THE BIG PICTURE

Large-scale studies that combine and evaluate the results of hundreds of smaller studies routinely show that rehabilitative programmes for offenders that are based on psychological and behavioural techniques reduce reoffending\textsuperscript{1,2,3}. Research has also found that such programmes are cost-effective, producing longer-term savings for society both financially, and by reducing the number of victims of crime\textsuperscript{4}.

The success of rehabilitative treatment is directly related to whether or not programmes are evidence-based\textsuperscript{5}. The evidence shows that programmes should follow a number of key principles. The three main principles are called the Risk, Need and Responsivity principles. Studies have found that treatment that does not follow any of these principles may slightly increase reoffending rates\textsuperscript{6}. Programmes that followed all three of these key principles reduced recidivism by an average of 17\% if delivered in custody and 35\% if delivered in the community\textsuperscript{7} (see graph).

apply to female offenders\textsuperscript{9}, young offenders\textsuperscript{10}, and to sexual offenders\textsuperscript{11}

WHAT ARE THE KEY PRINCIPLES THAT MAKE PROGRAMMES EFFECTIVE?

Effective interventions have a number of discrete characteristics:

- **Cognitive-behavioural approach**

A number of large studies have indicated that the most successful programmes are those that use a variety of treatment techniques and those that take a cognitive-behavioural approach\textsuperscript{12,13}. Cognitive-behavioural treatment focuses on changing thinking in order to change behaviour. An important part of cognitive-behavioural programmes is practising new ways of thinking and behaving in a supportive environment. One of the largest studies to date reported, across custody and community, an average of 25\% less recidivism among treated offenders compared to untreated offenders across 58 studies of cognitive-behavioural programmes\textsuperscript{14}.

- **Matching treatment to risk posed**

Higher risk offenders have a broader range of problems and their problems tend to be more deep-rooted than those of low risk offenders. For this reason it is generally agreed that higher risk offenders should receive a higher and more intense dose of treatment than lower risk offenders. There have been many studies testing this risk principle, all of which agree that interventions are more successful in reducing reoffending with higher risk offenders than with low risk offenders. In 374 tests of the risk principle, treatment delivered to high risk offenders reduced reoffending by 10\% on average. Treatment delivered to low risk offenders was associated with a 3\% reduction\textsuperscript{15}. These figures are lower than those reported in some other studies because this review looked at all types of treatment, not just those that followed the key principles of effective treatment.

A large-scale study on the treatment impact of probation programmes in England and Wales

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*Figure 1. Impact of the Risk, Need and Responsivity principles on programme effectiveness (Reproduced from Bonta & Andrews, 2007 pp 11)"*
found that those whose risk was too high for the programme they were on were more likely to drop out of treatment. Treatment had no impact on the reconviction rates of those whose risk was too low for the programme. This demonstrates how important it is to match treatment to risk.

- **Focussing on known risk factors**
  Criminogenic needs or dynamic risk factors are those factors that, when present, raise the risk of reoffending. They can be personal characteristics such as a tendency to be impulsive, or can relate to the environment, like being a loner, or socialising with criminal peers. Researchers have reported that successful treatment of criminogenic needs is associated with an average 19% reduction in reoffending. Treatments focusing mainly on non-criminogenic needs (such as self-esteem) appear to slightly increase offending rates (by around 1%). A review of 225 treatment studies found that treatment reduced reoffending when it focused on negative emotions, anti-social attitudes, self-control, family factors and pro-social support.

- **Delivering treatment responsively**
  The general responsivity principle states that cognitive-behavioural methods work best with offenders. The specific responsivity principle says interventions should take into account people's different learning styles, personality, motivation and background experiences when planning and delivering treatment.

  At present there is good evidence to support the general responsivity principle (see cognitive-behavioural treatment above). The specific responsivity principle has been researched less comprehensively so far.

- **Taking a collaborative approach**
  A review of studies which looked at the relationship between treatment facilitator characteristics and reoffending found that the most successful treatment was delivered by facilitators with good relationship skills who themselves demonstrated appropriate thinking and behaviour, reinforced learning, and disapproved of pro-criminal thinking or behaviour. Similar findings have been reported in other studies, suggesting that how you deliver treatment is really important.

- **Maintaining the integrity of the programme**
  A very large-scale review of ‘What Works’ in reducing reoffending concluded that programme integrity – delivering the programme as it was designed to be delivered - is an important characteristic of successful programmes. Good monitoring systems and staff training help ensure that programmes are delivered as intended. A review of 58 studies looking at the effect of cognitive-behavioural treatment found that how well the treatment was implemented was one of the key factors that made treatment effective at reducing reoffending. Similar findings were reported in an even larger international review and in a slightly more recent large-scale study looking at how well programme quality was monitored.

**CONCLUSIONS**

The evidence indicates that well-monitored, cognitive-behavioural programmes which encourage offenders to collaborate with staff to make a change, and that follow the risk, need and responsivity principles are the most effective forms of intervention for offenders.

It is important to note that many of these studies have used North American data, and we cannot be sure that the results of such studies apply equally to the United Kingdom. In addition, many of the studies have used different methods, some more scientifically rigorous than others, to address the same “what works?” question. A review of this research suggests that most of the studies, regardless of the methods used, have all produced similar results.

NOMS has a range of accredited interventions, all of which follow the key principles set out in this fact sheet. In order to achieve accreditation programmes must be evidence-based to ensure that they are targeting the right people, focussing on the right things, and being delivered in a way that is most likely to reduce reoffending. All NOMS accredited programmes are monitored to ensure programme integrity.

You can find further information on the effectiveness of NOMS’ accredited programmes in a range of fact sheets produced by NOMS Reducing Reoffending Policy Group (RRPG).
REFERENCES


