention. The next step is to identify what underlies this reductive effect. Is it probation supervision? Or the threat of recall to prison? Or the repayment of trust with improved behaviour?

Hancock and Raeside (2009) followed up more than 200 male prisoners who had served at least four years and were released from two facilities in Scotland between 2002 and 2005. They were interested in the relationship between sentence management and future behaviour. They found that recidivism (defined as reimprisonment) was positively related to the level of social deprivation into which prisoners were released. Other predictors included (high) number of previous convictions, (low) age at first offence, (low) employability, and (high) numbers of positive drugs tests and governors' reports.

Psychometric and behavioural test results did not predict reoffending. Indeed, prisoners who were not identified as requiring attention for addictions were more likely to recidivate. This was a surprising finding given the emphasis on such testing in the sentence management process. The authors felt that this might be explained by "... the self-reporting of these particular data, as the prisoners might try to manipulate the results" (p. 106). Survival analysis – a statistical method of controlling for variable follow-up intervals – revealed that reduced reimprisonment rates were associated with release from an open prison environment, but this effect was short-term and disappeared after a year in the community: "... up to 12 months from release, prisoners from open prisons are less likely to reoffend; thereafter, prisoners released from either open or closed prisons are equally likely to reoffend" (p. 113).

# 3.3 In-prison treatment

Many interventions adopt a deficits-based approach, choosing to focus on the augmentation of human and social capital through assistance with employment, housing and substance misuse. Others are strengths-based, empowering offenders to redirect their lives by bolstering community ties, often in the context of a supportive supervisory relationship with a probation officer.

In recent years, the central focus in offender treatment has been the risk—need—responsivity model (RNR). The *risk* principle stipulates that intensive treatment should be reserved for high-risk offenders and that there should be a positive correlation between risk and 'dosage'. The *need* principle focuses on the targeting of dynamic (i.e., changeable) risk factors (also known as criminogenic needs). The *responsivity* principle addresses the alignment of interventions to the motivation, learning style, abilities, limitations, gender and cultural background of programme participants, and the importance of finding an appropriate match between those who are delivering and receiving the treatment.

Helmond et al. (2015) examined the impact of a cognitive behavioural programme, EQUIP, on recidivism among a sample of young people incarcerated in the Netherlands. The programme was designed to promote responsible thinking and acting by transforming a negative peer culture in to a positive one. This was done through working with cognitive distortions, social skills deficiencies and delayed moral development. There was a mixture of mutual help meetings where the young people worked together, under the guidance of a trainer, to identify thinking errors, and 'equipment' meetings. The latter involved anger management, social skills training, and decision making. Three mutual help meetings and two equipment meetings took place each week, each lasting one to one-and-a-half hours. The curriculum can be completed in ten weeks.

A quasi-experimental design was used with those taking part in the programme (n=110) compared with a control group (n=23) recruited from units in the same prisons where the EQUIP programme

had not yet been introduced. Three quarters of the participants were boys and the average age was 15.7 years. Recidivism (defined as a subsequent 'valid disposal' i.e., matter dealt with by public prosecutor by means of a discretionary dismissal or a finding of guilt by a judge) was measured at six, twelve and eighteen months.

The authors discovered that: "No differences were found between the experimental and control group in the prevalence, frequency, and seriousness of recidivism" (p. 330). When they looked at programme integrity they found that this was low to moderate and that "... higher levels of program integrity, within the low-to-moderate range, did not strengthen the impact of the program on recidivism" (p. 341). This did not lead them to dismiss the potential efficacy of the programme on the basis that high levels of integrity are essential if valid conclusions are to be drawn and without them it was not possible to be conclusive. Integrity comprises content, duration, frequency and scope.

Brugman and Bink (2011) studied the effects of EQUIP on recidivism in a sample of 12 to 21-year-olds recruited from four high-security juvenile correctional facilities in the Netherlands. The programme was designed to combine "... a peer-helping approach with cognitive behavior therapy and aims to reduce recidivism by decreasing delinquents' self-serving cognitive distortions, improving their social skills and stimulating their moral development" (p. 345). It was delivered over 30 meetings in a small group context (six to eight participants) with lesson plans for each session. Meetings took place three times a week for three months and learning was reinforced in occasional mutual help groups. EQUIP was offered in one of the institutions (n=49) with the other three serving as controls (n=28).

The experimental group showed a greater reduction in cognitive distortions (egocentric bias, minimising/mislabelling and blaming others) than the control group. No differences were found in prevalence, speed or seriousness of reoffending between the groups although members of the experimental group accumulated fewer offences overall, controlling for the length of the observation period after release. This is an example of how changed cognitions do not necessarily translate into changed behaviour and raises questions about the underlying theory (i.e., that cognitive biases drive antisocial behaviour and inure offenders to the harms they cause) as well as the integrity of programme delivery.

Hoogsteder et al. (2018) conducted a quasi-experimental study of the effectiveness of Responsive Aggression Regulation Therapy (Re-ART) in terms of its impact on recidivism. The programme was targeted at 16 to 21-year-old prisoners in the Netherlands (male and female) who were deemed to have severe problems with aggression and to be at high risk of reoffending. One group (n=63) received Re-ART while another remained on the waiting list and received treatment as usual (n = 28). A minority in each group was of Dutch origin.

The programme was characterised by individualised treatment based on cognitive behavioural principles and addressed the personal and situational factors that affected violent behaviour as well as the interplay between them. The programme consisted of core (e.g., aggression chain, influence of thinking, group work) and optional (e.g., stress reduction, impulse control, emotional regulation) modules. The latter were deployed as required in the interests of ensuring programme responsivity. Because the programme was tailor-made according to the individual's needs, the time to complete it varied widely, from six months to two years. The follow-up period began on release from prison and excluded minor offences such as public urination and various road traffic matters. Recidivism was defined as rearrest and measured with regard to frequency, type (violent vs non-violent), and velocity (time to first arrest).

Hoogsteder et al. (2018) found that programme participants were less likely to be convicted in general or specifically for violent crimes or property crimes after two years. As well as offending less, they offended later (although when they did offend there was no difference in the seriousness of offences committed by those in the Re-ART group as compared to those who received treatment as usual). The differences were substantial: 44.4 per cent vs 82.1 per cent for general recidivism after three years and 23.8 per cent vs 53.6 per cent for violent recidivism at the end of the same period. There was no difference between the groups when it came to property crimes with violence and the difference between the groups for property crime had disappeared by the end of three years. There were comparable effects across the different ethnic backgrounds included in the study. The authors concluded that: "The current findings are promising, given the substantial differences between both groups on violent recidivism and general recidivism" (p. 4418).

Larden et al. (2017) studied the impact of aggression replacement training (ART) with adult offenders in the Swedish Prison and Probation Services. ART is a manual based, cognitive behavioural programme, usually administered in a group setting by clinical psychologists or social workers. Closed groups (i.e., no continuous intake) of four to seven participants attended 10 three-hour sessions over 10 weeks. The programme had three major components: interpersonal training (where skills are practised and strengthened through role play, modelling and feedback); anger management (identifying triggers, learning self-instruction and relaxation techniques); and moral reasoning. Anyone convicted of sexual violence or intimate partner violence did not take part as they were provided with specialised treatment programmes.

ART was introduced in 2000, accredited in 2005 after an independent external review, and discontinued in 2010 following a pessimistic impact evaluation. The authors compared a national cohort of 1,124 offenders who began ART in prison, on probation or on parole between 2003 and 2009 with a matched sample of 3,372 who did not. Around two thirds of those who began the programme completed it. Everyone's unique personal identification number was used to link their

criminal justice records with their health records and other registers that held information regarding marital status, employment and mortality.

Larden et al. (2017) found that the one-year reconviction rate for those who had begun the ART programme was 50 per cent compared to 52 per cent for a carefully matched comparison group who had not taken part. For violent recidivism the rate was identical (19 per cent) for each group. When the analysis was limited to those who had completed the programme the rate of reconviction for a violent offence was 16 per cent compared to 17 per cent for a matched group, again an insignificant result. The only significant finding was a marginal positive effect in general recidivism for programme completers. Somewhat oddly in light of the fact that the programme has been discontinued, and that the observed effects were so slight, the authors argued that research with a wider range of outcome measures be conducted before ART was abandoned.

Martin et al. (2010) carried out a quasi-experimental study in Spain's Canary Islands to test the relative efficacy of a cognitive behavioural intervention (the Prosocial Thinking Programme, PTP) delivered alone or in combination with Social and Employment Integration (SEI) versus no treatment. The sample comprised 117 repeat offenders (87 male and 30 female), two of whom were on parole and another four had been released. All were considered to be at high risk of reoffending by prison staff (although the authors do not reveal the basis of this assessment). PTP comprised 35 two-hour sessions focusing on "... interpersonal cognitive problem-solving skills, social skills, negotiation skills, emotional management, creative thinking, values enhancement, critical reasoning, revision of skills and cognitive exercises" (p. 405). It was delivered by a local NGO, funded by the European Union's INTEGRA programme which required treatment efficacy to be externally evaluated. SEI involved a social worker attempting to find suitable employment opportunities for ex-prisoners and helping to maintain them in the workplace.

The comparison group did not differ in terms of age, offence type, stage in sentence, or level of educational attainment. After six years, the recidivism rates (measured in terms of reimprisonment in the prisons from which they had been released) were significantly lower for the groups that had availed of PTP. Martin et al. (2010) concluded that: "The results of this study show that social-cognitive skills training with the PTP has a positive effect on delaying ex-offenders' recidivism. This effect is strengthened when social-cognitive skill training is combined with social and employment integration. In this study, the percentage of recidivism was reduced by 18 points in the PTP group and by 27 points in the PTP + SEI group" (p. 409). Cognitive behavioural programmes do not take account of social and economic circumstances and the Martin et al. (2010) study suggests that when these are addressed the impact of a psychological intervention is boosted.

This is a strong effect and one wonders to what degree it was influenced by the facts that programme participants were volunteers (indicating motivation to change; we are told they "...

freely agreed to participate in the interventions" (p. 405)) and that the matching did not take account of variables known to increase recidivism risk, such as age of onset of criminality and previous record. Also, what if programme participants had reoffended on the Spanish mainland and been re-imprisoned there? It is not clear that they would have been included in the study. Finally, the measure of reoffending was reimprisonment and it would be interesting to know something about the frequency of rearrest and reconviction. Possibly those who had found and kept jobs reduced their chances of being reimprisoned in the event that they found themselves back before the courts.

Travers et al. (2013) compared the reconviction outcomes for every participant in the prison-based Enhanced Thinking Skills (ETS) programme in England and Wales between 2000 and 2005 (n=17,047) with a national cohort of 19,792 prisoners released over the same period. The programme consisted of 20 two-hour interactive sessions addressing a range of issues including impulse control, moral and critical reasoning, problem solving and flexible thinking. It was a well-designed intervention with clear oversight structures: "ETS is manualized and programme implementation is monitored via a comprehensive annual audit of each treatment site. A treatment manager is situated in each site, responsible for treatment integrity, staff management, and local adherence to RNR principles. There is a high degree of confidence that treatment integrity and treatment quality were consistently acceptable" (p. 54).

At the end of a two-year follow-up period, Travers et al. (2013) found that ETS participants (all of them volunteers serving at least one year) were reconvicted at a rate 6.4 percentage points less than the national cohort of prisoners released having served similar sentences (44 per cent vs 50.4 per cent) rising to 7.5 percentage points for programme completers. They were also reconvicted at a significantly lower rate than would have been expected based on their risk scores (44 per cent vs 51.9 per cent). This pattern of reduced reconviction was found in all but the very highest risk group.

#### Young offenders

Hendriks and Bijleveld (2008) studied recidivism among juvenile sex offenders in the Netherlands who had participated in a residential treatment programme. All participants (n=114) were male and the treatment lasted, on average, for two years and four months. The boys participated in group therapy as well as social skills training and, where indicated, individual psychotherapy. Sometimes antidepressant medication was prescribed to decrease sexual arousal and improve mood.

The median follow-up period was nine years and included new convictions for sexual offences, violent offences, or any crime. The recidivism rates were 11 per cent, 27 per cent and 70 per cent respectively across these three categories. The rate of reoffending was highest in the first year after discharge, but in one case there was an interval of 15 years before a new conviction (for a sexual offence) was recorded. Despite the duration of the treatment programme, the authors

concluded that, "... treatment variables seem to bear almost no relationship with the risk of sexual recidivism" (p. 28). Examination of the files revealed that some of the boys had reoffended during treatment or had sexual contact with other residents of the institution. It was unclear if these contacts had been consensual and it seemed that they were not brought to the attention of the police. The authors stressed that the dark figure is substantial for sexual crime and that recorded rates of recidivism must be seen as minimum estimates. They found "... no relationship between therapists' assessment of recidivism risk and actual recidivism" (p. 29). Nor did they find any relationship between recidivism and the discharge of patients against the wishes of the institution. It must be borne in mind that there was no control group in this study, so it is not possible to come to any firm conclusions about the effectiveness of the treatment programme.

Jolliffe et al. (2013) used a quasi-experimental design to evaluate the effectiveness of High Intensity Training (HIT) at a Young Offender Institution in England. HIT was a boot camp regime with rehabilitative components such as cognitive behavioural training (the Enhanced Thinking Skills programme), community work placements and drug education. It was a gruelling 25-week programme, delivered by a specially trained and highly motivated multidisciplinary team. The days were long – commencing at 06:00 with unit cleaning and drills and ending with lights out at 22:00 – and filled with activities. However, the programme was about much more than physical education and military discipline and had been established with the following ambitious set of aims:

- 1. To reduce the risk of reoffending, using knowledge drawn from the 'what works' literature.
- 2. To fill the young offenders' days with vigorous and demanding activities.
- 3. To provide nationally recognised educational qualifications and vocational training.
- 4. To facilitate the integration of programme participants into the community following release.

Excluded from the programme were sex offenders, serious drug dealers, those with a low IQ, a history of mental illness, or an insufficient period of their sentence left to serve for programme completion. Participants were recruited from a variety of feeder institutions after a selection process that emphasised motivation and the likelihood of absconding. A sample of 18-21 year old males who received HIT (n=125) was compared with a group – individually matched on risk of reconviction – who were suitable but could not avail of HIT, usually because they had less than six months left to serve so could not have completed the programme, but sometimes because they were deemed to be insufficiently motivated or their behaviour was a cause of concern. Members of the control group remained at their current institution and were subject to its normal regime.

HIT had a strongly positive effect. After one year, 56 per cent of those in the HIT group had been reconvicted compared with 74 per cent of controls. This significant difference persisted up to year five. At the end of the 10-year follow-up the benefits of the HIT programme were clear, with participants accumulating fewer convictions (15.6 vs 18.7 on average). In addition, when the costs

of crime were calculated (taking into account factors such as damage to property, health care and the expense of the criminal justice response) the offences committed by the HIT group were less financially burdensome. Jolliffe et al. (2013) summarised their financial analysis in the following terms:

Overall, the 419 fewer convictions of the HIT group cost £1,342,714 less over the 10-year follow-up period, and this was largely because of the greater number of violent and burglary offenses committed by the control group. The two groups did not differ on the number (and therefore costs) of sex offenses—which were rare—and the HIT group committed more fraud. (p. 525)<sup>11</sup>

Over ten years, these savings amounted to four times the costs associated with programme implementation. This is very much a minimum estimate as it is based only on those crimes that resulted in reconviction and does not include benefits such as increased employment, better health and less social welfare dependency that accompany desistance from crime. While not a Randomised Controlled Trial (RCT), in that it lacked the element of arbitrary allocation to treatment and non-treatment conditions, this was a well-designed study that showed a strong pattern of positive results.

## Drug offenders

The German penal code permits detention, accompanied by compulsory treatment, for drug-addicted offenders. Querengasser et al. (2018) followed up 261 patients discharged from forensic psychiatric facilities in the federal state of Baden-Württemberg in 2010 and 2011. Of the total sample, 110 completed treatment successfully and were discharged to the supervision of the probation service while the remaining 151 were prematurely discharged and returned to prison.

The dependent variable in the study was the time between community return and the recording of a new offence. Recidivism in the non-completion group was predicted by four factors: extent of prior record, age at admission to treatment, duration of concurrent prison sentence and previous attendance at a drug substitution programme. Only those with pronounced long-term addictions attend substitution programmes so this factor suggests a persistent and dysfunctional drug consumption style with ramifications for compliance and reoffending. Risk factors for completers included previous convictions for theft or violence, prior enrolments in alcohol-related rehabilitation programmes, and escapes from the ward during treatment. Higher levels of education and a history of regular employment were protective factors. Overall, successful completers were slower to reoffend than non-completers, and this difference was statistically significant.

<sup>&</sup>lt;sup>11</sup> These calculations were based on monetary costs of offences published by the Home Office in London. A more up-to-date tabulation is available at: <a href="https://www.gov.uk/government/publications/the-economic-and-social-costs-of-crime">https://www.gov.uk/government/publications/the-economic-and-social-costs-of-crime</a>

# 3.4 Community-based treatment

McGuire et al. (2008) used a quasi-experimental design to evaluate three community-based programmes, all based on cognitive social learning theory. Known as Pathfinder programmes they had been introduced as part of a major initiative by the British Home Office – the Crime Reduction Programme – to tackle recidivism rates among persistent offenders in prison and on probation. Male offenders who had completed programmes (n=215) were compared with non-completers (n=181), as well as those who had been allocated to, but not commenced, a programme (n=339), and a control group who had not been allocated to any programme (n=194). There were no differences between the four groups according to age, number of previous convictions, or risk of reconviction score. The programmes, delivered by probation staff, addressed offending behaviour in general, rather than being targeted at a specific offence type (or offender group), and participants were followed up for 17 months. The programmes were fully manualised, meaning that objectives, structure and content of sessions, nature of interaction between staff and participants were documented in great detail.

The programmes included in the study were:

Reasoning and Rehabilitation (R&R), which comprised 38 two-hour sessions covering problem solving, negotiation skills, critical reasoning, values enhancement, emotional self-control and social skills.

Enhanced Thinking Skills (ETS), a modified version of R&R designed by the prison service in England and Wales for delivery in fewer sessions (20 rather than 38), with homework completed between sessions.

Think First (TF) focuses specifically on participants analysing their own criminal acts with a view to identifying risk factors and modifying behaviours, attitudes and thinking patterns. It comprises 22 group sessions of two hours, bookended by four individual introductory sessions and six individual follow-up sessions.

The principles underlying the programmes emphasised that, in addition to environmental influences and criminal opportunities, persistent criminality is associated with a range of individual-level factors. These include criminal peers, antisocial attitudes and beliefs, and deficits in self-management, social interaction and problem solving. Remediation of these areas should lead to a reduction in criminal conduct. All three programmes draw on the same repertoire of techniques including role play, modelling, dilemma games, and cognitive exercises. New skills are reinforced through practice and repetition.

McGuire et al. (2008) first examined recidivism rates between the intent-to-treat sample (i.e., everyone allocated to a programme regardless of whether treatment was commenced or completed) and the comparison group. The difference was not statistically significant. They then turned their attention to the 735 offenders who had been mandated to take part in a treatment programme. The reconviction rate for the 215 who completed all sessions (45.6 per cent) was compared with the rate for non-completers (73.5 per cent), non-starters (74 per cent), and the comparison group (59.3 per cent). This pattern of results was statistically significant.

While encouraged by this finding the authors acknowledged that it might be explained by selection bias if programme completion and reduced offending were both accounted for by an unmeasured independent variable such as individual motivation. If so, self-selection rather than treatment efficacy would explain the positive results. McGuire et al. (2008) concluded with the sensible recommendation that: "Additional research is required towards the development and application of a psychometrically reliable and valid instrument for the assessment of participants' levels of motivation and their readiness to change, which can then be entered as variables in subsequent statistical analyses" (p. 36).

Palmer et al. (2007) examined the same three Pathfinder programmes using a different design (three groups rather than four, comprising: completers, non-completers and a comparison group), a larger sample (the group numbers being 1,311, 2,778 and 2,390 respectively), and a longer follow-up period (from one year to three years and four months). The conviction rate for programme completers was 53.8 per cent compared with 59.8 per cent for the comparison group. The non-completers fared worst with a reconviction rate of 76.4 per cent.

When key variables such as age, offence type, length of follow-up, risk score and number of previous convictions were controlled for, these differences remained statistically significant: "Completers were 33.4 per cent less likely to be reconvicted than offenders in the Comparison Group and 68.3 per cent less likely than Non-Completers, and Non-Completers were 86.0 per cent more likely to be reconvicted than offenders in the Comparison Group" (p. 258). The same pattern held for each of the three programmes when outcomes were disaggregated. The authors acknowledged that the treatment effect could be a selection effect in that the most highly motivated offenders who stick with the programme are less likely to reoffend anyway. (This can be taken into account – partially – by building statistical models that incorporate known correlates of offending, such as age, prior record etc.)

Andersen and Wildeman (2015) studied the effect of specific probation or parole officers on clients' recidivism (i.e., reconviction during first two years after supervision commences, including technical violations of probation or parole) and labour market outcomes (i.e., earnings and welfare

benefits) in Denmark between 2002 and 2009. They noted that, "... even though both existing research and common sense suggest that probation and parole officers matter for their clients, it remains unclear whether they do in fact matter – and if they do, exactly how much" (p. 631).

In an attempt to shed light on this question they gathered information on 19,534 parolees and probationers and the 371 parole and probation officers they were assigned to. In Copenhagen, the assignment of officers to clients is close to random so this group was separated out and compared with the rest of the country. The authors found that earnings were unaffected by which officer a client was assigned to, but there were significant differences in welfare benefits and recidivism. Much of the variance was explained by the characteristics of clients rather than officers and while a small number of very good and very bad officers had a discernible effect, in the main, assignment made little difference. Andersen and Wildeman (2015) concluded that "... parole and probation officers do matter – although less than we might previously have thought" (p. 646) and recommended that that attention now be turned to *how* they matter.

### Domestic violence prevention

Bowen et al. (2005) examined recidivism rates among 86 men who attended a domestic violence perpetrator programme operated by a probation service in the UK. Their attendance was court-mandated, and they were required to attend one induction session, 24 two-and-a-half-hour group sessions, and five two-and-a-half-hour follow-up sessions. The group sessions took place once or twice per week and were offered in the evening as well as during the day to suit the schedules of both employed and unemployed offenders. The follow-up sessions took place once a month.

The core programme comprised five modules. The first (six sessions) examined offenders' own definitions of, and justifications for, domestic violence and identified the triggers for violence. It taught them the 'time out' interruption technique and they learned to use a violence log to relate what they were learning to their behaviour. The second (four sessions) used discussion and role play to explore male socialisation, patriarchal attitudes and how to create intimate non-abusive relationships. The third (five sessions) used written exercises, video footage with survivors and a drama session to focus attention on victim impact and empathy. The fourth (three sessions) examined sexual respect and the fifth (six sessions) addressed communication and accountability with reference to denial, minimisation, blame and jealousy. Homework was assigned between sessions on every module.

To complete the programme required attendance at 21 or more of the 24 core sessions with absences to be explained by an external source such as a doctor's letter. Failure to attend could result in a breach and a return to court. There was no sanction for non-attendance at the follow-up sessions and, as a result, they were poorly attended. It was hypothesised that those who attended the programme would be less likely to reoffend and that if they did the time to offence would be

longer. Bowen et al. (2005) found that, within eleven months of completing the programme, 21 per cent were alleged to have reoffended. Completing the programme was not significantly associated with either the rate of reoffending or the time to the first post-treatment offence reported to police. There were no differences between those who came to attention again for domestic violence and those who did not in terms of criminal record, employment, marital status or drug and alcohol use. The best predictor of future police contact regarding allegations of domestic violence was a recent history of frequent similar contact.

In a later study, Bowen et al. (2008) presented data from a sample of 52 male domestic violence offenders (average age 35, with 85 per cent identifying as White British and more than two thirds having previous convictions) who were ordered by the courts to attend a pro-feminist psychoeducational rehabilitation programme in England. The programme "... adopts a gendered analysis of power through which the current behavior of men is challenged along with the patriarchal attitudes, values, and beliefs of men that condone domestic violence and the subordination of women" (p. 599). The theory is that if attitudes can be shifted in a positive direction then behaviours will follow.

For the purposes of psychometric testing pre- and post-intervention the sample was compared with a smaller group of non-offenders drawn from among probation service staff (n=32). Recidivism was defined as having come to the attention of the local police during the following 11 months. The extent of both statistically and clinically significant psychological change across a range of measures (e.g., pro-domestic-violence attitudes, anger, locus of control, interpersonal dependency) was assessed pre- and post-treatment. The association between these measures and recidivism was examined.

The results were disappointing. Overall, the men who completed the programme achieved limited psychological change, but within the group some remained unchanged and others regressed (suggesting that the programme was unsuitable for them and that participation might have placed them at greater risk). The level of psychological change achieved had no association with reoffending. Bowen et al. (2008) concluded as follows: "Despite a proportion of offenders consistently achieving clinically significant change across measures, neither clinically significant individual nor statistically significant group-based change was associated with re-offending" (p. 611). They averred that despite the small sample size, short follow-up, and possibility that psychometric tests may have been affected by a social desirability effect, the lack of association between attitudinal change and improved behaviour was a matter of some concern.

Interestingly, they posited that: "The data presented in this study directly challenge the criminogenic nature of such attitudes. It is possible that pro-domestic violence attitudes reflect post hoc justifications that are not antecedent causes of domestic violence per se. *If this is the case, no* 

association should realistically be expected between significant positive change and alleged reoffending" (p. 612; emphasis added). It is important, in other words, not to equate clinical with criminogenic needs. These are important findings and if replicated would cast doubt on the theoretical underpinnings of an established approach to the prevention of repeat domestic violence.

Haggard et al. (2017) followed up a consecutive series of 340 men who had been convicted of intimate partner violence (IPV) in Sweden, who were assessed as at medium or high risk of recidivism, who were motivated to change, and who participated in an intervention called the Integrated Domestic Abuse Program (IDAP) which "... takes a pro-feminist, psychoeducational approach to violence; and focuses on men's general use of power and control over women" (p. 1029). It was based on social learning theory and cognitive behavioural therapy. Treatment goals were to encourage men to take responsibility for their abusive behaviour and to acknowledge gender inequalities and the power of patriarchal ideologies. The program consisted of 27 group sessions covering nine modules and a minimum of eight individual sessions.

Programme participants were drawn from specialised units in six prisons (46 per cent of the treatment group) that accommodated perpetrators of intimate partner violence and from 12 probation offices across Sweden (54 per cent of the treatment group). The treatment providers were trained and certified psychologists and social workers. The men who entered the programme (three quarters of whom completed it) were compared with a control group of 452 men convicted of the same offence who did not participate in IDAP. The average duration of follow-up was 4.6 years, and recidivism was defined as any reconviction that resulted in a new sentence. There were no statistically significant differences between the groups either in terms of future violence in general or with regard to intimate partner violence in particular. Haggard et al. (2017) concluded that: "Our results support prior conclusions from systematic reviews that IDAP is not a satisfactory IPV offender treatment" (p. 1040).

#### Prolific offenders

King et al. (2018) studied prolific offenders in England who were facing lengthy custodial sentences. Those who could demonstrate compliance and motivation to change, and who satisfied a bail assessment and sentence deferment period, were offered a three-year community order with a tailored package of supports, instead of a prison term, in one of two Integrated Offender Management (IOM) schemes. Despite these careful selection criteria, there was no difference in reconviction rates at 12 and 24 months, when compared to local and national data and the available literature, although the frequency of reoffending declined.

To explore why the schemes failed to realise their potential the authors interviewed 25 practitioners including judges, police officers, probation officers and drug support workers. Their aim was to

evaluate the process according to the phases of successful change management set out by John Kotter in a much-cited article in the *Harvard Business Review* (2005) and the bestselling book that followed (*Leading Change*, 2006). These are:

- 1. Establish a sense of urgency.
- 2. Form a powerful guiding coalition.
- 3. Create a vision.
- 4. Communicate the vision.
- 5. Empower others to act on the vision.
- 6. Plan for and create short-term wins.
- 7. Consolidate performance and produce still more change.
- 8. Institutionalise new approaches.

King et al. (2018) concluded that an adequate sense of urgency had not been created, with some stakeholders reticent to become involved. Governance structures were unclear and there was uncertainty around which agency was in charge. A shared strategic vision was absent and there was evidence of role confusion and unrealistic expectations among the professionals involved in delivering the schemes. There was poor communication about the schemes to police and probation personnel who were not directly involved in their administration. Different police and probation cultures and priorities impacted on the successful achievement of the schemes' aims and these were exacerbated when members of the delivery team (police, probation, drug support workers) were not co-located.

There was little consensus about what constituted success, with the police emphasising improved detection rates and the probation service focusing on reduced offending. Nor were there obvious short-term goals that could be identified and agreed upon. Internal communication was poor and little evidence existed that short-term achievements, however defined, had been documented and disseminated, meaning that good performance could not be consolidated. All of the foregoing meant that the schemes did not become embedded into the operations of the various agencies involved; they were never institutionalised.

While aligning implementation efforts more closely with Kotter's eight phases is no guarantee of programme success, and must be considered against a background of financial restrictions, staff turnover, shifting political priorities and poor programme design, King et al. (2018) demonstrated the utility of this approach, especially when multi-agency collaboration was involved.

## Drink driving

Palmer et al. (2012) followed up 144 adult males serving community sentences in England and Wales who were required to complete the Drink-Impaired Drivers (DID) programme. DID uses a

combination of cognitive behavioural and educational approaches. It is delivered during 14 two-hour group sessions which aim to, "... improve offenders' knowledge about alcohol and driving, to improve their planning skills and ability to generate alternatives with respect to their drink-driving behavior, and to change their attitudes that are supportive of drink-driving" (p. 529). Offenders who did not attend the first session or had an acceptable excuse for missing two sessions could begin again. If they failed to complete on this occasion, or had unacceptable absences, they risked being found in breach of their order and being returned to court.

After one year none of those who completed the programme (n=85) had been reconvicted of drink-driving. This compared with 13.6 per cent for non-completers (n=59) and 3.9 per cent for members of a comparison group (n=231). Completers were six years older on average than non-completers and were assessed to be at lower risk of reoffending. When age and risk level were added to the model along with previous convictions the non-completer group remained at significantly higher risk with – surprisingly – no meaningful difference between completers and the comparison group.

This led Palmer et al. (2012) to conclude that: "Although this study does not provide evidence that completing the DID program reduces drink-drive reconvictions, it supports previous research in highlighting worse reconviction outcomes for noncompleters" (p. 534). They argued that a longer follow-up period might have found a difference between these groups. Non-completers were younger, riskier, and possibly less well motivated. Again, there was a significant level of attrition in this study. As ever, the difference in outcomes may be explained by pre-treatment differences in the groups that were not measured and controlled for statistically.

#### Substance misuse

Shaul et al. (2016) carried out an RCT at six probation offices in the Netherlands that were dedicated to substance-misusing offenders. The aim was to evaluate the effectiveness of a motivation enhancing intervention, known as 'Step by Step', over supervision as usual. The intervention aimed to increase offender motivation to engage with rehabilitative programmes, which is essential to the Responsivity principle (i.e., tailoring programme delivery to offenders' learning styles and ambitions).

Step by Step had been designed specifically for offenders with problematic substance use and was delivered over four to six sessions, each lasting 15-20 minutes. The probation officers in the experimental group had been trained in motivational interviewing and in the Step by Step protocol as set out in a manual. Offenders were given a workbook. The intervention was delivered on a one-to-one basis and comprised "... seven steps that focus on the offender's willingness to collaborate (step 1), problem recognition (steps 2 and 3), ambivalence to change (step 4), confidence in ability to change (steps 5 and 6), and commitment (step 7)" (pp. 906-7).

Probation officers (n= 73) were randomly assigned to the experimental and control groups and their male clients were invited to take part in the study. A minority (n=220; 40 per cent of those eligible) agreed to do so. They were followed up for 12 months using a combination of self-report and police records. For the intention to treat analysis (i.e., including all participants as originally allocated with no distinction between programme completers and dropouts), there was no difference between the groups in either the rate of recidivism (56.8 per cent vs 57.8 per cent) or the time to re-offending (307 days vs 295 days). The per-protocol analysis (i.e. excluding dropouts; also known as treatment-received analysis) found no difference between completers and those who availed of supervision as usual on either measure: overall recidivism (56 per cent vs 57.8 per cent) or time to re-offending (328 days vs 295 days).

Shaul et al. (2016) suggested that the disappointing pattern of results may have been explained by the fact that motivation is a necessary but not sufficient condition for change or that probation officers were insufficiently well trained in programme delivery, thereby compromising its integrity.

### **Policing**

Sleath and Brown (2019) examined the introduction of an Integrated Offender Management (IOM) framework in one large police force region in England. To assess its impact they compared the number of arrests in a single sample of offenders (189 males and 36 females) during an 18-month period before and after its introduction, as well as the same offenders' risk scores (using a measure devised by the local police) at the time of introduction and 18 months later.

The men and women selected for IOM were persistent but not serious offenders and those involved in both criminality and active drug misuse. There was evidence of a significant decrease in arrest levels and a significant reduction in risk scores. Interviews with police and probation offender managers as well as a sample of the offenders suggested that important factors in explaining these encouraging results were: the high level of contact with, and monitoring of, offenders; improved collaboration and communication across agencies (strongly linked to co-location of police and probation staff); and building trust and rapport with offenders (a particular challenge when the offender manager was a police officer).

It was not possible to disentangle the particular aspects of IOM (e.g., monitoring, housing and employment assistance, engagement with drug treatment services) that accounted for the improved behaviour. Also, the risk calculation used by the police had not been tested for reliability or validity. Nor was the interpretation of arrest data straightforward: were offenders subject to IOM more likely to be arrested because they were being more closely monitored or less likely to be arrested for fear of damaging the relationship with the offender manager? The quantitative analyses are summarised briefly by Sleath and Brown (2019), who devote most of their attention to the interview data. It seems reasonable to conclude that the results are promising, that they

trend in the hoped-for direction, but that more work is required to parse them and to relate the quantitative to the qualitative findings.

#### Female offenders

Palmer et al. (2015) evaluated two cognitive skills programmes (ETS and TF) administered to women serving community sentences in England and Wales. Non-completers were younger, had higher risk scores, larger numbers of previous convictions, and were more likely to have been convicted of theft or handling stolen goods. There were differences in reconviction across the groups, but multivariate analyses showed that after one year – once age, risk of reconviction, number of previous convictions, and offence type were controlled for – many of these apparent differences disappeared.

The final models showed that completers did not have a significantly lower rate of reconviction than the comparison group (n=520). Nor were differences found between completers (n=45) and non-completers (n=236). Treatment completion, in other words, had no effect on reconviction. The authors suggested that as their previous work (e.g., McGuire et al., 2008) had shown these programmes to be effective with men: "... it may be that the lack of effectiveness with women offenders is related to gender; that is, ETS and TF are not gender-responsive either in terms of the criminogenic needs they target and/or their delivery style" (p. 354). However, the non-completers had a significantly higher rate of reconviction than the comparison group, once again illustrating the adverse effects of programme attrition. It seems that it may be better to do nothing than to begin, but drop out of, a programme. The adverse effect of non-completion seems to be very real.

## Young offenders

Brownlee (1995) compared a cohort of high tariff young offenders (17 to 21 years of age) who had been given intensive probation supervision in the north of England with two samples who had received custodial sentences for similar activity. Many had been convicted of burglary. Within 24 months of beginning supervision, 73 per cent had been reconvicted. For those who had been recommended for intensive supervision, but sentenced to custody the reconviction rate was 81 per cent over the same period and for the group who were sent directly into custody without being considered for intensive supervision the rate was 69 per cent. The intensive supervision group were convicted less quickly than those released from custody but, by the end of the 24-month follow-up period, the average number of new convictions was the same for members of all three groups. Brownlee (1995) concluded that while it certainly had an incapacitative effect, custody was not demonstrably more effective over the follow-up period in terms of reducing recidivism.

De Vries et al. (2018) carried out an RCT of an intervention designed to prevent persistent criminal behaviour in young people (aged 12-19 years) in Amsterdam. This is a rare example of an RCT carried out in Europe and is important because it targeted a group known to be at high risk of

recidivism. Participants were randomly assigned to the treatment group ('New Perspectives') or to 'care as usual'.

New Perspectives was an intensive, community-based programme informed by the theoretical framework of the RNR model, incorporating the principles of Risk (proportionality between program intensity and likelihood of reoffending); Need (focus was on criminogenic needs such as relationships with parents and peers and cognitive distortions), and Responsivity (programme was adjusted to take account of participant background and motivation).

The programme consisted of an intensive three-month delivery phase followed by an aftercare period of the same duration. During the delivery phase, youth care workers, each with a caseload of four clients, were available around the clock and spent eight hours per week with each client. Individual and family counselling were provided along with educational support, social skills training, motivational coaching, and crisis intervention. Clients were assigned to a social worker from a similar ethnic background. Contact was less frequent and less intense during the aftercare phase.

Young people who were not motivated to desist from offending, who were dependent on drugs or alcohol, had low IQ, psychiatric problems or a long delinquent career were excluded from the programme. Others declined to participate, resulting in a study sample of 101 young people, around half of whom had been arrested at least once and 83 per cent of whom were from a minority ethnic background. The inclusion criteria suggest that the final sample consisted of clear-thinking young people who were predisposed to change.

De Vries et al. (2018) collected official and self-report data to measure the prevalence, frequency, velocity (time before relapse), and seriousness of recidivism (defined as a new conviction) over a minimum follow-up period of 12 months after programme completion and 18 months after programme initiation. Their conclusion was stark: "... no significant differences were found between the experimental and control groups on participation in self-reported general delinquency and specific types of delinquency (violence, theft, and vandalism)" (p. 3648). There were no differences in time to arrest, frequency or seriousness of subsequent offending. This was true for boys and girls, older and younger adolescents, and native Dutch participants compared to members of minority ethnic groups.

In other words, this clearly thought through, highly structured, well resourced, and theoretically informed intervention had no discernible effect. The authors proposed that the lack of impact might be associated with an insufficiently clear therapeutic focus, the recruitment of offenders who were not adequately assessed at intake and were too low risk for the programme, and poor programme integrity during the aftercare phase when treatment adherence was low.

In an interesting RCT carried out in the Netherlands, Asscher et al. (2014) examined the impact of multi-systemic therapy (MST) on delinquency (parent and adolescent reported) and recidivism (officially recorded). As they explained it: "MST focuses on diminishing the risk factors and increasing protective factors in the various systems in which juveniles function, e.g., family, school, peer group, and neighbourhood" (p. 228). A sample of 256 boys and girls aged between 12 and 18, who displayed severe and persistent antisocial behaviour and had been referred for MST between 2006 and 2010, were randomly assigned to MST (n=147) or Treatment As Usual (TAU) (n=109) groups. MST was usually delivered in the home in family sessions that took place at least once each week. The therapist identified appropriate treatment goals and assigned the tasks required to accomplish them. TAU involved individual counselling or supervision and a range of family-based interventions (e.g., family therapy, parent counselling, home-based social services). It must be said that this was high-quality TAU and included some of the ingredients of MST.

Asscher et al. (2014) found that MST was effective at reducing delinquent behaviour as reported by children and their parents at six month follow-up, but that there were no differences in recidivism (defined as rearrest) at six months or two years. The groups did not differ in terms of time to rearrest, number of new arrests or seriousness of new offences. By the end of the maximum follow-up period of three years, there was no significant difference in recidivism between the treatment and control groups. One key lesson from the study was the importance of data triangulation; different sources have their own advantages and disadvantages: "Where self-report data may show an underestimation of the delinquent behavior, official judicial data have the risk of being subject to selection bias, caused by policy decisions" (p. 239). Also, recorded offences are the subset of all crimes that are detected and result in an official response from the criminal justice system.

van der Put et al. (2012) examined the effect of treatment characteristics on recidivism in a forensic youth-psychiatric outpatient clinic in the Netherlands. The clinic provided functional family therapy (FFT; which included behavioural contracting, communication skills and a token reinforcement system) and individual cognitive behavioural therapy (CBT; aimed at increasing positive behaviours and thoughts, reducing negative behaviours and thoughts, and improving interpersonal skills). Sometimes the latter was offered in combination with parent training (PT; focused on teaching parents how to modify their children's behaviour). In addition, some of the juveniles took part in aggression replacement training (ART; group training that addressed anger management, moral reasoning, and social skills).

The sample comprised 241 adolescents (207 boys and 34 girls) aged between 13 and 21. Those who had received less than six sessions or had been in treatment for less than two months (n=49) were treated as dropouts. They differed from the treatment group on only one of the static variables

that was measured. This was ethnic background, with dropouts more likely to be members of a minority ethnic group. The follow-up period was two years in every case and recidivism was defined as a new adjudication or conviction. Time to reconviction was not calculated and nor was account taken of the seriousness of any new offence.

van der Put et al. (2012) found no differences between treatment completers and dropouts as regards the level of recidivism (total and violent). The only statistically significant difference between the different treatment groups was that violent recidivism was higher among those who had participated in ART. Overall, the findings were not in the expected direction: "Treatment characteristics related with recidivism were total number of sessions (the *greater* the number of sessions, the higher the recidivism), length of treatment (the *longer* the period of treatment, the higher the recidivism)" (p. 1129; emphasis in original). Recidivism risk was highest among those who had been in treatment for more than a year and received FFT or CBT with PT. These findings did not result from therapists deciding that the more problematic cases should remain in treatment longer and receive more sessions; the differences remained even after controlling for a variety of risk factors.

The authors found striking variation in recidivism rates between therapists, which ranged from 45 per cent to 83 per cent. In this regard they recommended in the interests of treatment integrity that: "It may be necessary to train and supervise the less competent therapists to make them more competent and adherent to evidence-based treatment models" (p. 1134). Another factor that may have contributed to the disappointing results related to implementation problems. FFT had just been introduced when the study started, and the therapists had not yet been fully trained in its administration and were delivering it at a much lower level of intensity than required. It was also possible that the young people in the study were a little too old to benefit from FFT.

To summarise, if an intervention is to succeed it must at the very least be implemented in a consistent fashion by professionals who have been properly trained and are consistently following the specified protocols. It must also be suitable for the target population and the quantum of treatment must be proportionate to the assessed level of risk. van der Put et al. (2012) concluded that "... an important lesson to be learned from this study is that poorly implemented treatment leads to poor outcomes" (p. 1136). It may be better to do nothing than to implement a programme badly.

Villanueva et al. (2014) examined the efficacy of victim offender mediation (VOM) as a recidivism-reduction strategy. Their population comprised all minors (14 to 18 years old) who had been charged with an offence and appeared before the juvenile court in one Spanish province between January 2008 and February 2010 (N=210, of whom 151 were boys). The Youth Offending Team allocated cases to the different groups. If the young person was deemed to be willing to repair the

harm caused by their behaviour, and the victim was willing to take part in mediation, he or she was allocated to VOM. If either party showed a lack of willingness to engage, or if the Youth Offending Team thought the crime was too serious or the young person had too many previous convictions, they were assigned to one of three comparison groups – judicial reprimand, case closure and community service – depending on their situation and personal characteristics.

The level of risk presented by each of the minors was assessed using an instrument known as the Youth Level of Service / Case Management Inventory (YLS/CMI) and they were followed up at 12 months and 24 months to see if they had acquired any new charges. Villanueva et al. (2014) found that there were no clear differences in recidivism rates between those allocated to VOM and the other groups. An increase in the rate of recidivism was seen in VOM at 12 months and in case closure at 24 months, as the level of risk increased.

Jara et al. (2016) provided a further analysis of the same study, looking more specifically at the roles of gender and risk as measured by the YLS/CMI. To complete the YLS/CMI, information must be collected from a variety of sources including the young person's family and school as well as criminal history, contact with social services and so on. It comprises 42 items which are scored to give an overall risk classification of low, moderate, high or very high. The score informed the decision about what type of disposal would be most appropriate for the child. Jara et al. (2016) found that, overall, the level of recidivism was more than twice as high for boys as for girls and that it rose in line with the YLS/CMI risk score.

#### Sex offenders

Craissati et al. (2009) studied 273 male sex offenders (198 child molesters and 75 rapists) who had been living in the community in London for an average of nine years. Around half were not in treatment with the remainder availing of group treatment, supportive psychotherapy, individual manualised treatment or relapse prevention. The findings were not encouraging: "No statistically significant impact of treatment was found on the sexual reoffending rate" (p. 782).

Beech and Ford (2006) studied a sample of generally high-risk child sexual abusers attending an intensive cognitive-behavioural community-based residential programme. The treatment was oriented around:

... challenging offenders' denial/ minimization of their offences by encouraging them to take full and active responsibility for their sexual behaviour; identifying and challenging distorted perceptions and attitudes towards the appropriateness of sexual contact with children (cognitive distortions); increasing awareness of the victim's perspective of sexual abuse; addressing identified social skills deficits that may hinder the development or maintenance of more appropriate adult intimate relationships; helping participants to

recognize, avoid or cope with situations that could lead to further sexual assaults (relapse prevention). (pp. 688-9)

Typically, clients were assessed for four weeks before undergoing a pre-intervention phase of two to four weeks, followed by six to twelve months of treatment (three hours of group work, five days a week, in addition to individual therapy).

The sample comprised 51 white men (aged 21 to 66) who had finished the programme and for whom records were available at follow-up. Each had completed an average of 877 hours of group work and two thirds had undertaken sex offender treatment prior to entering the programme. Nearly half had previous convictions for sexual offences before the offence that led them to the programme. Beech and Ford (2006) found that two years after treatment completion, four of the 51 men (eight per cent) had acquired a new conviction for a sexual offence. By five years, this had risen to five (but data were only available for 19 participants at this stage, resulting in a reconviction rate of 26 per cent). They noted that: "All those who were reconvicted committed offences very similar in nature to their previous offences, suggesting that the treatment programme had not markedly reduced the seriousness of their subsequent offending" (p. 697).

None of the men who were considered to have responded well to treatment were reconvicted compared with 14 per cent (5/35) of those who were deemed not to have responded and left the clinic with an "untreated profile" (p. 697). This raises two interesting points. First, that even after the careful assessment and selection procedure, most of those who completed the programme and were included in the study (35/51) were deemed not to have responded to treatment. Secondly, that even among this group 86 per cent were not reconvicted.

Additionally, the findings are difficult to interpret given the small sample size, the lack of a comparison group, and the fact that men who started but did not finish the programme were omitted from the analysis. There is likely to be a strong selection effect here in that the most highly motivated men are precisely the group most likely to take the programme seriously and to be judged 'treated' at its conclusion. In other words, what they bring to the programme in terms of background characteristics and commitment to change may be more important than what the programme delivers to them in terms of treatment outcomes. Given all of these limitations it is difficult to go much further than the authors' tentative suggestion that "... successful completion of the residential programme is beneficial in preventing reconviction" (p. 698). This is a modest level of success that resists generalisation.

Beech et al. (2012) analysed data relating to 413 child molesters (aged 18 to 82) who had completed a community-based treatment programme in the UK. The vast majority (88 per cent) had not previously received sex offender treatment. Treatment was a condition of probation

supervision or a requirement for those who had been released from prison on licence. The programmes were offered by probation services and addressed life skills, cognitive distortions, victim empathy and relapse prevention. The full version took around 200 hours to complete and there was a shorter version (around 100 hours) for offenders whose risks and needs were lower. Response to treatment was determined by pre-test and post-test scores on a range of scales measuring pro-offending attitudes and socio-affective functioning (e.g., self-esteem, assertiveness, emotional loneliness).

A total of 135 men were deemed to have responded to treatment and they were matched with the same number who had not. Recidivism was measured by reconviction within two to four years, including breaches of licence conditions. The overall level was 12 per cent (n=51; 44 committed a sexually related offence of whom 18 were convicted of a breach of sex offender registration requirements rather than a new crime). For those convicted of a new sex offence, the average length of time since completing the programme was 30 months.

Looking at the 'treated' and 'untreated' groups specifically, Beech et al. (2012) reported that nine per cent of the former (12/135) had committed further sexually-related offences compared with 15 per cent of the latter (20/135). Leaving aside breaches of orders and focusing on contact offences, these were committed by five of the treated men and six of the non-treated men, leading the authors to state that: "There were no statistically significant differences between the recidivism rates between the two groups" (p. 43).

Friendship and Beech (2005) offered an interesting commentary on how any changes resulting from treatment might be gauged and understood. This is worth quoting at length:

... there has been an over-reliance on using group means, statistical significance and effect size as measures of treatment impact. Group means, e.g. the proportion of the sample reconvicted (or not), represent only the majority influence within the group ... this approach ignores individual change and does not tell us what proportion of the treatment participants has benefited from treatment. Statistical significance tells us that the change is real and has not occurred by chance – but it does not tell us whether the change is clinically relevant. Finally, treatment effect, i.e. the magnitude of the change pre- to post-treatment ignores the relevance of the level of functioning at the termination of treatment. For example, two individuals may demonstrate the same degree of change but, because they began with a different level of need, they will not reach the same point in terms of psychological functioning post treatment ... it is not the magnitude of the change that is important but the level of functioning attained at the end of treatment. (p. 219)

To surmount these issues requires a focus on differences that are clinically relevant as well as statistically significant: "An individual can be assessed as having benefited from treatment if there is a statistically significant change in pre- to post-treatment functioning and if, at the conclusion of treatment, he is performing within the normal or functional range for the targeted behaviour" (p. 219). An enhanced approach to change measurement along these lines requires psychological measures that are reliable and valid.

An interesting qualitative study was carried out by Perrin et al. (2018) with a small sample (n=13) of imprisoned sex offenders in the UK. These were men who had taken on peer support roles within the institution such as being a Listener trained by the Samaritans to offer face-to-face emotional support to those in crisis, or acting as a mentor to newly arrived prisoners or those who were experiencing victimisation or bullying, or acting as a literacy tutor. It seemed that these roles made these men's lives meaningful, imbued their everyday activities with a sense of purpose, stimulated reflection, helped them to develop self-control, and encouraged the type of active citizenship that is thought to be associated with law-abiding life post-release by giving people the kind of stake in society that promotes conformity.

By engaging with their less fortunate peers in a constructive way, they were able to develop a more positive self-image and an identity as someone who could redefine themselves in a prosocial direction. They were keen to repay the trust shown in them (both by the authorities and other prisoners) by demonstrating an ability to make a positive contribution to their environment. In the right circumstances this can promote a virtuous cycle of improved thinking and acting.

In a group as denigrated and despised as sex offenders, it is particularly important to take seriously any opportunity to reinforce the kind of behaviour that might promote successful reintegration. If the reduction of stigma and self-loathing is associated with reduced recidivism and if it can be promoted through peer support work, then it would seem that this is an idea worth pursuing. So too if peer support activity can assist in compliance with the authorities and better emotional regulation, these are factors that would be beneficial if they persisted after release.

#### Perrin et al. (2018) concluded that:

While this study does not claim that peer-support roles might reduce reoffending, it is argued that such roles can encourage movements toward desistance by enabling sexual offenders to develop better images of themselves, obtain basic human needs, and to not become 'institutionalized' or consumed by harmful labels. (p. 775)

These encouraging findings merit further study – and indeed extension – to probe the degree to which prosocial changes wrought within the institution persist outside and depress recidivism rates.

Ruddijs and Timmerman (2000) compared 56 first-time sex offenders in an outpatient treatment programme (known as STAPP; Stichting Ambulante Preventie Projecten, translated as Foundation for Ambulatory Prevention Projects) in the Netherlands between 1989 and 1995 with the same number who received no treatment. All were men, most were unmarried, and they ranged in age from 15 to 67. Members of the two groups were matched by age, prior criminal record, previous sentences and victim characteristics. Recidivism rates were low: three members of the experimental group (five per cent) and one member of the control group (two per cent) committed a new sexual offence and there was no statistically significant difference between the groups in terms of non-sexual offences. The time to relapse was eight years for the offender in the control group and ranged from within one month to four years for the experimental group, leading the authors to conclude that: "... there is no difference in the recidivism rate of the experimental group and the control group" (p. 734).

However, while the authors did not consider the possibility, it is likely that the demands of the STAPP programme were too light to achieve any demonstrable effect. On average clients had 14 meetings, each lasting 45 minutes, totalling just over 11 hours of therapeutic time. Adding in the requirements of administration and report writing, the total time investment in each client was less than 20 hours. This hardly seems adequate to deliver the programme objectives which, as summarised by the authors, were to:

a) reduce denial and increase accountability; b) increase empathy for the victim; c) provide insight into the precipitating events; d) address the adolescent's own victimization, if appropriate; e) provide sex education; f) use conditioning procedures to alter deviant arousal patterns; g) modify cognitive distortions regarding inappropriate sexual behavior; and h) develop social skills and anger control. (p. 726)

When we further consider the small number of participants, the low level of detail reported by the authors regarding the precise nature of the interventions under consideration, and the lack of clarity about the duration of follow-up periods, the absence of any clear pattern of results is unsurprising. What is surprising however is the claim by Ruddijs and Timmerman (2000) that: "... the prevention of sexual violence begins with taking a firm line with first offenders ... changing the behavior of persons who commit sexual violence can only take place in a coercive structure, followed by a period of supervision" (p. 738). It is difficult to understand how such a strong assertion could possibly flow from the authors' analysis.

Finally, Schmucker and Losel (2015) conducted a meta-analysis of 29 studies containing a total of 4,939 treated and 5,448 untreated sexual offenders. There was a small, but statistically significant, overall treatment effect, equating to "... a difference in [sexual] recidivism of 3.6 percentage points

(10.1 per cent in treated vs. 13.7 per cent in untreated offenders) and a relative reduction in recidivism of 26.3 per cent" (p. 597). The risk of reoffending was the strongest predictor of a positive treatment effect with those at high risk faring best. Less than half of the studies examined general recidivism at follow-up and the results here were more encouraging in absolute terms, showing, "... a reduction of 8.6 percentage points or 26.4 per cent in general recidivism" (p. 611); based on 32.6 per cent in the treated group vs 41.2 per cent in the untreated group. (While a welcome diffusion of benefits, it is not entirely clear why programmes targeted specifically at sexual offending would have a dampening effect on unrelated types of crime.)

Schmucker and Losel's (2015) conclusion bears repetition in full:

Although our findings are promising, the evidence basis for sex offender treatment is not yet satisfactory. More randomized trials and high-quality quasi-experiments are needed ... particularly outside North America. In addition, there is a clear need of more differentiated process and outcome evaluations that address the questions of what works with whom, in what contexts, under what conditions, with regard to what outcomes, and also why. (p. 598)

After so much research over so many years this is a chastening summation.

#### Electronic monitoring

Hucklesby (2008) interviewed 78 offenders who were subject to electronically monitored curfew orders in two cities in the north of England in 2005. Nine out of ten were male and white, ranging in age from 17 to 65. Most (85 per cent) were under curfew for between 10 and 12 hours per day. Typically they had committed property crimes or driving offences. There are several caveats associated with this study. The sample was opportunistic, comprising offenders who had completed their orders and whose equipment was being decommissioned on days when the researchers were available and could travel to them. It was skewed towards compliant offenders as those whose orders were revoked were not interviewed. A large number of offenders who were approached declined to participate, further limiting generalisability.

Nonetheless, the study bears examination as it measures reoffending through self-report rather than official records. Hucklesby (2008) found that just under half (46 per cent) of her interviewees claimed that the curfew order resulted in a reduction in offending. Their explanations centred on the risks associated with daytime offending which they were not prepared to take and the fear of being sent to prison in the event that they breached the terms of their order. The remaining 54 per cent claimed that the tag had no effect on their criminal activities. There was some displacement in terms of the type or timing of the offending, but the overall frequency was unaffected. There was no follow-up, so it is not possible to say if these results persisted.

Additionally, the orders were found to "... facilitate habit breaking and disconnection from criminal networks" (p. 66) by giving those subject to them the opportunity to reduce their substance misuse and keeping them off the streets and away from criminal peers at crime-prone times. There were adverse implications for finding, and keeping, employment and the impact on domestic and family relationships was mixed. This was hardly a ringing endorsement of the use of electronically monitored home detention, and the findings are difficult to interpret given the biases in the sample, but it seems reasonable to agree with the author's conclusion that: "For at least some offenders, curfew orders have the capacity to facilitate desistance during the time the curfew order is active" (p. 67). In other words, they may offer limited benefits to offenders who are inclined towards desistance and need support to break criminal habits.

#### General

Hollin et al. (2008) evaluated three general offending behaviour programmes for adult males administered by probation services in England and Wales. These were Reasoning and Rehabilitation, Enhanced Thinking Skills, and Think First. All three are based on cognitive behavioural principles and were developed to national accreditation standards. Using a quasi-experimental design Hollin et al. (2008) found no difference in the reconviction rates of offenders allocated to one of the programmes during 2002 (n=2,186; reconviction rate 66.6 per cent) and a comparison group (n=2,749; reconviction rate 64.8 per cent) who had not been ordered by the court to take part in a programme. The follow-up period ranged from six months to four years.

There was considerable variation in the extent to which those who had been allocated to a programme actually completed it. Overall, around one in four completed, one in four started but did not finish, and half did not start. Completers tended to be older, lower risk offenders, with fewer previous convictions and they were reconvicted less frequently (39.8 per cent compared with 75.2 per cent for non-completers, 78.0 per cent for non-starters, and 64.8 per cent for the comparison group).

Controlling for age, risk of reconviction score, number of previous convictions, type of offence and length of follow-up the differences between these groups remained statistically significant. Indeed when the adjusted statistics were compiled it was found that completers fared best of all (with the same pattern found across the three programmes), but that even members of the comparison group were reconvicted less frequently than non-completers and non-starters. While caution is required regarding the existence of a 'treatment' effect, we might have more confidence when it comes to discerning a 'completion' effect. These findings remind us of the need to focus on responsivity, namely, "... the interaction between the content and delivery of the program and individual offender characteristics that serves to engage the offender, increase completion, and reduce reoffending" (Hollin et al. 2008: 281).

Pearson et al. (2011) evaluated Citizenship, a programme based on 'what works' principles designed for offenders on probation supervision. The programme was designed to meet the risk level and needs of different offenders and its administration was intended to be engaging and motivating for participants as well as addressing any specific skills deficits they may have had (thereby addressing the RNR principles that underpin effective interventions). Staff delivering the programme were trained in motivational interviewing and prosocial modelling and were made familiar with the community partnership philosophy which was at its core. The programme was fully manualised and an electronic case recording system was set up to monitor programme integrity over time.

All offenders completed an induction module which comprised seven sessions focusing on the reasons for offending, improving problem solving skills, and devising a sentence plan. Some of the lower risk among them proceeded no further than this and were referred to community support agencies as required. Those who progressed further with the programme were directed into as many as five optional modules and / or accredited programmes (e.g., dealing with alcohol and drug misuse, peers and relationships, emotional well-being). A compulsory module (Next Steps) was taken in conclusion and participants retained a copy of the plan developed with their supervising officer. This acted as a reminder of progress to date and included a list of relevant support services that could be accessed, as required, once the period of court-ordered supervision had ended. Throughout the programme, participants were encouraged to make contact with local bodies that could support their rehabilitation and risk management (e.g., services dealing with accommodation, financial planning, employment, education and training, drug and alcohol misuse, and mental health).

A cohort of offenders in one UK probation area (Durham), where Citizenship had been introduced for all probationers comprised the experimental group (n=3,819). Participants were aged at least 18 and had been sentenced to community rehabilitation orders or released from prison on license between 1 August 2005 and 1 August 2007. They were predominantly male (84 per cent) and white (99 per cent; in line with the racial profile of the area). The comparison group was a retrospective cohort in the same area who received regular probation supervision (n=2,110) between 1 April 2004 and 1 April 2005, prior to the introduction of Citizenship.

Controlling for known risk factors (including gender, age at first conviction, and number of previous convictions) there was a 31 per cent reduction in reconviction in the experimental group over a two-year follow-up. In addition to there being fewer convictions the time to conviction was longer. (The national rate of reconviction had declined over this period, but the rate of decline was steeper in Durham.) So too were there fewer breaches of supervision conditions in the group that participated in Citizenship.

The data were analysed on the basis of 'intention to treat' with no distinction made between those who completed the programme and those who dropped out, and no allowances made (statistically), for the number of modules taken. According to Pearson et al. (2011): "This avoided the possibility of differences in motivation to cooperate with supervision which could have occurred in a 'treatment received' analysis" (p. 87). The promotion of contact with community support agencies, which was integral to Citizenship, was significantly related to a reduction in reoffending. The programme was least effective with the highest risk group (contrary to what would be expected based on the 'what works' principles). The authors felt that this may have been because the focus of probation supervision for the high-risk group was tilted towards control and public protection as opposed to rehabilitation and reintegration. Pearson et al. (2011) found that in addition to reducing recidivism, Citizenship was cost-effective.

#### 3.5 Practitioners

Raynor et al. (2014) put the focus on the practitioners who are responsible for delivering treatment programmes. This was an unusual and interesting study of the skills deployed by probation staff during one-to-one supervision. The raw material consisted of 95 video-recorded interviews of probation officers offering supervision in the Channel Island of Jersey. The aim of the study was to catalogue the skills shown by probation staff and to relate these to offender outcomes. Each interview was scored on a 63-item checklist comprising nine clusters of skills. The clusters were grouped into 'relationship' skills (e.g., demonstrating respect, understanding and a positive attitude) and 'structuring' skills (directed at changing how the supervisee thinks or behaves). Overall, the staff scored more highly in relationship skills, perhaps reflecting their training as social workers, and there was considerable variation in the skills used.

The conclusion was unequivocal: reconviction rates after two years were significantly lower for those whose supervisors received higher skills ratings (31 per cent vs 53 per cent). This understates the size of the effect as the risk scores of supervisees dealt with by the more highly skilled probation officers tended to be higher at the outset. The authors commented that: "The difference in reconviction outcomes is marked, and greater than many treatment effects reported for programmes" (p. 241).

The probation service in Jersey is small (a professional staff of 21 of whom 16 were trained probation officers), not all staff volunteered for the study, and the recorded interviews were not a random sample of supervision meetings. Nevertheless, and taking account of these shortcomings, the authors averred that, "... our results from this study support the belief that skills matter in probation work: when practice is more skilful, reconvictions are reduced" (p. 245).

## 3.6 Meta-analysis

Redondo et al. (1999) conducted a meta-analysis of 32 European studies that evaluated recidivism during an average follow-up period of two years. These studies involved children and adults, were predicated on a variety of theoretical models (cognitive-behavioural, deterrence, diversion, educational, therapeutic community), and took place in custodial as well as community settings in Germany, Britain, Spain, Sweden and the Netherlands. Recidivism was defined variously as parole or probation revocation, self-reported offending, arrest, reconviction and reimprisonment. The total sample across the studies was 5,715 and the researchers found an overall effect size equivalent to a 12 per cent reduction in recidivism.

Comparing the different treatment models, they found that behavioural and cognitive-behavioural approaches were the most beneficial and that those based on deterrence were counterproductive, leading to an increase in recidivism. The most effective programmes were those delivered in correctional institutions to young people. Although somewhat dated, this study gives cause for optimism that the right kinds of programmes, faithfully delivered in appropriate contexts, can have the desired results.

More recently, Joy Tong and Farrington (2006) carried out a meta-analysis of sixteen evaluations of the effectiveness of the Reasoning and Rehabilitation (R&R) programme in which experimental and control groups were compared. These were conducted in four countries (Canada, US, UK and Sweden). The programme is cognitive behavioural in orientation and addresses deficits in self-control, critical reasoning, cognitive style, interpersonal problem-solving, social perspective-taking, empathy, values and meta-cognition. It challenges egocentric thinking as well as promoting perspective taking and reasoning skills. The theory is that the acquisition of these attributes will better equip the individual to make prosocial decisions and to withstand pressures towards criminal behaviour. The programme has nine components: problem solving, social skills, negotiation skills, management of emotions, creative thinking, values enhancement, critical reasoning, skills in review and cognitive exercises. It is delivered in 36 two-hour group sessions at a rate of two to four sessions per week.

Pooling the results of all the studies they collected, Joy Tong and Farrington (2006) found an overall decrease in recidivism (rearrest or reconviction) of 14 per cent for programme participants compared with controls. The R&R programme was effective for low-risk and high-risk offenders, and when delivered in custodial or community settings, and regardless of whether or not participants were volunteers. It achieved statistically significant results in the US, UK and Canada where it has been extensively evaluated. The authors concluded: "Overall, the R&R programme seems to be an effective intervention ... in both institutional and community settings" (p.19). They noted that it was more effective for low-risk than high-risk offenders which was of interest since it

was designed with the latter category in mind. They also noted that, although developed in Canada, it had a significant impact when implemented in the UK. The strength of meta-analysis is that it can amalgamate the results of numerous studies, of varying sizes, and come to an accurate estimate of effect size. The results of Joy Tong and Farrington's meta-analysis are encouraging.

Walton and Chou (2015) searched for studies of the effectiveness of psychological treatment for child molesters. Ten studies met their inclusion criteria providing over 2,000 participants, around half of whom had received an intervention of one kind or another. Treatment duration ranged from two months to two years and the average follow-up period was around eight years. The rate of recidivism (defined as a new conviction for a sexual offence or a breach of licence or supervision conditions) for treated offenders was lower than for those who received no treatment (13.9 per cent vs 18.6 per cent), but only three studies reported a statistically significant reduction and the findings of the various studies were too conflicting for the authors to arrive at any overall conclusions around treatment effectiveness. Significant caveats were attached to the systematic review as – despite stringent inclusion criteria – most of the studies reviewed were "... coded as weak, indicating that the results derived from substandard designs [were] further compromised by inadequate levels of methodological rigor" (p. 408).

The design flaws included "... a priori group differences, lack of matching using actuarial risk prediction instruments, miscellaneous incidental factors, program attrition, small samples, and nonextensive follow-up periods" (p. 411). Identifying treatment effects is especially difficult for offenders with a low base level of reoffending and this means that weak study designs are intensely problematic. Walton and Chou (2015) concluded that, despite the enthusiastic support of policy makers and practitioners for sex offender treatment programmes: "... these results suggest that the effectiveness of treatment for child molesters remains to be consistently demonstrated" (p. 411).

Koehler et al. (2014) carried out a systematic review of treatment programmes for drug abusing offenders in Europe. A search of more than 37,000 potentially relevant titles (relating to over 30,000 discrete studies) generated 13 studies comprising 15 evaluations that satisfied their eligibility criteria. To be included, an evaluation needed to be designed with equivalent treatment and control groups, regardless of how allocation to the groups was made (e.g., randomisation, propensity score matching). It could be written in any European language and be published or unpublished.

The evaluations involved almost 4,000 participants from six countries. Eight of the 15 had been carried out in the UK. Twelve involved substitution-based therapies, which primarily address the effects of physical dependence rather than any underlying causal factors (whether social or psychological), and the remaining three examined the effectiveness of drug testing orders. In reality most of the interventions offered a mixture of psychosocial support, supervision, testing and

substitution with the primary focus being a matter of degree. The typical follow-up period was 12 months. The treatment as usual condition was often methadone maintenance, which is the conventional approach across Europe for opiate-dependent populations, with the experimental group receiving, for example, prescribed heroin or naltrexone implants.

While the sample was narrow (regionally and in terms of treatment modality), and the follow-up period was short, the findings were significant, with treatment reducing (officially recorded) recidivism by an estimated 37 per cent as well as (self-reported) illicit drug use. Treatments with a primary focus on pharmacological substitution were more effective than those with a primary focus on drug testing. Lower attrition rates in treatment were associated with less recidivism. Physical health status was not always reported but, where it was, the indications were that treatment led to improvements in this domain as well.

Koehler et al. (2014) came to a clear assessment of the state of play in the field:

Overall, the positive results observed in our meta-analysis reaffirm the wisdom of a public health-based harm-minimisation approach to treating substance-abusing offenders ... Attempts to reduce the physical and social harms associated with drug abuse without necessarily reducing the quantity of drugs consumed can achieve successful outcomes on crime ... Positive effects can also be expected on various health indicators and other types of illicit drug consumption, although these results are somewhat less conclusive. (p. 598)

Marsh and Fox (2008) analysed the economic efficacy of imprisonment as well as its relative impact on recidivism. They concluded that custodial alternatives (e.g., residential drug treatment), or enhanced prison sentences (e.g., those for sex offenders that incorporated treatment programmes), resulted in significant financial savings in terms of avoided costs of future crime. This was a small study, based largely on US data, and the authors were cautious about reading too much into their findings given the acknowledged limitations of their approach (e.g., not being able to address the likelihood that those who received a non-custodial disposal were less likely to reoffend and the assumption, for statistical purposes, that any reduction in offending identified in the short term will persist indefinitely). Nonetheless, if the findings are viewed in conjunction with the possibly criminogenic effects of imprisonment we are led back to the well-known observation in a UK white paper in 1990 that prison is "... an expensive way of making bad people worse".

# 4. LESSONS

National criminal justice arrangements vary considerably, and it is important to be realistic about the likelihood that an intervention found to bear fruit in one jurisdiction will be successfully transplanted to another. Any conclusions must be sensitive to context and appropriately cautious. In addition, findings are always out of date by the time they are published in a peer-reviewed journal. Sometimes the lag is considerable and, in the interim, the legislative and policy environment may have changed considerably. In other words, we must be sensitive to time as well as place.

There are challenges extrapolating from countries where the data are more reliable, the linkages across agencies are better, the system has different priorities, and the administration of justice is organised in a way that has no obvious parallel in Ireland. Differences in programme type and mode of delivery, together with the use of a variety of outcome measures, make it difficult to arrive with confidence at conclusions about efficacy. This frustrates our ability to come to easy conclusions regarding the relative impact of treatment (however defined) on recidivism (however measured). Given these many caveats we must be circumspect about extrapolating from any one study to the offending population more generally.

As a result, before setting out the elements of a high-quality piece of empirical research that might conceivably be fielded in Ireland, it is necessary to review some of the broader issues around research design and the interpretation of results.

### 4.1 Some concerns about measurement

Matthews and Pitts (1998) offered a useful reminder of the limitations of the various measures of recidivism, beginning with rearrest, which "... may be more a function of the police's preoccupation with rounding up known suspects than it has to do with the actual level of offending" (p. 398). Reconviction data will exclude those who have avoided capture and successful prosecution. Reimprisonment rates may seem to focus on the most serious cases, but what if the offence for which the individual is reimprisoned is less serious than their previous offending, but the existence of a prison record makes reincarceration more likely?

They also cautioned that research focusing on self-reported offending must accept the strong likelihood that participants will not be entirely forthcoming about their behaviour for fear of potential legal consequences. It will require an unusual level of trust on the part of offenders (and, although, Matthews and Pitts (1998) do not mention it, an unusual level of latitude on the part of ethics

committees) to generate the conditions where honesty will prevail when it comes to gathering data about criminal behaviour that met with no official response.

"In short", they concluded, "recidivism is an unreliable measure of program effectiveness and, although the public and policy makers may have an interest in evaluating programs in terms of their impact on reoffending, recidivism in its various guises rarely presents an accurate picture and is often too far removed from the specific intervention itself to have direct relevance" (p. 399). Recidivism studies always result in underestimates of the extent of the problem because of the magnitude of the dark figure.

Recidivism is only one outcome of a process that demands many changes of offenders; the pathway to desistance from crime is often a zigzag one. Static, or even escalating, recidivism may conceal a reduction in crime seriousness. If it is used as a binary measure, 'failure' may conceal a decline in the frequency of offending or improvements in psychological and social functioning. <sup>12</sup> It may be an indicator of success if the time to reoffending is delayed; extending the interval between offences is to everyone's benefit, although this will not be captured if the presence or absence of recidivism is the sole criterion of success. Additionally, the measure is problematic because it embraces not only individual offending, but the decision making of the criminal justice system and its processing biases. A multidimensional measure of reintegration would be preferable, one that incorporated adjustment on a variety of scales, of which reoffending was important, but not the beall and end-all.

Numbers tend to be small, meaning that the statistical power of the studies conducted in this area is often poor. Bowen et al. (2005: 203) suggested that a sample of around 200 was required for programme evaluation that is not excessively vulnerable to a Type II error (failing to reject a false null hypothesis; that is, saying there is no difference when one exists).<sup>13</sup>

Self-report studies are costly to conduct, especially if nationally representative samples are sought, and it is more efficient to use whatever administrative data may be available. But data quality is not always adequate, especially when it comes to dynamic risk factors; such information may not be routinely requested or it may not be accurately divulged (e.g., patterns of substance misuse).

Jolliffe et al. (2013) commented that because overall recidivism rates are high, especially when the follow-up period is extended, a ceiling effect can come into play: "If most offenders commit another offense, there may not be sufficient variation in the percentage reoffending to appropriately

<sup>&</sup>lt;sup>12</sup> If the outcome measure is a dichotomous variable this has implications for the kinds of statistical testing that can be carried out (i.e., chi-square tests in univariate analyses and logistic regression in multivariate analysis).

<sup>&</sup>lt;sup>13</sup> Asscher et al. (2014: 239) suggested a minimum of 250 in both treatment and control groups. Whatever the precise number the point is that large samples are required if meaningful small effects are to be identified.

assess the impact of the intervention" (p. 519). In other words – while routinely used – a binary outcome measure is unlikely to be a satisfactory metric for programme evaluation. Furthermore, it tells us only about the first new arrest / conviction / sanction. Time to first offence is a more sensitive measure but, again, it only provides information about a single event. To properly gauge treatment impact requires account to be taken of the frequency of reoffending and whether there is an escalation (or de-escalation) over time. Jolliffe et al. (2013) did this and estimated the financial cost savings associated with the programme under evaluation; this is a good model for future work.

Sometimes it is important to limit the focus to criminal conduct of a particular kind. For example, do sex offenders continue to commit sex offences? This will almost certainly result in underestimation of the overall rate of recidivism. Also, it may be necessary to limit the focus to criminality and to omit convictions and sanctions that result from breaches of licence conditions or supervisory arrangements. This will likely result in undercounting.

These choices matter. For example, if one study defined recidivism as reimprisonment for a sexual offence within two years, the results would be very different from another study that looked at reconviction for any matter (including violations of supervision conditions) over the same period. Greater disparities would emerge if the duration of follow-up were extended or the definition of recidivism was broadened to include rearrest. Further complications are introduced by the fact that sex offenders are a mixed group and reoffending trajectories will differ for elderly perpetrators of incest who have been apprehended for the first time compared with serial rapists of strangers.

Follow-up periods will have to be longer for sex offenders. As Cann et al. (2004) showed, even five years was insufficient to pick up further offending by this group because it took considerably longer for their offending to tail off. On balance, ten years seems like an acceptable boundary. While some reoffending occurred beyond this point the rate had slowed down considerably and a longer supervisory period would probably be time, and cost, prohibitive. For other offender groups the evidence suggests that a two-year cut-off is appropriate.

There is a choice to be made between standardising the follow-up period (say at two years, by which time the majority of those who are likely to reoffend will have done so; with the exception of sex offenders) and a more open-ended approach. A range of observation periods allows better exploitation of the available data through survival analysis.

Given their low base rate of recorded reoffending, a more flexible outcome measure may be appropriate for sex offenders, perhaps incorporating police intelligence and other soft information. Craissati et al. (2011) used a wider definition of 'sexually risky behaviours' and Falshaw et al. (2003) included 'any offence-related sexual behaviour'. Both strategies significantly boosted the rate of recidivism. It is possible that the use of a more flexible outcome measure would indicate

that treatment programmes have a more promising / variegated effect than studies limited to reconviction or reimprisonment. This approach relies for its success on open channels of communication between all of the agencies that play a role in offender management.

#### 4.2 Some concerns about method

The major advantage of the RCT is that it controls for unknown as well as known variables. This means that any observed differences can be attributed, with confidence, to the intervention, which is the only thing that distinguishes between the groups. However, random allocation is seldom possible in criminal justice research for practical (resource intensive) and ethical (denial of treatment) reasons. The ethical objections are usually – but not always (e.g., Killias et al. 2010) – insuperable; it is difficult to justify the loss of liberty based on the toss of a coin. As a result, treatment and comparison groups are rarely equivalent. This means that observed differences in outcomes may be due to prior differences between the groups rather than the intervention per se.

Walton and Chou (2015) observed that: "Although withholding treatment from offenders in order to implement RCTs may be viewed as a threat to public safety by some ... it may be proportionally unethical to apply treatment whose effects are yet to be consistently demonstrated" (p. 412). Further complicating the picture is the fact that some treatments may have a null effect or even be harmful, placing the public at enhanced risk. In such cases random allocation to a control group has no adverse implications for public safety. One possible way ahead is to allocate offenders to different types of treatment rather than treatment versus no treatment.

A comparison group is vitally important to take account of maturation. Most people grow out of crime, so the long-term trend is likely to be downward. A well-designed study takes account of this and isolates the effect that can be attributed to the intervention in question: does it accelerate a downward trajectory? Just using pre-test and post-test measures without a comparison group neglects this important aspect of any analysis. Treatment, in other words, must offer an improvement on the 'natural' process of desistance.

Some of the factors known to be associated with reconviction (e.g., age of onset of offending behaviour, number of previous convictions, age) can be controlled for, but unmeasured differences such as motivation to change, which may be highly significant, are difficult to build into statistical models. In order to properly interpret the results of evaluative studies it is critically important to minimise selection bias. Unobserved variables can influence decision making (e.g., are judges more likely to award community service than prison to sober offenders with strong family ties?) and this means that we must be careful about causal inferences.

Very few studies have been carried out with a sufficient degree of scientific rigour, especially in Europe. In a systematic review of drug treatment programmes, Koehler et al. (2014) found 15 good quality European studies among over 37,000 titles searched and most of these had been carried out in the UK. This limits the scope for meaningful meta-analysis.

Matching in quasi-experimental studies can be done retrospectively or prospectively. Friendship et al. (2002) set out the key differences, and relative strengths, of these approaches in the following terms:

Retrospective: "... the theoretically relevant variables are controlled for after the intervention. The major disadvantage of retrospective matching is that it is often only possible to match on a small subset of extraneous variables, this mainly being due to the lack of recorded variables for the comparison group. Differences in outcome could be attributed to the success of the intervention when in fact extraneous variables may be responsible." (p. 443)

*Prospective*: "...attempts to control for extraneous variables in advance of the proposed intervention. Prospective matching has several advantages over the retrospective method: researchers can potentially be more aware of the variables that may be important for comparison group matching, there is more opportunity to record a wider subset of those variables, and a prospective design allows researchers to collect similar data for both intervention and comparison groups." (p. 443)

It is impossibly ambitious to hope to match on every conceivably relevant variable. Even the most sophisticated matching process can only take account of known covariates about which data has been collected; there is always a possibility of hidden bias. The approach taken by Wermink et al. (2010) is an example of how this can be minimised: careful matching by key variables, followed by propensity matching (this controls for possible selection effects), followed by the Rosenbaum bounds method to test for hidden bias (this deals with the impact of unobserved variables). This is a strong model and it shows how far evaluators can go without an RCT.

De Vries et al. (2018) reported that, "... work on the association between research design and study outcomes in the field of criminal justice revealed that studies that adopted a more robust (i.e., stricter) research design generally reported weaker or no effects" (p. 3652). This may have been true of the De Vries et al. (2018) study but, if it is more generally applicable, what does such a conclusion mean for recidivism research? The danger is that if scientifically rigorous studies are eschewed on the basis that they are too costly, too methodologically fraught, and potentially problematic from an ethical standpoint, then our conclusions will be based on weaker designs which are more likely to show positive results. This could lead us to be disproportionately positive

about treatment effects. Relatedly, it is possible that there is a bias towards the publication of studies showing large effects, thereby exaggerating the effectiveness of interventions.

In Scandinavian countries residents are issued with a unique identification number which allows records to be linked easily and effectively. This permits researchers to explore possible relationships between criminal justice data and various indices of health, education, employment, income, social welfare and mortality (see, for example, Larden et al. (2018) on Sweden, Klement (2015) on Denmark, and Skardhamar and Telle (2012) on Norway). Such data linkages cannot be made in Ireland.

In the absence of a unique identifier for every resident, it is crucial that criminal justice agencies collect reliable and valid data that can be connected across the system, subject of course to data protection and ethical requirements. Unfortunately, there is little confidence in the quality of the crime figures in Ireland which for some time have been published 'under reservation' by the Central Statistics Office. This means that there are obstacles to be overcome before research based on administrative data alone can reach a satisfactory quality threshold.

These are not the only methodological concerns. How can we rule out the possibility that an individual was treated on a previous occasion? Or that their prior history of contact with the criminal justice system is impacting on their response at the time of the study? These are relevant considerations, sometimes taken into account by controlling for prior convictions, age at first conviction and so on. But a more promising approach is that taken by Wermink et al. (2010) who excluded anyone with prior experience of imprisonment or community service so that their examination of the relative efficacy of these sanctions was not contaminated by prior exposure. Such a sophisticated research design was possible in the Netherlands where record keeping is centralised and meticulous and may not be feasible in Ireland.

# 4.3 Some concerns about interpretation

The first step in the interrogation of research findings is to investigate whether an intervention has had a discernible effect. When considering effects, it is important to be alert to whether authors are reporting a difference in terms of percentage points, or relatively. For example, if the rate for one group is 10 per cent and the other is eight per cent, this could be expressed as two per cent (absolute) or 20 per cent (relative). A seemingly impressive relative reduction may, in reality, represent a modest enough change.

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<sup>&</sup>lt;sup>14</sup> This categorisation indicates that the quality of these data does not meet the standards required of official statistics published by the CSO.

Statistical significance is essential to demonstrate that a pattern of results is not random, but it may coexist with relatively trivial improvements at the level of individual functioning. Furthermore, significant change at the group level does not imply significant change for each member of the group; where some have progressed others may have regressed or remained static. This is why it is important, if at all possible, to measure change at an individual level although it must be recognised that there are substantial practical obstacles to overcome in terms of identifying reliable and valid clinical indicators.

The second step is to assess whether the achieved effect – even if statistically significant – is of sufficient clinical or practical merit to be worth pursuing. There are several components to such an assessment, including budgetary implications: could the same result be obtained by placing a lighter burden on taxpayers? Opportunity costs must be taken into consideration: could the staff working on the programme have done more if deployed elsewhere? It is difficult to put a financial value on crimes prevented or deferred, and on personal and social benefits. So too the direct costs to victims and the criminal justice system are not easy to estimate, but this can be done (e.g., Jolliffe et al. (2013), Marsh and Fox (2008), Pearson et al. (2011)).

Gender differences need to be borne in mind. What works for men may need to be refined for women (e.g., McGuire et al., (2008) found that the Enhanced Thinking Skills and Think First programmes were effective with male probationers while Palmer et al. (2015) found no effects for their female peers). Similarly, what works with adults may not work with children. Other issues may arise for offender populations that are diverse in terms of race and ethnicity. All of the foregoing has implications for generalisability. Palmer et al. (2015) commented on the gender dimension of recidivism research:

... interventions need to take account of potential barriers to engagement, which for women may include coming to terms with and understanding the effects of abuse histories and ongoing mental health and substance use problems ... More generally for the responsivity principle, there is evidence from education research showing that men and women may have different learning styles, with women responding better to empathy, collaboration, and listening ... Programs designed for men are not grounded in these principles, meaning there is also a mismatch between delivery and learning styles for women. (pp. 355-56)

Some offence types are very heterogeneous. For example, sex offending includes child grooming and molestation, rape of strangers, exhibitionism and non-contact offences (e.g., possession of child abuse images). The causal pathways are very different, and this means that generic treatment programmes may not address the needs of a particular subgroup with sufficient precision. Evaluation is particularly fraught on account of low base rates of offending (necessitating long follow-up periods) and the ethical problems of withholding treatment to satisfy the demands

of an RCT. If the reconviction rate is already low, a further reduction might be so small that it would be difficult to attribute it to the programme rather than to some chance effect. This means that finding a statistically significant relationship would be difficult in the absence of a large sample, which is unlikely to be found in research of this kind.

Asscher et al. (2014) reminded us of the need to pay attention to the biographies of evaluators, in particular that, "... effects of criminal justice interventions are likely to be larger when program developers are conducting the study" (p. 238). There are two possible explanations for this. The first, and more benign of them, is that this is "... caused by better focus on program fidelity and treatment integrity by program developers" (p. 238). The second is, quite simply, that the inherent conflict of interest inclines evaluators towards the most positive interpretations. Either way, caution is required when interpreting results. So too when an evaluation is commissioned by an agency that has a vested interest in its success.

## 4.4 Some concerns about scope

It would be a lot to expect that any programme, however well-designed, well-intentioned and well-implemented could trump the practical challenges associated with returning to an environment characterised by unstable housing, negligible employment prospects, poor family and community ties, and antisocial peers. If substance misuse is added to the mix it seems clear that even offenders who have been taught to think differently will find the odds are heavily stacked against them.

Quite simply, it is unrealistic to think that years and even decades of socialisation will be reversed by a programme delivered over a number of weeks or months in a criminal justice setting. In other words, evaluations that focus on a single metric as crude as recidivism (however defined) are inherently limited. There is no denying that treatment programmes may offer a hook for those who are ready to change, but for young people who find a life of crime exciting and rewarding – or whose lives are chaotic and lived under the burden of multiple layers of disadvantage – it is unlikely that any short-term intervention that does not take account of external circumstances will have a radically transformative effect. Modifying an offender's cognitive style is of little value if he or she cannot find work or accommodation and continues to struggle with addiction and social isolation.

Care is required not to personalise the causes of crime without taking account of the wider social and economic context. Employment, housing, financial status and family ties all play a role even when cognitive distortions have been eliminated and problem-solving skills are improved. The real world is messy and unpredictable, but if ways can be found to give offenders a stake in conformity, by strengthening community connections such that reoffending becomes an unattractive option,

progress may be sustained. This takes time, a willingness to accommodate reversals, and openness to the possibility of change, even in the most apparently recalcitrant individuals.

## 4.5 Some concerns about non-completion

The research reviewed for this report highlighted the need to distinguish between programme completers, non-completers, and non-starters; collapsing these groups might mean that important effects are missed (Hollin et al. 2008). A per-protocol analysis can lead to bias as it is likely to contain a disproportionate number of the most motivated offenders. A good study should report the outcomes both of intention to treat and per-protocol analyses; evaluators cannot simply omit those who drop out of programmes.

Attrition is a problem that needs to be taken very seriously, especially as non-completers sometimes do worse than comparison groups that receive no treatment (e.g., Palmer et al., 2007; Palmer et al. 2012). If non-completers are more likely to reoffend and are omitted this creates a selection bias, independent of any treatment effect, which increases the chances of finding a lower level of recidivism. Strenuous efforts are required to ensure that all participants move as far through the programme as possible, ideally to a conclusion. This is in the interests of facilitating meaningful evaluation and protecting the public. Beech et al. (2012) took this one stage further by examining the quality of engagement with treatment and relating recidivism not just to programme completion, but to a judgement as to whether or not the participant was responsive to what was on offer.

In a meta-analysis of the literature relating to treatment non-completion in cognitive-behavioural interventions, McMurran and Theodosi (2007) found higher levels of recidivism among those who dropped out. This may be because non-completers share characteristics with those who are prone to recidivism in that they are younger, have higher risk profiles, more convictions and fewer community ties. However, it is also possible that non-completion itself is detrimental with respect to future offending. To disentangle these factors necessitates comparing those who were selected for treatment but did not receive it with a matched group who entered treatment but exited prematurely. If the latter group reoffends more frequently this suggests that they were disadvantaged by the programme. McMurran and Theodosi (2007) made these groups – i.e., non-completers and the untreated – the focus of their study. One of their inclusion criteria was that untreated groups were not of lower risk than those entering treatment. They located 16 studies reporting data on 17 samples comprising almost 20,000 individuals. Of those allocated to treatment almost one in four did not complete. The proportion of non-completers was three times higher in the community samples than in the institutional samples (45 per cent vs 15 per cent).

McMurran and Theodosi (2007) found that when untreated controls and non-completers were compared there was a negative effect overall "... meaning that non-completers are more likely to

be reconvicted than untreated offenders" (p. 340). The effect was more marked when the intervention was being delivered in a community setting than in a prison. While samples were not always directly comparable ("... baseline differences in risk between the groups cannot be ruled out" (p. 341)) and non-completers were a heterogeneous group, the authors concluded that, "... non-completers may actually be disadvantaged by treatment ... the effect is more pronounced for those treated in the community" (p. 340). This was explained in the following terms: "It may be that there is an interaction effect, where high-risk offenders who do complete treatment are improved, and those who do not complete treatment are actually made worse" (p. 341). There is no doubt that running programmes participants do not complete is economically disadvantageous. But it is perhaps a matter of greater concern if it is criminogenic.

It is not entirely clear why non-completion has adverse consequences. McMurran and Theodosi (2007) suggested several possibilities. First, removal from a programme may reinforce an anti-authority disposition. Secondly, important issues may have been raised for the offender, but because the programme was interrupted, he or she may not yet have acquired the skills required to address them. Thirdly, individuals may feel confused, excluded and worthless; a further erosion of confidence in a group where this quality is often lacking.

Perhaps those who drop out are less motivated to change? Perhaps the programme is not sufficiently responsive to their needs? Perhaps the fact of non-completion is itself damaging; another example of failure in a life where there may have been few triumphs? Attrition may be greater for women. Palmer et al. (2015) reported how childcare commitments could interfere with (and trump) attendance; provision of on-site childcare would help in this regard. The relationships between participation, attrition and change need to be teased out more fully.

What is necessary is careful selection of programme participants followed by extra support for those who are struggling and specialist referral where required. Also necessary is a wider margin of tolerance so that people are not expelled from programmes for displaying a variant of the problematic behaviour that led to their enrolment on the programme in the first place. In some cases, a pragmatic approach may be more beneficial in the long term than one based on strict and unwavering rule enforcement.

The careful selection of practitioners may also bolster completion rates. As Raynor et al. (2014) demonstrated, there was a correlation between practitioners with wide-ranging skills and a reduced level of recidivism. Those who deliver treatment programmes play an important role in the success or otherwise of their clients and analyses should not be limited to the client group. Just as it might be too optimistic to expect a short cognitive behavioural intervention to negate a lifetime of adversity and a return to instability and criminal peers, so too might it be unfair to castigate

offenders who have completed a treatment programme for their future behaviour if they have been let down by a skills deficit on the part of the professionals responsible for programme delivery.

The non-completion effect seems quite robust and leads to the conclusion that it may be better not to start a programme if completion is unlikely. Sometimes it might be preferable to do nothing than to implement a programme badly (e.g., van der Put et al. (2012) found that those given aggression replacement training were more likely to reoffend violently).

Nonsignificant results might imply a failure of theory (we need to rethink the underlying model) or a failure of implementation (e.g., variations in practice). The former seems unlikely given the substantial amount of scientific evidence in favour. However, the treatment 'dosage' may simply be too low in many programmes, with more sessions being required to trigger the desired cognitive, attitudinal and behavioural changes. The latter is a strong possibility and strenuous efforts are required around allocation to programmes, consistent delivery by suitably trained professionals, and attrition reduction. Drop out may be explained by organisational ineffectiveness as well as a lack of individual motivation. It may also be related to participant literacy and ability to cope with programme demands.

## 4.6 A comment on programme integrity

When interventions are being delivered it is essential that they are properly targeted and satisfy the demands of programme integrity. Are they implemented as intended based on aspects such as exposure (frequency and duration of meetings), adherence (meetings conducted as prescribed), responsiveness of participants (in terms of meaningful engagement) and quality of delivery (are trainers deviating from the manual)? Integrity is seldom measured in a satisfactory fashion but, when it is, programmes are generally found to fall short (e.g., Helmond et al. 2015) and this makes it difficult to assess their contribution to future behaviour.

Sometimes proxies for integrity are used. These include the presence of a training manual, monitoring of the process, and dosage. Rarely is a specific set of measures designed in advance and measured from the outset (see Helmond et al. (2015: 336-7) for an example of how to approach the assessment of programme integrity). Has a clear theory of change been articulated prior to programme implementation and returned to during programme evaluation? Has there been fidelity to the programme? Are researchers 'blind' when handling data? Effective programmes usually consist of multiple elements and further work is necessary to identify which among them has the greatest impact in terms of reducing recidivism.

Maintaining integrity is by no means a straightforward task in the world of criminal justice where adjustments are often necessary to cope with the chaotic lives of programme participants and

where there is a trade-off between keeping participants on board and delivering a programme without deviation from the agreed protocols. Meetings can be cancelled or finished ahead of schedule. Participants can be uncommunicative or sullen. Staff can be absent or substituted or unprepared. Without such trade-offs, delivery will be compromised. But with them programme integrity will be weakened and evaluation will be fraught. Quite simply, how can we attribute observed change to a programme if we cannot be sure that the programme was administered as intended?

Even on those rare occasions where there is random allocation to experimental and control groups, there is no guarantee of treatment integrity and this is why there are so few meaningful findings in this area. There are resource implications when integrity is assessed by independent observers rather than the trainers themselves and there are interpretive challenges when it is considered in a multifaceted way. This is not to argue that rigorous assessment is too inherently problematic to be pursued, but rather that programme integrity must be taken seriously and measured independently *before* outcome measures are known. This shuts down the argument that negative outcomes can be attributed to staff not delivering the programme properly and helps close the gap between intention and implementation.

The rise in recidivism is steepest in the early months and then plateaus. Most of those who will reoffend will do so during the first two years. In a review of youth justice arrangements in Scotland McAra and McVie (2007) concluded that "... the key to tackling serious and persistent offending lies in minimal intervention and maximum diversion" (p. 319). Re-entry programmes do not need to be of indefinite duration; if they focus on the immediate post-release period, they will achieve a great deal. An exception is sex offenders for whom reoffending is often deferred for some time; this group is riskier for longer. The key message here is to intervene early.

Prisoners in the Netherlands who viewed their treatment as fair were less likely to be reconvicted (Beijersbergen et al. 2016). Static risk factors are not amenable to change, and the modification of dynamic factors is largely a matter for the individual concerned. However, the way that a prisoner is treated is something that can be influenced by shifts in policy and practice. The evidence suggests that prisoners behave better when they feel that they are being listened to; treated respectfully and courteously; given an opportunity to state their view; and subjected to equitable rule enforcement. If this improved behaviour continues in the community it is to everyone's benefit. While the effect of procedural justice is small it is worth pursuing given the correlation between fair treatment in prison and law-abiding behaviour post-release. This is something that criminal justice policy and practice can – and should – address.

## 4.7 Next steps

It is unlikely that there will ever be a 'definitive' study of recidivism that answers every pertinent question, without qualification. The imperative is to keep thinking about what questions to pose and how best to answer them, to proceed cautiously, building the knowledge base incrementally, understanding the challenges that beset interpretation and generalisability, and only offering careful, focused conclusions that are always open to revision. Given that we have done so little for so long in terms of researching the Irish criminal justice system, it is necessary to recognise that any advances will be modest. The first step is identifying the best questions to ask and then formulating them in a way that renders them amenable to research.

The conclusions summarised in Table 4.1 are based on a literature review carried out within tight temporal and financial parameters. However, they are sufficiently promising to merit further probing by way of a multi-annual empirical research project with an appropriate budget. None require legislative change or have major budgetary implications. All satisfy the prerequisites that they be plausible, doable, testable and transferable (following the scheme referred to in the introduction to this report).

#### Table 4.1

#### Designing a high-quality recidivism study

- 1. Recruit an adequate sample (at least 200).
- 2. Divide into treatment and comparison groups.
- 3. Compare known risk factors (e.g., age at first offence, prior convictions, risk of reoffending score) across the groups and control for them in the analysis in order to rule out selection effects.
- 4. Follow up for two years and much longer for sex offenders (10 years).
- 5. Use survival analysis to allow for variable time at risk.
- 6. Employ a definition of recidivism that is not too narrow. Clarify whether it includes breaches of supervision orders or licence conditions that do not involve new offences.
- 7. Include outcome measure for dropouts within treatment group.
- 8. Note reason for non-completion. There is a range of possibilities, not all of them negative, including expulsion from programme (e.g., for persistent non-compliance), refusal to continue (e.g., because of practical difficulties accessing venue, employment opportunities, or resistance), or release from prison.
- 9. Estimate what would happen to offenders in absence of treatment. This can be done by using national data to model predicted outcomes.
- 10. Calculate the financial costs and benefits associated with the options being considered.
- 11. Measure treatment integrity in advance.
- 12. Ensure that anyone delivering an intervention is equipped with the requisite skills.

- 13. Appoint evaluators who are independent of programme design and delivery and possess the necessary experience and methodological expertise.
- 14. Test for statistical significance while acknowledging that it may not be a sufficient indicator of success; clinical relevance is important also.
- 15. Be explicit about methodological limitations.
- 16. Be cautious about generalisability.
- 17. Seek to replicate findings.
- 18. Accept that research is cumulative and that a single study will offer, at best, a partial explanation.
- 19. When patterns become clear, take the appropriate action and evaluate its effects.

## 4.8 And finally ...

Sentencing is a matter for the courts and, as such, is not amenable to direct policy interventions. While not for a moment wishing to trespass on the independence of the judiciary, it might be helpful to highlight the lack of support in the papers reviewed for the deterrent value of short prison sentences and the likely (social and financial) benefits associated with a move away from brief bursts of custody as a response to law breaking. If prison is criminogenic, as the evidence suggests, the arguments in favour of using it less are persuasive. While necessary as a last resort, the desirability of a more parsimonious approach is indicated.

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