Principles of Effective Interventions
*Materials contained in this training were provided by the University of Cincinnati, Corrections Institute (UCCI) www.uc.edu/criminaljustice
There are different forms of evidence:

- The lowest form is anecdotal evidence; stories, opinions, testimonials, case studies, etc. - but it often makes us feel good.

- The highest form is empirical evidence – research, data, results from controlled studies, etc. - but sometimes it doesn‘t make us feel good.
Evidence-based Strategies

- Easier to think of as “evidence-based decision making”

- Involves several steps and encourages the use of validated tools and treatments

- Not just about the tools you have but also how you use them
Research Conclusions

- The term “what works” means evidence exists that the program or intervention is effective in reducing recidivism.

- Effectiveness is demonstrated through empirical research – *not* stories, anecdotes, common sense, or personal beliefs about effectiveness.

- Without some form of human intervention or services, there is unlikely to be much effect on recidivism from punishment alone.
Correctional services and interventions can be effective in reducing recidivism; however, not all programs are equally effective...

The most effective programs are based on *principles of effective intervention*:

1. Risk (Who)
2. Need (What)
3. Responsivity (How)
4. Fidelity (How Well)
Risk Principle

- Supported by lots (and lots) of research
- Tells us WHO to target
- Two (2) types of risk factors
  - Static
  - Dynamic
I. Supervision and treatment should match risk level of client

II. Target higher risk client with the most intensive interventions

**Violating this principle can lead to increased rates of recidivism for lower risk participants**
Risk Principle

Change in Recidivism Rates

Need Principle

I. Tells us WHAT to target

II. Target criminogenic needs

III. Avoid correctional quackery
<table>
<thead>
<tr>
<th>Criminogenic Needs</th>
<th>Non-Criminogenic Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pro-Criminal Attitudes</td>
<td>Stress/anxiety</td>
</tr>
<tr>
<td>Anti-Social Personality</td>
<td>Low Self-esteem</td>
</tr>
<tr>
<td>Anti-Social Peer Associations</td>
<td>Discipline</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>Creative Abilities</td>
</tr>
<tr>
<td>Family</td>
<td>Cohesiveness of social group</td>
</tr>
<tr>
<td>Education/employment</td>
<td>Vague emotional problems</td>
</tr>
<tr>
<td>Leisure time</td>
<td>Physical condition</td>
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<td></td>
<td>Trauma</td>
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<td></td>
<td>Medical/Mental Health Needs</td>
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<td></td>
<td>Understanding one’s culture/history</td>
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</tbody>
</table>
Need Principle

Responsivity Principle

Responsivity:
• Refers to learning style and characteristics of the client, which can affect their engagement in the program
• Tells us HOW to target criminogenic needs
• Cognitive/behavioral/social learning models are most effective
• People learn differently
• Each client will have individual barriers to services
Responsivity Principle

The most effective interventions are behavioral:

• They focus on current factors that influence behavior
• They are action-oriented
• They reinforce prosocial behavior
• They include cognitive restructuring
• They include skill development with relatable examples
• They include approaches that train family on appropriate techniques
Responsivity Principle

*Most Important Responsivity Factors:*

- **Motivation to change**
- Cognitive functioning / IQ
- Education level
- Gender
- Race and Ethnicity
- Personality
- Mental health
Responsivity Principle

**Fidelity Principle**

I. **Refers to HOW WELL the program adheres to the principles**

II. **Refers to HOW WELL the program does what it is designed to do**

Reliability
/ree-ly-uh-bil-i-tee/
To be able to produce good results time after time
Fidelity Principle

<table>
<thead>
<tr>
<th></th>
<th>Functional Family Therapy</th>
<th>Aggression Replacement Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competently Delivered</td>
<td>38</td>
<td>24</td>
</tr>
<tr>
<td>Not Competent</td>
<td>-16.7</td>
<td>-10.4</td>
</tr>
</tbody>
</table>

Adherence to RNR

Adherence to RNR

Change in Recidivism Rates

-2 0 1 2 3

-5 0 5 10 15 20 25 30

2 18 26
Cognitive Behavioral Treatment (CBT)

Key Principles:

• Thinking affects behavior

• Antisocial, distorted, unproductive, irrational thinking = antisocial, unproductive behavior

• Thinking can be influenced and changed

• We can change how we feel and behave by changing what we think
Cognitive Behavioral Treatment (CBT)

Most effective form of programming for moderate and high risk client

Addresses:

- Antisocial thinking patterns
- Builds problem-solving skills
- Equips the client with new thinking and skills through repetition with increasingly difficult practice sessions (i.e., role-playing)
Cognitive Behavioral Treatment (CBT)

Treatment Components:

- **Cognitive Restructuring:** Replace irrational/antisocial thinking with prosocial thoughts
  - Used when problem behavior is caused by excess of antisocial thoughts

- **Cognitive-Behavioral Coping Skills:** Teach prosocial responses to high risk situations
  - Cognitive process and actions
  - Used when problem behavior is caused by lack of adaptive thinking
Well-Defined CBT Programs

Characteristics of Effective Interventions

• The program is highly structured
• Manual for intervention is strictly followed
• Staff relate to clients in interpersonally sensitive and constructive ways
• Staff monitor client change on targets of treatment at set timeframes
• Relapse prevention and aftercare services are provided
• Family members are trained to assist
Research Says Effective Programs Should…

USE COGNITIVE BEHAVIORAL INTERVENTIONS THROUGHOUT THE ENTIRE PROGRAM
Research Says Effective Programs Should…

Ensure CBT strategies:

- Cognitive Restructuring
- Social Skills
- Problem Solving
- Emotional Regulation

*On-going Role-Playing and Modeling*
Research Says Effective Programs Should…

Target criminogenic needs:

Focus Here:
- Antisocial Attitudes, Values, Beliefs
- Antisocial Peers
- Antisocial Personality
- Family
- Education/Employment
- Substance Abuse
- Leisure Activities

Not Here:
- Self-Esteem
- Physical Conditioning
- Artistic Ability
- Life Skills
- Victim Impact
- Spirituality
Behavior Modification System

**GOAL:** To develop a system that increases compliance while the client is under programming, but more importantly increases long-term prosocial behavior.
Behavior Modification System

- Identify desired behaviors to target
- Develop a menu of short and long term reinforcements
- Contingent on performing the behavior
- Recipient aware that the reward is a consequence of the specific desired behavior
- Continuous rewards followed by intermittent rewards
THANK YOU!!!