

Colorado Probation Research in Brief

A systematic review and meta-analysis on the effects of young offender treatment programs in Europe

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Summary/Conclusions

The present study analyzed treatment programs for young offenders in Europe. Drawing from 21 controlled evaluations with 7,940 offenders, the study discovered that treatment that incorporated Cognitive Behavioral and Behavioral Treatment programs with Risk-Need-Responsivity (RNR) principles had the largest impact on re-offending. The studies revealed a 16% reduction from a 50% baseline re-offense rate in control groups. Community based treatment, small sample sizes, high program fidelity, and as a part of a pilot project were all factors that had positive effects on outcomes.

Limitations of Information

The type of study conducted was a meta-analysis. Meta-analysis's are powerful in identifying broad themes in programming; however, organizations should not try to replicate the design or results from a meta-analysis. Organizations may have different opportunities or needs than organizations contained within a meta-analysis. The study consisted mostly of studies completed in the United Kingdom. It is unclear if other countries would produce similar results.

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.

Influencing Factors of Treatment

Young offenders are a criminal justice population drawing much attention. Effectively treating and creating behavior change in young offenders benefits the public monetarily (in future cost savings) and more importantly future public safety. Researchers utilized studies from 1980 to 2009 regarding European corrections based treatment to determine the effectiveness of different treatment types on the re-offense rate of young offenders (under the age of 25). The study also examined different components of treatments to determine what characteristics had an impact on the effectiveness.

Researchers conducted a search for relevant articles and located 21,223 unique studies. After screening for eligibility criteria (e.g. location, population, outcome measures), the number of articles included in the study was reduced to 21. The studies analyzed 7,940 offenders with an average age of 17.9 years. Researchers then sorted, categorized, and analyzed the effect sizes of the different variables contained in the studies. The study used re-offense as an outcome, which was defined as any formal legal action or any self-report of re-offense.

The study concluded Cognitive Behavioral and Behavioral Treatment programs were more effective than deterrence based, non-behavioral, and other types of treatment. When the cognitive behavioral and behavioral treatment had high adherence to RNR, there was a 16%

reduction in re-offense from a 50% base rate of re-offense in control groups. Researchers also discovered that the following factors had an impact on effect size: provided in a community setting, small sample sizes, high program fidelity, and as a part of a pilot program.

Practical Applications

- ✓ Refer medium and high risk young offenders to cognitive behavioral treatment (CBT).
- ✓ When possible enroll probationers in treatment when they are still in a community setting, as this gives probationers a chance to practice skills learned in a real world environment.
- ✓ Adhere to the Risk principle by separating groups by risk level. This will also help ensure that high and medium risk clients are receiving the proper dosage.
- ✓ Facilitators should ensure that specific responsivity (e.g. cultural, learning, gender, trauma) factors are addressed by discovering and accounting for any issues that may impact the client's participation in treatment.
- ✓ Routinely check the fidelity of in house CBT programming. This will ensure the program is being facilitated as intended.
- ✓ Have conversations about curriculum type and fidelity of treatment with providers.
- ✓ Consider utilizing Carey Guides, IBA, and other in-appointment CBT interventions.