

Sociale Vaardigheidstraining op Maat
Een inventarisatie van knelpunten bij de implementatie en uitvoering

SUMMARY

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Summary

Background, research goal, and research questions

The Social Skills Training 'to Fit' (Sociale Vaardigheidstraining op Maat; *SoVa op Maat*) is a cognitive behavioural intervention for boys and girls aged 15 to 21 years who present serious behaviour problems. The intervention is meant for youth whose behaviour problems—at least partially—stem from a deficit in social skills. These youths are, as a result of this skills deficit, less able to adequately deal with difficult social situations. This in turn leads to antisocial behaviour that causes them to get in contact with the police. The main aim of *SoVa op Maat* is to enlarge youths' repertoire of social skills in order to reduce the risk of recidivism. *SoVa op Maat* was designed as a group training for youth placed in juvenile justice institutions and was accredited by the Dutch Correctional Services Accreditation Panel in October 2008. Upon that assessment the Commission judged whether the intervention, based on its content and treatment model, can be expected to result in a reduction of recidivism. In order to assess at a later moment in time whether *SoVa op Maat* does in practice show a reduction of recidivism, the Research and Documentation Centre (WODC) of the Ministry of Security and Justice commissioned INTERVICT in the fall of 2009 to conduct a process evaluation. Programme integrity, after all, is a prerequisite for a good effect study.

As it turned out the intervention was hardly executed in practice, the process evaluation was suspended in the spring of 2010 and taken up again in December 2010. Soon thereafter, however, practice showed that institutions were still confronted with a number of bottlenecks in executing *SoVa op Maat*. For this reason, WODC and INTERVICT reached the conclusion in February 2011 that an evaluation of programme integrity was not feasible at that moment in time. A study on the impediments to large(r) scale implementation and execution of the intervention, however, did seem a possibility. As of that moment, the study was aimed at describing the bottlenecks and problems that institutions face when trying to ensure programme integrity in executing *SoVa op Maat*. The aim of the study is elaborated in the following research questions:

1. What is the current situation with regard to the implementation of *SoVa op Maat* in juvenile justice institutions?
2. How did implementation of *SoVa op Maat* ensue in juvenile justice institutions? Did institutions encounter problems during the implementation of *SoVa op Maat*, and if so, what kind of problems occurred (at organisational level, professional level, or with regard to the intervention)? Did institutions choose different problem solving strategies, and if so, what strategies were chosen to solve the implementation problems?
3. To what extent were the necessary contextual preconditions for *SoVa op Maat* present?
 - a. Did staff members involved in implementing *SoVa op Maat* think beforehand about the implementation process and possible problems that might confront management, counsellors, and youngsters?
 - b. What financial, staff, and organisational resources were available to implement and execute the intervention? Was knowledge about the implementation of the intervention sufficiently spread among employees in the institutions?
 - c. Were employees qualified to deliver *SoVa op Maat*? Do those involved have the necessary education, knowledge and skills (not only those necessary to deliver the intervention, but also those necessary to select participants and to employ the diagnostic instruments mentioned in the treatment manual as the instruments used to evaluate the results of the intervention)?

- d. Were people (programme managers, counsellors, and group care workers) trained to deliver the intervention before it started?
 - e. Did the institutions consider possible unexpected effects the intervention might have?
4. How are eligible participants identified and selected? What problems and selection effects occur? After a youth has been selected for participation, does he or she actually start the programme? If not, what are the reasons? Do participants drop out during or before the intervention starts? If so, when does that happen and what are the reasons?
 5. What do those involved in implementing and delivering *SoVa op Maat* think about the intervention? How do they evaluate the programme?
 6. What problems (both regarding content as well as pertaining to organising the intervention's execution) occur in the execution of *SoVa op Maat*? Can differences between institutions be identified, and how do separate institutions deal with these problems?

The Social Skills Training 'to Fit'

The main aim of *SoVa op Maat* is to teach youth how to better manage and control their behaviour. In order to achieve this aim, the intervention aims to teach youth problem solving skills as well as how to make their own choices and subsequently act on those choices. *SoVa op Maat* is furthermore aimed at enhancing self-control and reducing impulsivity and teaches youth to take other people's perspective. Is it assumed that, after completing the intervention, youth will be better able to handle all kinds of social situations which in turn is supposed to reduce the risk of recidivism.

SoVa op Maat consists of three work books and five modules that can be offered in different combinations, each depending on a youngster's individual problem behaviour and treatment needs. Based on the nature of the skills deficits a youngster shows, a programme is composed from the available work books and modules so as to create a tailored intervention. The work book 'General social skills', which revolves around communication skills, negotiation skills, skills in order to cooperate with others, and skills in responding to feedback, is intended for youth with social skills deficits on different areas. A youth who presents aggressive behaviour or inhibited behaviour, is a suitable candidate for the work books 'Conflict management' or 'Enhancing assertiveness', respectively. The modules Controlling impulsivity, Emotion regulation, and Making choices are meant for youth who need support in these areas before other skill deficits can be addressed. The module 'Family in focus', that also involves the youngster's parents or caretakers, can be offered when the youngster's problem behaviour is (partly) the result from a deficit in parenting skills on the part of the parents.

SoVa op Maat is primarily developed as a group training, but the treatment manual reads that an individual training can be offered in addition to a group training should a participant need extra support. Moreover, the manual states that the intervention may be offered as an individual training if a youngster is unable or not suitable to participate in group sessions (e.g., because the youngster does not fit in with group dynamics, learning style or learning pace of a group). Participants are expected to practise the skills they learn in the context of the ward. Homework assignments, to be completed on the ward, therefore have a central role in the intervention. In that way, youth can put the skills they learn to direct use. The duration of the intervention depends on the number of work books and modules a youth's tailored programme consists of and ranges from four months to 1.5 years. Youth who finished the intervention but who continue to live in the institution, can be offered several 'booster sessions' aimed at refreshing his or her knowledge of the things he or she learned. In addition, the intervention offers the possibility to offer aftercare to youth who leave the institution (usually consisting of support through telephone conversations).

Each institution that offers *SoVa op Maat* is expected to have at least two counsellors who must have completed higher education and need to be educated in delivering cognitive behavioural skills training to adolescents. Furthermore, each institution needs to appoint a programme manager who is expected to assess the quality of programme delivery. Apart from guarding programme integrity, programme managers are supposed to coach the counsellors by means of feedback sessions every two weeks.

In order to secure the transfer from the intervention to the ward and as such to make sure participants will have plenty of opportunity to practice their newly learned skills, it is necessary to involve group care workers in the intervention. They are expected to stimulate youth to work on their individual training issues and to practice their new skills. A youth's mentor is furthermore expected to support and stimulate the youth in making his homework assignments as well as informing the counsellor of the progress a youth is making on the ward. Finally, a mentor also is supposed to inform the group care workers of the youngster's individual training issues and the progress he or she is making during the intervention.

Research methods

Twelve juvenile justice institutions educated counsellors and programme managers. Two of these institutions were changed into institutes for inpatient mental health care (as opposed to remaining a juvenile justice institution) as of 1 January 2010 and one institution was closed as per 1 March 2011. In the remaining nine institutions, an average of five people was trained to deliver the intervention (four counsellors and one programme manager). Six of these nine institutions actually offer *SoVa op Maat* to their pupils while the remaining three institutions had not yet started to further implement the intervention in February 2011. We conducted semi-structured interviews with staff members in seven institutions: Eikenstein, Het Keerpunt, De Kolkemate, De Hunnerberg, Den Hey-Acker, De Hartelborgt, and Juvaid. This group consists of the six institutions offer *SoVa op Maat* to their pupils and one of the institutions that does not (yet) do so (De Kolkemate).

In order to gain an overview of existing problems in implementation and programme delivery that is as representative and complete as possible, interviews were conducted with people working at different positions within the juvenile justice institutions. We selected respondents with different roles in the implementation and delivery of *SoVa op Maat*. In each institution included in the study interviews were planned with someone representing the institute's management (preferably the treatment director), with the programme manager, and with a counsellor. As it turned out, the treatment director in one institution was also the programme manager and as a result we conducted two interviews instead of three in that particular institution. In each of the other institutions we interviewed three staff members leading to a total of 20 interviews. These interviews were conducted between 14 April and 9 August 2011. In September 2011, we re-contacted the programme managers of the six institutions that were already offering the intervention to their pupils so as to collect additional information with regard to the implementation and programme delivery (five programme managers were reached). In addition to the interviews with staff members from the seven institutions that collaborated in the study, we had several conversations with the programme developer and were able to use evaluation data that was collected in the institution De Doggershoek (now closed down).

Results: Findings from the interviews

Implementing *SoVa op Maat*

Respondents in each of the institutions stated that *SoVa op Maat* is considered to be a useful addition to the treatments offered in the institution. As a result, organisational support for the

implementation of *SoVa op Maat* was guaranteed in all institutions. The organisational problems during the implementation of *SoVa op Maat* that were mentioned relate to the amount of behavioural interventions that institutions were expected to implement at the same time. As a result, institutions were limited in their ability to pay sufficient attention to implementing *SoVa op Maat* and time to learn from previous experiences was lacking. Furthermore, none of the institutions used a strategic plan to guide the implementation process. In hindsight, this was regarded as a deficiency in the implementation process. Respondents in four institutions stated that the lack of a strategic plan to implement the intervention reduced the intervention's possibility to gain a fixed position within the institution's treatment offer. In one institution a strategic plan was written at a later stage to serve as a guide in improving the implementation and delivery of *SoVa op Maat*. This institution's programme manager reported in September 2011 that, according to her, working with this plan had led to very positive results.

Each of the six institutions that offer the intervention to their pupils started doing this directly after staff members were trained in delivering the intervention. This was not accompanied by extra supervision, even though the programme manual mentions this as an important aspect in guaranteeing programme quality. Two of the six institutions, moreover, started working with *SoVa op Maat* without having appointed a programme manager, and respondents noted that this was not beneficial to either programme delivery or programme content. Finally, none of the institutions had offered any education or training to group care workers.

Executing *SoVa op Maat*

Six of the seven institutions that were involved in the current study, offered *SoVa op Maat* to their pupils: At the start of the data collection for this study (February 2011) there were three institutions that had already been delivering the intervention for two or three years, whereas the other three institutions had been working with the intervention for about a year. Staff members in the seventh institution had in February 2011 only recently been trained in delivering *SoVa op Maat* and had not yet started offering the intervention to their pupils. It proved difficult to gain insight in the number of youngsters that received (parts of) the intervention, but it seems that in 2010 most institutions offered *SoVa op Maat* to an estimated two to four youngsters. As an exception, one institution reported that about 30 youth received separate parts of *SoVa op Maat* in 2010.

The six institutions that offer *SoVa op Maat* to their pupils, deliver the intervention in limited numbers and as an individual intervention only. Offering *SoVa op Maat* as an individual intervention is not contrary to the intervention manual—even though the intervention was developed as group training—but respondents in three institutions mentioned that individual trainings generally involve delivery of separate work books or modules. It rarely happens, according to our respondents, that a youngster finishes a full *SoVa op Maat*. The current study tried to get a clear understanding of what separate parts were offered and why they were selected, but replies to questions regarding this topic were relatively broadly formulated: It all depends on the behaviour problems and needs of the individual youngster.

Although the intervention manual gives a detailed description of the diagnostic process that should guide the composition of a tailored programme, diagnoses are (largely) based on unstructured clinical judgment in half of the institutions. In five of the six institutions that offer *SoVa op Maat* to their pupils, the intervention is also offered to youth with an IQ below 75 even though this is in contrast with the inclusion criteria of the intervention. The majority of the respondents who report on this topic, stated that in such cases the counsellor needs to adapt the intervention to the cognitive abilities of the youth: Exercises need to be repeated more often, some exercises

need to be skipped and others have to be simplified. As a result, the programme integrity of *SoVa op Maat* suffers in those cases.

The institutions that are offering *SoVa op Maat* to their pupils do not appear to take many steps in order to guarantee programme integrity. One institution established a committee by the end of 2010 that, according to the treatment director, will assess whether the diagnostic processes lead to the correct indications for interventions. One institution organises weekly feedback sessions (for all behavioural interventions), while four institutions either do not offer such sessions or offer too few of them (according to the respondents). None of the institutions are using the evaluation forms prescribed in the intervention manual as a system of quality control.

Respondents in most of the institutions say they would prefer to transfer a current *SoVa op Maat* programme to an institute for outpatient youth mental health care when a youngster leaves the institution. Respondents also state, however, that it often proves difficult to establish cooperation with institutes for outpatient youth mental health care. At the time of the data collection, only one institution had succeeded in ensuring cooperation with an institute for outpatient mental health care aimed at ensuring the continuation of behavioural interventions that start during a youngster's stay in the juvenile institution. In September 2011, one of the other institutions was discussing such a cooperation with an institute for outpatient youth mental health care and another institution was having similar talks with an institute for inpatient youth mental health care.

***SoVa op Maat* and its relation to other interventions**

Although a number of respondents are of the opinion that *SoVa op Maat* shows considerable similarities with the general group method YOUTURN, the intervention is considered to complement YOUTURN in the majority of the institutions. The general group method is regarded as a good basis for teaching skills, whereas *SoVa op Maat* is thought to offer the possibility to give a more in-depth training of social skills. According to the developer of the interventions, the number of youth who are eligible for *SoVa op Maat* dropped after YOUTURN was implemented in all juvenile justice institutions. She observes that *SoVa op Maat* has since changed into an intervention for youth who are unfit for a group intervention and youth who need more intensive treatment in order to learn the necessary social skills. The latter conclusion is in accordance with respondents' statement that *SoVa op Maat* complements YOUTURN.

Staff members in one of the institutions specifically choose to offer a youngster only one behavioural intervention at a time because they are of the opinion that more than one intervention would ask too much from a youngster. In four other institutions, the choice to have a youngster participate in more than one intervention at a time depends on whether practitioners assess that the youth will be able to deal with participating in more than one intervention at a time. In a sense, the different behavioural interventions are competing with each other for participants. However, *SoVa op Maat* probably has to compete primarily with the regular daily schedule in the institutions. Youth attend school, have a daily hour of outside recreation, and attend several other daily activities. Because behavioural interventions are delivered during office hours only, there does not remain much time to plan intervention sessions.

What staff members say about *SoVa op Maat*

Treatment directors, programme managers, and counsellors positively evaluate *SoVa op Maat*. The intervention is considered to be a useful addition to the treatments offered in the institutions and a large number of respondents thinks positively about the intervention's content. This does not mean, however, that respondents do not offer criticism. Most heard (mentioned by six respondents) is the remark that exercises have been developed for group training sessions but do

not easily translate to individual sessions. In addition, some respondents are of the opinion that *SoVa op Maat* is a time-consuming and extensive intervention, and others remark that some exercises do not fit well with older adolescents. Finally, the treatment manual and work books are thought to be unorganised and counsellors feel the need for separate work books for youth participating in the intervention.

Results: Problems in the implementation and execution of *SoVa op Maat*

Contextual problems

SoVa op Maat is not executed often. This is mainly caused by a lack of eligible participants: Respondents in five of the six institutions that offer *SoVa op Maat* to their pupils mention this as the reason why *SoVa op Maat* is not often executed. Ever since youth who are removed from their parents' care can no longer be committed to juvenile justice institutions, the number of youth eligible for *SoVa op Maat* has strongly declined. Moreover, the average period youngsters stay in juvenile justice institutions is too short to meet the intervention's inclusion criteria (an expected remaining stay of at least four months is required at inclusion of a possible participant). Institutions deal with this problem in different ways: Some institutions do not offer *SoVa op Maat* to youth who are not expected to stay for the required period, whereas other institutions decide to offer youth separate parts of the intervention. As a result of the former choice, *SoVa op Maat* is rarely delivered in these institutions, while the latter choice means that *SoVa op Maat* is hardly ever delivered in full. In both cases, institutions do not succeed in offering *SoVa op Maat* as a group intervention.

The lack of eligible participants is not the only contextual problem that was pointed out by respondents. For one, reductions in institutions' capacity have been causing unrest in the institutions for a while and are interfering with *SoVa op Maat's* execution. In addition to this unrest, respondents say that a lack of time also constitutes an important bottleneck. Many counsellors also perform tasks as behavioural scientist in the institutions' groups and several of them stated their time is too limited to deliver *SoVa op Maat*. Youngsters' daily schedule further reduces the possibilities for offering behavioural interventions. The size of the organisations also is of particular interest. Small institutions will experience difficulties in executing *SoVa op Maat* in a way that ensures its programme integrity: These institutions employ a small number of staff members and counsellors in these institutions usually perform several other tasks that may hinder them in delivering behavioural interventions.

Problems relating to the execution of *SoVa op Maat* (programme integrity)

The main problems in the execution of *SoVa op Maat* relate to the selection of participants and to the question as to what constitutes a 'full *SoVa op Maat*'. Half of the institutions in this study do not select the intervention's participants using the diagnostic instruments prescribed in the intervention manual, and *SoVa op Maat* is regularly delivered to youth who do not entirely meet the inclusion criteria. In those cases the programme is furthermore adapted to the cognitive abilities of the youth. It furthermore rarely happens that a full *SoVa op Maat* programme is completed by a youngster, but rather, youth are offered separate work books or modules. The current study, however, did not succeed in uncovering the way in which decisions on offering separate parts of the intervention are made, nor does the current study warrant any conclusions on the question why separate work books or modules cannot be considered to entail an intervention that is tailored to a youngster's problems and treatment needs.

In addition to the problems with regard to selection of participants and offering separate parts of the intervention, the interviews revealed that group care workers were not trained to support the execution of the intervention and that transfer from treatment to groups proved difficult. Finally,

(too) little attention is given to ensuring the programme integrity of the intervention. All in all, we can conclude that *SoVa op Maat* is delivered in a way that differs in several respects from the intervention manual.

Problems concerning the content of *SoVa op Maat*

Some of our respondents are of the opinion that *SoVa op Maat* is a time-consuming intervention. Several respondents further mentioned that intervention manual and work books appear poorly organised and cluttered. In addition, several exercises are not suitable for translation from group exercises to individual exercises, and some exercises do not fit well with older participants. A limitation to executing *SoVa op Maat* is formed by the requirement that, when they are selected for the intervention, participants can be expected to remain in the institution for at least four months. Several respondents moreover do not agree with waiting to offer behavioural interventions until a youth has stayed at least 14 weeks in the institution (a requirement that follows from the general group method YOUTURN) and start offering separate parts of *SoVa op Maat* earlier on during a youth's stay. These respondents reason that institutions should not hold back an intervention if a youth presents problems that can be treated with the intervention for the sole reason of not knowing whether that youth will remain in the institution for the required amount of time.

Conclusions and recommendations

SoVa op Maat seems to have been overtaken by changing practice and as a result is executed on a limited scale and in a way that often differs from the intervention manual. Since 1 January 2010 youth who are removed from their parents' care can no longer be committed to juvenile justice institutions leaving a reduced number of youth who are eligible for *SoVa op Maat*. Moreover, the average period that this remaining group of possible participants stays in juvenile justice institutions is too short to be eligible for *SoVa op Maat*. As a result, several institutions offer their pupils separate parts of the intervention. In addition, *SoVa op Maat's* general social skills work book seems to have become somewhat superfluous because of the skills' training that is offered as part of the general group method YOUTURN. The implementation of YOUTURN appears to have changed *SoVa op Maat* into a more in-depth intervention for youth who do not benefit enough from the YOUTURN skills training.

Despite the aforementioned comments, *SoVa op Maat* is regarded in each of the juvenile justice institutions in the current study as a worthwhile addition to the available behavioural interventions, and there is sufficient support among staff members for the intervention. Also, the intervention is soundly based on a good and elaborate treatment model. One of the recommendations of the current study, therefore, is to revise the intervention manual and to adapt *SoVa op Maat* to the altered situation in the juvenile justice institutions. In doing so, providing a clear description of the minimum *SoVa op Maat* programme that meets the definition of a 'full programme' deserves particular attention. Attention should also be given to designing the intervention as an individual training, and to the transfer of the intervention to institutes for outpatient youth mental health care. A final suggestion for the revision of the intervention manual is to improve the way in which the manual is organised.

Despite the lack of eligible participants and the effects this has on the possibilities to deliver *SoVa op Maat*, there are also several problems in the execution of the intervention that relate to programme integrity. In several institutions, delivering accredited behavioural interventions seems to be regarded as an extra task that adds to the existing job responsibilities: It seems that not every institution allocated enough time to the execution of behavioural interventions. In the future, more attention will also have to be paid to ensuring programme integrity, in particular with

regard to selecting participants and using the evaluation forms prescribed in the intervention manual as a system of quality control. Because the institution De Doggershoek was not involved in the current study (because the institution was already closed down), we cannot say much about the way *SoVa op Maat* was executed in this institution. However, based on the available data from De Doggershoek it seems possible to draw some preliminary conclusions on intervention delivery and ensuring programme integrity. The fact is that the available data indicate that counsellors in De Doggershoek managed to deliver full *SoVa op Maat* programmes in most of the cases and that all involved staff members in De Doggershoek used the available evaluation forms as a means of quality control. De Doggershoek did benefit from the fact that the intervention's developer was employed in that institution, but we can nevertheless conclude that it should be feasible to deliver full programmes and to use the system of quality control.

A properly functioning system of quality control is not only important for separate institutions to gain a good idea of the quality of their work and the progress made by participants, but also with regard to the re-accreditation of *SoVa op Maat* in 2013. In order to secure re-accreditation intervention efficiency has to be proven in a study on the outcome of the intervention in terms of changes in social skills among participants (and preferably also in a control group): Treatment goals need to be met. Considering the fact that currently no institution is measuring progress among participants, chances appear small that *SoVa op Maat* will meet all conditions for re-accreditation by 2013.