Colorado Probation Research in Brief

Dosage is more than just counting program hours: The importance of role-playing in treatment outcomes


Role-plays Make an Impact

Summary/Conclusions

In the present study, researchers were interested in the effect role-play exposure had on recidivism. The study examined the role-play frequency of 980 adult male offenders successfully discharged from a community based corrections facility. For study participants, role-plays reduced the likelihood of recidivism for medium and high risk offenders. Role-plays with lowest risk offenders did not show significant results.

Limitations of Information

The population of the study were adult offenders, mostly Caucasian, from rural communities. While the study utilized recidivism, it was limited to incarceration in a state prison post-discharge from the program. Researchers could not distinguish exposure to role-play from offender engagement in role-plays. The study did not identify who facilitated the role-plays. Outcomes may be different depending on the professional role of individuals conducting the role-plays.

Previous research has identified the importance of matching an offender’s risk with the appropriate intensity and duration of treatment.* This research has largely focused on the dosage required for various offenders. The current research article explores the impact role-playing has on recidivism. *See the February 2014 RIB.

In this study, researchers used a sample of 980 male offenders successfully discharged from a community based corrections facility. The sample was mostly composed of white males in their early 30’s. Offenders were tracked, on average, for a period of 1,339 days. Researchers categorized the sample by race, risk level, hours of treatment completed, number of role-plays per week, and recidivism. Recidivism was defined as return to a state prison for any reason (technical failure or new crime). Statistical modeling on the data provided insight on the effect the number of role-plays had on outcomes for offenders.

Researchers discovered that the more role-plays high and medium risk offenders were exposed to each week, the likelihood of recidivism decreased. Only 17.95% recidivated when exposed to 3 or more role-plays per week. For medium risk, there was a similar effect with a 25% decrease in recidivism for offenders who were exposed to 3 or more role-plays per week. High risk offenders who were not exposed to any role-plays recidivated at a rate of 70.83%. Role-plays with the lowest risk offenders did not produce any statistically significant outcomes. When role-plays and treatment hours were combined, statistically significant outcomes were produced for medium risk offenders with 100-199 hours of treatment and high risk offenders with 100-199 hours and 200+ hours of treatment.

Practical Applications:

- Include role-play during skill practice to reduce recidivism. Officers may use role-play as part of Intervention Based Appointment with clients.
- While the study did not mention the topic of the role-plays, try role-plays that connect to the probationer’s target behaviors.
- Provide the probationer with homework to practice various skills in role-plays with supportive family and friends.
- Use MRT and CBT for higher risk probationers. Combining treatment with role-plays decrease the likelihood of recidivism.
- Consider treating appointments as a precious resource. Focus your time on higher risk probationers.
- Extend appointments with high risk probationers to work on skill building and role-plays.
- Probationers may be exposed to role-plays through treatment or cognitive groups.
- Ask probationers if they want to practice skills they are learning in treatment during appointments.
- Coordinate with treatment providers to maximize the number of role-play exposures the probationer is experiencing each week.

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.

Key Words: Community corrections, correctional treatment, dosage, role-play, CBT

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