Psychological treatments for offending

Why should we treat offending?

The common sense view of offending is based on the notion that committing a crime is the outcome of a rational decision-making process underpinned by free will. However, we have seen that, in many cases, offending does not actually work this way. Depending on which perspective is taken, offending may be seen as the outcome of a variety of process that the offender does not fully control including the learning of inappropriate attitudes and ways of behaving and the failure to develop appropriate control of emotional responses like anger. These perspectives on offending open up the possibility of using therapeutic techniques to equip offenders to avoid criminal behaviour in future. It is not generally suggested that these techniques should replace judicial sanctions for crime, but it is possible that they might play a part in the reform of offenders who are undergoing judicial punishment in prison or in the community. Early attempts to treat offending therapeutically were based on a psychodynamic model of offending and met with little success (Howitt, 2009). Later attempts have been based on learning theory and cognitive models of offending.

Behaviour modification

Behaviour modification involves the use of operant conditioning principles to extinguish undesirable behaviours and establish/promote desirable ones. The underpinning principle is that behaviours that are reinforced are strengthened whereas behaviours that are punished are weakened. Individual behaviour modification is not widely used in the rehabilitation of offenders, but there are some indications it may be effective. Fo and O’Donnell (1975) devised a ‘buddy system’ in which adult volunteers were assigned to a young offender to provide consistent reinforcement for socially acceptable ways of acting. Whilst this appears to have improved the behaviour of serious offenders its impact on those who had committed less serious offences was mixed. Blagg (1985) examined the effect of ‘personal restitution’ on young offenders. They were required to meet with and apologise to the victims of their crimes. This had a marked effect on the offenders, who reported being ‘terrified’ ‘feeling sick’ and ‘finding it difficult to talk’ (Hollin, 1992; p.135) and there is some evidence that it may be effective in reducing recidivism (Schneider and Schneider, 1985). However, some more recent reviews suggest it is no more effective in reducing recidivism than other interventions (Hayes, 2005).

Behaviour modification can also be implemented on an institutional (as opposed to individual) level through the use of token economy programmes. In a typical token economy programme, the institutional management draws up a list of behaviours they wish to promote. These might include interacting positively, complying with rules, completing chores and so on. When an offender carries out one of the targeted behaviours they are given a token. Tokens may later be exchanged for other reinforcers such as sweets, trips out access to television etc. The rationale is that through selective reinforcement, desirable behaviour will be encouraged and undesirable behaviour extinguished. In some schemes tokens may be taken away as a punishment. Evidence regarding the effectiveness of token economies suggests that they have short term-effectiveness with young offenders (Hobbs & Holt, 1976) and adult offenders (Allyon & Milan, 1979). However, the improvements tend not to generalise beyond the institution in the longer term. Cohen and Filipcjak (1971) found a reduction in offending after two years but not after three. Blackburn (1993) concludes that token economies principally make offenders easier to manage but they have little real rehabilitative value. Additionally, the use of token economies raises ethical issues. In order to ensure that the tokens have reinforcement value access to basic goods must be restricted. Arguments that this infringes the rights of the offenders have led to the closure of at least one such programme in the US (Nietzel, 1979).
Social skills training

The rationale for social skills training (SST) is that offenders have poor social skills that either make them more likely to end up in situations where offending is possible (e.g. being unable to resist peer pressure) or which tend to exacerbate bad situations (e.g. managing potentially aggressive encounters poorly). Social skills training aims to equip offenders with micro-skills (e.g. eye contact, and personal distance) and macro-skills (e.g. assertiveness and negotiation) that allow them to avoid and deal more effectively with potential offending situations. There is no fixed set of techniques involved, but most programmes involve direct instruction, backed up by observation of others and role playing, often in group treatment settings.

Three questions must be addressed when evaluating the impact of SST: (1) do the offenders learn the skills? (2) Do the skills generalise beyond the training situation? (3) Does SST actually reduce reoffending? Spence and Marziller (1981) suggest that offenders do learn the relevant skills, but that they may disappear in the longer term: skills were present after three months but not after six. Evidence for generalization is mixed. Goldstein et al (1981) found that generalization beyond the training situation occurred in only around 20 per cent of cases, although Blackburn (1993) suggests that self-report data show a more positive picture. Hollin (1992) confirms that SST is generally effective if assessed using measures of behaviour and cognition (i.e. looking at whether the offenders have learned the relevant skills) but suggests that its impact on reoffending is less clear. Sarason (1978) found that SST was superior to not treatment but not necessarily superior to other treatments: 31 per cent of a control group reoffended within five years, compared to only 15 per cent of the treatment groups. Sarason suggests that it is the additional attention that offenders receive that has the effect, not the learning of specific social skills. There are signs, however, that SST may have a role to play in crime prevention: it can be used to equip adolescents with the skills to resist offending (Aiken et al, 1977).

Anger Management

Novaco (1975) suggests that some violent offences occur because offenders cannot deal effectively with their anger, which tends to be expressed in antisocial ways and displaced onto inappropriate targets. In an anger management programme, cognitive behavioural techniques are used to help offenders deal more effectively with their feelings of anger. The aim is to teach offenders to (1) recognize their own feelings of anger; (2) control their angry behaviour; and (3) resolve conflict in positive ways. Ainsworth (2000) identifies three stages in most anger management programmes:

- Cognitive preparation: offenders analyse their own patterns of anger: the types of situations that make them angry and the thinking processes that accompany their anger. They may identify irrational thinking processes that lead to or sustain angry outbursts.
- Skills acquisition: the offenders learn skills to help them manage their anger. These might include relaxation, avoidance, or social skills such as assertiveness and conflict resolution.
- Application practice: offenders apply their skills in a controlled and non-threatening environment. This could include role-playing of angry situations with other offenders.

Anger management has been shown to be effective in a variety of contexts including marital conflict, but there have been relatively few studies of its effect on offending. Some results are promising. Feindler et al (1984) found that anger management training led to improvements in self-control, more effective problem solving and a reduction in offending in young men. Ainsworth (2000) argues that it is effective but only if managed properly, given the right resources and targeted at the right offenders (i.e. those whose offences originate in their ability to manage their own anger). Howitt (2009) reiterates this, pointing out that some offenders act violently not out of anger but in order to achieve specific goals. Such individuals are unlikely to benefit from anger management, and there are circumstances under which treatment may be counterproductive. Rice (1997) found that psychopaths given treatment were more likely to offend afterwards, possibly because the skills they acquired raised their self esteem and allowed them to manipulate others more effectively.