

Summary

Applying the priming coat

Evaluation of the program theory behind a preparatory program for sex offenders in Breda Penitentiary, the Netherlands

Background

In 1990, a special department called 'protective living' was set up in Breda Penitentiary 'De Boschpoort', a house of detention. This department was originally set up as a place where all vulnerable offenders⁴⁴ could be protected, but grew out to become a department for sex offenders only. In 1999 a treatment program started at the department, called 'pretreatment program for sex offenders'. The program is called *pretreatment* because it prepares for further (mandatory) treatment in forensic mental hospitals. Most sex offenders in Breda penitentiary are sentenced to both prison time and mandatory treatment, and during their time in prison the pretreatment program is given. The overall purpose of the program is to prepare sex offenders for their mandatory post-detention treatment. The department has 36 single-person prison cells.

The present study was requested by a member of parliament, Krista van Velzen, who inquired about the efficacy of the pretreatment program.⁴⁵ She requested an entailed a description and evaluation of the program components, the population for whom it is suitable, and a request for research into the feasibility of the intended effects. In addition, policy makers inquired into the rationale behind the program, as well as its merits. The results of the present study, in combination with the results of the process evaluation of the program,⁴⁶ are to provide guidelines for the Minister of State in the Netherlands as to the question if, and if so in which form, the pretreatment program should be broader implemented in the prison system in the Netherlands.

Method

The primary goal of the present study is to examine the plans behind the treatment program. First, the different components of the program will be described. Second, the program goals will be described and the presumed working mechanisms linking program components to the program goals will be unraveled. The criminogenic

⁴⁴ In houses of detention and prisons there is a certain culture and hierarchy in which some offenders have more status than others. Especially sex offenders are at the bottom of the hierarchy and are often subject to bullying, threats and/or physical abuse. This has to do with the crime they committed, but also with a lack of social adjustment. Also, only about 5% of all offenders in The Netherlands are sex offenders and in that way, they form a minority as well.

⁴⁵ Tweede Kamer, vergaderjaar 2007-2008, 24 587, nr. 247.

⁴⁶ Nagtegaal, M.H., & Mulder, J. (2010). *Procesevaluatie van de prétherapie voor zedendelinquenten in PI Breda*. Den Haag: WODC. Cahier 2010-1.

factors that the program targets will be discussed. The treatment program will also be evaluated in light of the context in which it takes place. This entails examining which contextual characteristics are required in order for the program to exert its effects. Such an evaluation is called an 'evaluation of the program theory' (Wartna, 2005). The effectiveness of the program will not be studied in the present study. However, the evaluation of the program theory should shed light on the question if and if so, for what reasons, the program appears promising based on an examination of the plans behind it.

A number of research methods are applied in this evaluation of the program theory. A literature search was conducted and persons involved were interviewed. In addition, documents of policy and scientific publications underlying the pretreatment program were studied. The topics that were discussed in the semi-structured interviews were the content of treatment, the motives for the chosen approach, and the intended treatment goals. The results from studying the publications and documents of the therapists were compared to findings and recommendations from the international literature on the treatment of sex offenders.

Different research traditions have emerged in evaluating program theories. In this evaluation, principles from the *What Works* and *Realist Evaluation* traditions were used. In addition, criteria of the Accreditation Panel for Behavioral Programs for offenders in the Netherlands were used in formulating the research questions. In the *What Works* tradition, the efficacy of treatment programs is determined based solely on research studies with a strong methodological research design, preferably a Randomized Controlled Trial (RCT). The *Realist Evaluation* tradition emphasizes the importance of understanding the presumed working mechanisms and the context in which they are thought to result in behavioral change, also of studies with a weaker methodological design.

Results

Objectives of the pretreatment program

The pretreatment program of the Breda Penitentiary has four objectives, namely to:

- 1 prevent a deterioration of psychological complaints;
- 2 prepare for post-detention treatment;
- 3 shorten the length of post-detention treatment;
- 4 contribute to prevent recidivism.

Contents of the program

The program consists of three treatment components. The first is the 'protective living' ward, which is meant to facilitate and support reaching treatment objectives. The ward has characteristics of a therapeutic community and all personnel are constantly watching and commenting on the behavior of the inmates, for instance during sports or just when walking on the ward. The other two components of the pretreatment program are two weekly sessions of therapy (1.5 hour each). The first is cognitive behavior group therapy (CBT) and the second psychomotor and drama therapy (PMDT). The group formation is the same in both sessions (eight participants in each group). At the time the present study was conducted (April 2009), there were three groups of eight participants taking part in the program. In addition, one group of six participants with intellectual disabilities was participating.

In addition to group therapy, participants can request individual therapy sessions with the penitentiary's psychologist. Individual sessions can also be suggested as useful to a participant by the psychologist himself, for instance when someone lacks progress in sessions. In some individual cases, the psychologist of the penitentiary uses Eye Movement Desensitization and Reprocessing (EMDR). Finally, participants can attend weekly sociotherapeutic sessions. In sociotherapy the focus is on detention-related topics, but not on the offence(s) itself. Sociotherapy is not a formal part of the pretreatment program.

In- and exclusion criteria

Participation in the pretreatment program is open to all sex offenders who are able and willing to participate. Exclusion criteria are serious psychological disturbances, limited intellectual abilities, psychopathy or serious personality disorders. Finally, confession of the offence(s) or at least acknowledgement of serious problems with sexual deviant behavior is required for offenders to be able to participate.

Theoretical foundation of the pretreatment program

The main approach of the program is cognitive behavioral. Several models are central in this program: the offense chain procedure, the relapse prevention model, the biopsychosocial learning theory of Marshall and Barbaree, Young's schema-focused therapy and the self-regulation model of Ward and Hudson.

Objectives and presumed working mechanisms

A number of working mechanisms are unraveled that link program components to objectives. These will be discussed one by one below.

Mechanism 1: therapeutic community

Sex offenders are at the bottom of the hierarchy in prison settings. They are frequent targets of abuse and intimidation. For this reason, the Breda penitentiary has one ward specifically set up as a ward for protective living. By separating the sex offenders from the other inmates, abuse and intimidation are prevented. This is presumed to prevent social isolation, depression and suicide and thereby serves the first objective of the pretreatment program, that is, to prevent the deterioration of psychological complaints.

Mechanism 2: Providing information

Information on what to expect in (post-detention) treatment is provided, because in the experience of the therapists, the prospect of post-detention treatment can cause anxiety. This anxiety can arise when it is unclear what to expect from post-detention treatment. By providing information on what to expect, at least part of the insecurity can be taken away. Also, providing information is used to illustrate what benefits can come from treatment.

Mechanism 3: Starting treatment

The third mechanism in preventing a deterioration of psychological complaints is starting treatment. Instead of merely detaining sex offenders, with the risk of a worsening of psychological symptoms, the thought behind this mechanism is that by starting to treat the symptoms, they will (at least) not worsen.

Mechanism 4: increasing self-consciousness

To prepare sex offenders for their post-detention treatment, the therapists aim to increase awareness of the background and risk factors that have contributed to committing the offence. In addition, attention is given to inadequate solutions for

handling problems and cognitive distortions that serve to justify deviant behavior. The deviant nature of the offence itself (the fact that the offence is harmful and beyond prevailing standards) is also discussed, along with its harmful effects for the victim (and the offender). Increased self-consciousness is assumed to lead to clues as to how to break the chain of events leading to committing (future) crimes, in order to prevent future re-offending.

Mechanism 5: Motivation

The second mechanism presumed to facilitate preparation for post-detention treatment is to increase motivation for treatment. The therapists give the offenders a lot of attention. By giving a lot of attention, it is assumed that the sense of self-worth is increased. An increased sense of self-worth is thought to be necessary for the ability to accept their problems with sexual deviant behavior, which will lead to a sense of necessary personal change, that is, motivation for treatment.

Mechanism 6: Skills for participation in therapy

Preparation for post-detention treatment also entails learning skills necessary for participation, which includes skills such as participating in groups and individual sessions. This concerns willingness to talk openly in groups and with a therapist. In addition, the therapists assume learning relevant terminology is helpful for participating in therapy. Finally, the therapists aim to improve self-reflection as a preparatory objective.

Mechanism 7: reducing the time spent on wards for intake procedures (of post-detention treatment)

This final mechanism is presumed to enable the third objective of the pretreatment program, that is to shorten the length of post-detention treatment. The therapists assume that the previous mechanisms (1-6) can lead to a facilitation of the initial period on wards for intake procedures of post-detention treatment. By facilitating this initial period, it is assumed that the duration of post-detention treatment can be shortened overall. The efficacy of this mechanism also depends on the efficacy of the previous mechanisms.

Discussion

The theory behind the pretreatment program is examining to what extent the pretreatment program follows principles of the *What Works* approach, the *Realist Evaluation* approach and the Accreditation Panel for Behavioral Programs for offenders in the Netherlands. The overall conclusion of the present study is:

Considering the objectives of the pretreatment program and the context within which it is given, a house of detention, in adjusted form it could constitute a meaningful addition to the standard regime in prison. Especially the safe climate on the 'protective living' ward and the humane treatment of sex offenders are valuable assets of the program. However, the theory applied is dated.

The main shortcoming of the program is that it is dated. For instance, the offence chain is not used according to the most recent scientific insights. Also, the Risk-Need-Responsivity principles are not employed (RNR). A useful addition to the RNR-principles is the Good Lives Model which has not been incorporated in the pretreatment program either. This results in the following limitations:

- Instruments for structured risk assessment are not used (*Risk principle*).

- The level and intensity of the program are not adjusted in a structured manner to the heterogeneous target population of the pretreatment program (*Responsivity principle*).
- Following the RNR principles, several in- and exclusion criteria of the pretreatment program should not be employed. For instance, high-risk offenders such as psychopathic sex offenders and sex offenders who deny committing their crime, are excluded from the pretreatment program, but according to the RNR principles the persons with the highest risks should be the ones who follow the most intense form of treatment.
- The criminogenic needs of the participants are not met in a systematic manner. Offence behavior is considered to be the result of deviant tension regulation (only), while other important causes of delinquent behavior such as paraphilia and hypersexuality are not targeted (*Need principle* and insights of the selfregulation model).
- There is no program leader who guards program integrity and although there is a manual, this is only followed loosely.
- Treatment goals are monitored subjectively and not objectively, while using different kinds of instruments.
- One of the main objectives of the pretreatment program is to prepare sex offenders for post-detention treatment, but there are no documents indicating communication or transfer of information between Breda penitentiary and the post-detention clinics.

In conclusion

The aforementioned conclusions were reached after studying the plans behind the program theory of the pretreatment program. A different picture may arise when studying the pretreatment program in practice (a process evaluation) or after studying the effects of the intervention in an effect evaluation. Furthermore, it may not be possible to adapt the program simply by taking the aforementioned limitations as suggestions for change and by applying them one by one. There are several reasons for this. The program is being given in a house of detention, which, due to the policies that apply in such a place in the Netherlands, places limitations on a therapeutic program. In addition, the target population is heterogeneous and it is possible that several versions of the program should be developed to meet the criminogenic and other needs of subgroups within the group of sex offenders that at present is eligible for pretreatment. Finally, the pretreatment program should consider the fact that its main goal is to prepare for post-treatment, and in this manner it should find a way to more fluently fit in with the post-detention treatment programs that lie ahead.