NOMS provides programmes to address alcohol-related offending behaviours such as drink driving and alcohol-related violence. This fact sheet reviews the evidence on the effectiveness of these programmes in reducing alcohol-related reoffending. Some of NOMS' general substance misuse programmes also accept offenders with alcohol-only problems.

**The International Evidence**

In the general alcohol misuse literature, there is good evidence that a cognitive-behavioural approach is effective in treating alcohol problems. This evidence has led the National Treatment Agency (NTA) to conclude, in its Review of the Effectiveness of Treatment for Alcohol Problems, that ‘Cognitive behavioural approaches to specialist treatment offer the best chances of success’. There is also robust evidence supporting the use of cognitive-behavioural interventions in reducing offending behaviour, including violent offending. In addition, methods usually associated with cognitive-behavioural alcohol interventions such as motivational interviewing, motivational enhancement therapy and relapse prevention can reduce alcohol problems in community populations.

Interventions based on 12-Step principles (including AA) are effective in treating alcohol problems in the wider population. In its review of alcohol treatment, the NTA decided that 12-Step is ‘An effective form of treatment for alcohol problems’. There is also some evidence to support family therapy and brief interventions, although these are less effective for those with severe alcohol problems.

**NOMS Programmes: The Evidence**

All NOMs programmes are designed to address the risk factors known to be associated with reoffending.

- **Drink Impaired Drivers (DID)**

DID is a cognitive-behavioural and educational programme targeting non-dependent drink-drive offenders. DID is delivered in the community. A small-scale evaluation of DID in South Yorkshire found a reduction of two percentage points for drink-related offences for the treatment group compared with a group who received custodial sentences. There is some general evidence supporting both cognitive-behavioural and educational programmes in reducing recidivism among non-alcohol dependent drink-driving offenders, with a combination of approaches likely to produce the best results.

- **Lower Intensity Alcohol Programme (LIAP)**

LIAP is delivered in the community to address alcohol misuse and criminal behaviour among problematic drinkers. The programme is cognitive-behavioural and draws on the ‘good lives’ approach to offender rehabilitation. ‘Good Lives’ emphasises the importance of developing strengths and personal resilience as ways to reduce reoffending. As Good Lives is a relatively new approach, limited research has yet been carried out on its effectiveness. However, some of the key aspects of the model (including the use of ‘approach goals’) have been shown to increase engagement in other interventions with offenders. In addition, there is evidence to support the cognitive behavioural approach in addressing alcohol misuse and offending more generally (see above). As LIAP is a newly accredited programme, no outcome evaluations have yet been carried out.

March 2010
Alcohol Related Violence (ARV)

ARV is a prison-based programme targeting young, male drinkers who have been convicted for alcohol-related crimes of violence. The overall framework adopted is cognitive-behavioural, including motivational enhancement therapy and relapse management. The programme also incorporates Good Lives principles, as described above. As ARV is still new, no outcome evaluations have yet been carried out. NOMS Reducing Reoffending Policy Group is currently developing an evaluation strategy for the programme.

Control of Violence for Angry Impulsive Drinkers (COVAID)

COVAID is a cognitive-behavioural programme delivered in prisons and community (with full accreditation for prisons). It aims to reduce alcohol-related violence in non-dependent drinkers. The programme incorporates anger management and relapse-prevention, both of which have evidence to support their use.\(^{15,31,32}\) A number of small scale studies have been carried out on COVAID. COVAID produces significant, meaningful and reliable change in psychometric measures assessing anger, impulsiveness and alcohol-related aggression among programme participants, along with reduced alcohol consumption.\(^{33,34,35}\) The studies so far only involve small samples but they are part of a larger, ongoing research programme into the effectiveness of COVAID.

RAPt Alcohol Dependency Treatment Programme (ADTP)

ADTP is based on 12-Step principles and is aimed at medium to high risk male offenders with a history of alcohol dependency. RAPt ADTP is a relatively new programme, having been accredited in March 2008. No outcome evaluation work has yet been published to demonstrate its effectiveness, although research is ongoing, which is producing promising preliminary findings. The programme is based on known successful principles in treating alcohol dependency such as Motivational Enhancement Therapy, AA affiliation, 12-Step and cognitive-behavioural approaches. In addition the programme offers immediate access to treatment\(^{36}\) and provides individual counselling sessions\(^{37}\) both of which have also been found to be effective in community samples.

CONCLUSIONS

NOMS’ current offender alcohol programmes are based upon approaches where there is some existing evidence of impact in reducing alcohol-related offending. Work is underway to improve our understanding of What Works for alcohol-related offending.
REFERENCES


March 2010


