

## Summary

# Recidivism after forensic psychiatric treatment

## Patterns, trends, processes and risk assessment

This is the fourth report of a series of studies into recidivism following the termination of treatment in TBS, the Dutch penal law commitment procedure for mentally disturbed (sexually) violent offenders. Taken together the TBS-recidivism studies cover a time span of 23 years. Every single study consists of a 5-year exit cohort, the period after dismissal from TBS varying from 3 to 8 years.

When comparing the four studies there is evidence of a gradual decline of general recidivism to a level of just over 50% committing 'any offence' after TBS. Recidivism rates of more serious (sexually) violent crime after TBS, however, remain stable at levels between 15% and 20%. Over the years about 1 in 7 offenders treated in TBS may be considered a failure in terms of the essential goal of the TBS system: preventing serious security risks to society. This stabilization of effectiveness is accomplished against a background of a more problematic and more 'dangerous' TBS population and an increase of the time in intramural treatment. Treatment periods of the exit cohorts have increased to about five years.

Just as in previous studies a strong correlation was found between recidivism and modalities of termination of the TBS measure. Discharge after an extramural resocialisation phase was followed by much less recidivism than when the TBS measure was terminated straight from the TBS clinic – 11% versus 30% of serious violent offences. The occurrence of a discharge straight from the clinic could often be explained by the fact that the judge's decision to end the TBS measure had been made against the advice of the staff of the TBS clinic. About 40% of all cases in the last cohort consisted of these so-called 'contrary decisions'.

The 17% of 'serious recidivists' were compared with the rest of the exit cohort. Apart from dismissal straight from the clinic, this subgroup of serious recidivists was characterized by a longer and more intense criminal history before TBS and more reported incidents (offences, absence without leave) during the TBS period.

Finally, half (27) of the cases of serious (sexually) violent crime after the TBS were followed up by a more qualitative exploration of the treatment period, the return into the community and the most serious offence after TBS. Files of the TBS clinics, prosecution files and interviews with probation officers involved with this group of serious offenders demonstrated that almost all serious recidivism of former TBS

patients was preceded by a highly problematic course of treatment and drastically failing social reintegration. The treatment results were often judged as rather dubious. In almost all cases of serious recidivism the former TBS patients were living chaotic, marginal and often alcohol or drug dependent lives. Probation officers reported that these clients tried to evade supervision. Probation officers felt that they lacked necessary means to intervene in a sometimes inevitable course leading to another serious crime.

The results of this study of recidivism after TBS suggest that more explicit risk assessment should be established. Even more importantly, more intensive supervision and modalities for intervention should be instituted for part of the population of discharged TBS patients.