

# Do All Offenders Benefit from Programmes?

Danny Clark explains why some offenders are unsuitable for existing offending behaviour programmes.

Offending behaviour programmes should be capable of benefiting everyone. This universal applicability is a core principal of social learning theory, the theoretical model of change that underpins most effective programmes. Social learning theory was first described by the American psychologist Albert Bandura (1977). It offers an explanation of how humans and, to some extent, other species first learn, then develop and change their behaviour through a process of observation of others, trial and reward. It recognises the importance of the cognitive processes and the situational context in the control of behaviour. Social learning theory applies to offending behaviours just as much as any others. It is from this paradigm that the behaviour modification techniques termed 'cognitive-behavioural methods' and the pro-social modelling approach stem. This is not to say that the very same programme would suit everyone. One of the key principles drawn from the 'what works' research is that of 'responsivity'. Responsivity involves designing and delivering programmes in a manner which makes them accessible to the client group. In practice this may mean tutors adapting their treatment style to suit their particular group, it may mean using culturally relevant examples or it may mean developing entirely different programmes for certain groups of offenders.

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Certainly not all offending stems from the same motivations. It occurs in different situational contexts and is probably supported by a different set of attitudes and beliefs for each offender. However, this does not detract from the fact that the basic methods of attitude and behavioural change apply.

Given this, why the need for general exclusion criteria for the accredited programmes available to prisoners and offenders supervised by the probation service? Well some of the exclusion criteria are linked to issues of responsivity. For example, offenders with severe learning difficulties or low IQ can benefit from programmes, but would require special adaptations to the material which would make the programmes less meaningful and responsive for other offenders. At the time of writing, the prison service has plans underway to develop editions of ETS (Enhanced Thinking Skills) and SOTP (Sex Offender Treatment Programmes), for these groups.

Work at Rampton Special Hospital with mentally impaired offenders indicates that programmes for this group need to be longer, more behaviourally based and delivered more slowly. The feasibility of running this option in the community is limited by the geographic spread of such offenders. Other restrictions are temporary and relate to the

offender's likelihood of completing the programme at that time. For example, factors such as severity of drug / alcohol misuse, mental health problems or difficulties such as homelessness interfere with treatment. Here, there is often a conundrum in that completing the programmes would assist the individual in addressing these problems.

There is another group of offenders, which research has demonstrated fail to gain any benefit from programmes and may actually become more likely to reoffend following attendance at them. These are offenders who suffer from psychopathic personality disorder. This group of individuals are defined in a number of ways by different authorities and jurisdictions (see Lösel, 1998). They are usually described as having a persistent life-long history of anti-social behaviour, they will fail to learn from experience or accept responsibility. A description of their personality will include such adjectives as impulsive, reckless, manipulative, deceitful, guiltless, lacking in empathy and egocentric. Some would argue that much of this description would fit a large percentage of the offender population, but it is perhaps the degree and the consistency with which these traits are exhibited in all areas of life which sets this group apart. Although psychopathy was first clearly described as a personality type by Cleckley (1976), and has been refined and documented

by Hare (1991), the prevalence of the condition within the offending population is difficult to establish. Psychopaths are by no means limited to Special Hospitals. Using the Hare measure (PCL - r) a recent study of a random sample of prisoners in the UK suggested around 15% might meet the criteria. The study indicated that the greatest numbers were found in the high security estates (presumably having been convicted of serious offences), but significant numbers were also found in medium, low and open prison establishments. Perusal of the criminal records of established psychopathic offenders shows they are often sentenced to periods of community supervision and community service during their criminal careers (they commit many minor offences), so one imagines that at any given time a fair number will be under probation supervision.

Attempts at treating offenders with psychopathic traits are well documented. Lösel (1998) reviews many of these studies. He notes that all treatment modalities from early attempts at non-directive psychotherapy, structured groupwork and therapeutic communities have failed to make an impression. Hobson, Shine and Roberts (2000) showed that offenders at HMP Grendon (the UK's only prison with a specifically psychotherapeutic regime) who scored highly on the Hare psychopathy checklist were less likely to progress, more likely to be removed from the unit and more disruptive. Hare *et al* (2002) describe the performance of offenders with high levels

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of psychopathic traits in structured programmes in the UK, North America and other European settings.

In the British programmes high psychopathic trait prisoners were compared with other non-psychopathy prisoners who attended a number of short term structured interventions, such as anger management courses, social skills programmes and offence-focused work. While the other offenders seemed to benefit from the programmes and had lower reconviction rates than a comparison group of non-attenders the high psychopathy individuals were more likely to drop out and did not show any change in reconviction rates. In the same study, attendance at educational or vocational programmes was monitored. Non-psychopathic offenders attending such programmes did make gains which were translated into lower reconviction rates (where an established need existed, i.e. poor basic skills / work skills), but for the high psychopathic group, this was not the case. This finding suggests it is not only psychological interventions which are ineffective with this group, but the more practical skills-based options as well. Such skills are emphasized in ECP (Enhanced Community Punishment). Research suggests that certain interventions may make high psychopathic trait offenders worse (again, see Lösel, 1998 and Hare, *et al.*, 2002). The most well known study is that conducted at a residential therapeutic community in Canada. Here researchers found that the overall impact of the treatment on reconviction rates was

offenders or of high status in the eyes of the offender. Psychopaths tend to have little respect for anyone. The impulsive nature of psychopathic individuals means that it is difficult to engage their attention in a group setting, especially if the immediate focus of the work is not themselves. Finally, it has been suggested that psychopaths' inability to empathise with anyone allows them to take any interpersonal skills they may be taught and use them in an anti-social way.

Does this mean that psychopaths are likely to remain outside the realm of normal treatments?

This is an empirical question on which experts are divided. Blackburn (1975) wrote that we have made much progress in describing psychopathy as a condition and understanding its aetiology, but, as yet, have not made much headway towards amelioration. The situation is very much the same today. Lösel suggests we should view psychopathy as a 'moderator' of treatment effectiveness, a factor which must be borne in mind and catered for responsively as we would any other diverse aspect an offender brings to the group.

He suggests a number of ways in which treatment could be made more effective with this group. Unfortunately his suggestions are primarily based on the assumption that treatment will be undertaken in a secure residential environment where all aspects of the day to day regime can be monitored and controlled. This may indeed prove to be the most effective route

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negligible. However, when splitting the sample into psychopaths and non-psychopaths they found that the non-psychopaths had significantly reduced reconviction rates whereas the psychopaths had significantly got much worse and were reconvicted more often than expected. This increase in reconvictions amongst the psychopaths masked the positive effects of the programme on other offenders, and indeed in this instance led to the programme being cancelled.

Why should programmes be at best ineffective and at worst damaging to this group? One explanation could be that this group includes the most persistent 'hardcore' offenders in terms of criminal attitudes and behaviour. Therefore, they are the least likely to change. Another view which is shared by the author is that there are certain facets of the psychopathic personality syndrome which mitigate against effective treatment be they cognitive-behavioural approaches or any other modality of treatment in use. Two well-established psychopathic traits are failure to learn from experience and 'recklessness'. Psychopaths do not seem to be able to generalise learning from one situation to another, nor do they seem to have the anxieties about risk that are common to most people. In psychological terms, this means that they are less easily conditioned than most of the population. Another well established trait is the constant desire to deceive and manipulate others, sometimes just for the sake of it. In terms of treatment, this makes it extremely difficult to establish a 'therapeutic alliance' between the tutor/therapist and the psychopathic client, which forms the basis of most interventions. In a group setting, this lack of alliance extends to all group members. Psychopathic individuals are extremely egocentric, they have a grandiose sense of self worth. Social learning theorists agree that for social modelling to be effective, the person representing the model must be respected by the

for those offenders with psychopathic personality disorders who have clearly been shown to be a risk of serious harm to others. The Prison Service Offending Behaviour Programme Unit is currently developing such a programme.

But it seems likely that for the foreseeable future there will remain a small group of psychopathic offenders in the community for whom our present repertoire of programmes will not be of benefit.

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