Research in Brief

What Works to Reduce Recidivism


Key Words: Evidence-based practice, recidivism, cognitive-behavior therapy, risk assessment

Summary/Conclusions

The article provides a definition of evidence-based practice (EBP) and introduces the reader to the basic elements of using EBP in the real world. The article has practical applications for line staff and management. The significance of EBP to probation is an increased efficiency in how we do our work and the increased effectiveness of our work, in other words, improved success rates, positive behavior change, and reduced recidivism. The author, Edward Latessa, is a professor and head of the Division of Criminal Justice at the University of Cincinnati. Dr. Latessa’s work focuses on evidence-based practices and implementing what works in corrections.

Limitations of Information

The article presents one definition of evidence-based practice. Although there are several definitions in use, most definitions contain common elements. The Risk, Need, and Treatment Principles are common in EBP literature but are not the only considerations for supervision. It is commonly recognized that issues of responsibility, offender monitoring and staff training needs impact community supervision, and these issues are not addressed in the article. More specific information is provided in “EBP: What is it and What does it Mean for Colorado Probation?” on Judicialnet.

Caveat: The information presented here is intended to summarize and inform readers of research and information relevant to probation work. It can provide a framework for carrying out the business of probation as well as suggestions for practical application of the material. While it may, in some instances, lead to further exploration and result in future decisions, it is not intended to prescribe policy and is not necessarily conclusive in its findings. Some of its limitations are described above.

In brief, evidence-based practice (EBP) refers to using theoretically sound, well-designed programs that have been empirically shown to reduce recidivism and produce other specified outcomes such as positive behavioral change. As the result of many studies, a set of guiding principles have been identified as crucial to evidence-based practices.

Risk Principle:
It is imperative to target the higher risk offenders with the most intensive interventions. This principle also means limiting intervention with lower risk offenders. Research has shown the rates of recidivism actually increase for lower risk offenders when they are placed in more intensive interventions.

Need Principle:
Completion of a good assessment identifies the probationer’s criminogenic needs. These needs must clearly be identified and addressed through matching referrals and treatment to the probationer’s individual needs.

Treatment Principle:
The most effective treatment programs are behavioral in nature. It is critical to ensure the treatment provider or the facilitator follows the model of treatment, while focusing on action and skill building.

In addition to these three principles, there are a variety of other considerations, which will effect the success of supervision. For example, barriers to success and lack of motivation need to be addressed, probation officers can assist the offender in removing barriers and influence decisions by implementing good motivational interviewing techniques.

Practical Applications

✓ Complete assessments thoughtfully, using motivational interviewing skills.
✓ Learn as much as possible about the probationer and use that information in the case plan and to guide your case management strategies.
✓ Do less with low risk offenders. The more you do with these offenders, the more you are apt to disrupt the very factors which make them low risk.
✓ Distinguish basic criminogenic needs from non-criminogenic needs. For example, a successful drug dealer may not need financial management or job skills, instead he may need to change his attitudes and thoughts that support engagement in illegal behavior.
✓ When referring offenders to treatment, whether for substance abuse or domestic violence, ensure the provider is using a treatment model that includes a minimum of 40% cognitive behavioral instruction. Research shows that substance abuse counseling (or other types of treatment), which involves talk therapy, will have little effect with our probationers.