

# Research in Brief

## Change-Focused Supervision

**Source Document:** Change-Focused Youth Work, The Critical Ingredients of Positive Behavior Change, Michael D. Clark, Journal of the Center for Families, Children and the Courts, 2001

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**Key Words:** strength-based strategies, juvenile, case management, treatment, behavior change

### Summary/Conclusions

Michael D. Clark gathered extensive therapeutic outcome data through meta-analysis (the study of studies). The conclusion is clear: *therapy is effective*. However, no particular method or approach is exclusively better than another with all populations. The research shows the common thread among effective therapies that impact change contain similar characteristics. The “four common factors” are strength-based in nature and are described as “common-sensical and usable for educators, community youth staff, and juvenile court personnel.”

The four common factors that contribute to positive behavior change are:

- 1) **Client factors**
- 2) **Relationship factors**
- 3) **Hope and expectancy;** and
- 4) **Model/technique**

Conclusively, all staff can become change-focused. They should share the “expert” role with the probationer and family. Treatment should not simply fix what is broken— it should nurture what is best. A greater concentration on building a therapeutic alliance between staff and probationers should be emphasized.

**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.

### Practical Application

*The following ideas are offered for consideration by probation staff and were either specifically suggested by the authors of “Change-Focused Youth Work” or the contributors to this “Research in Brief.”*

√ **Client factors** are the largest contributor to behavioral change (40%). It’s not what staff, programs and therapist do to clients, it’s what the probationers possess when they walk in the door.

√ Client factors can be **internal** (optimism, skills, interests, social tendencies, aspirations, past success) or **external** (a helpful family member, employment, membership in a group or faith-based community) and may change quickly with influence from life experiences or people and or situations that impact the probationer.

√ Utilizing a strength-based model to capitalize on the client factors should be highly effective. Focusing on what the probationer has, rather than what he does not have, promotes solution-focused plans and nurtures the positive.

√ **Relationship factors** supply 30% of the overall contribution to change. Relationship factors include: perceived empathy, acceptance, warmth, trust and self-expression. The strength of the partnership between the staff and the probationer is crucial to success.

√ Probationers want to be listened to and understood.

√ Treatment programs and plans should be congruent with the probationer’s general belief system. It needs to *make sense* to the probationer.

√ Attentive listening is curative. Allowing the probationer to express themselves will create an atmosphere of interest and concern.

√ **Hope and Expectancy factors** contribute to 15% of the overall goal of positive change. Staff can have an impact on the probationer’s hope and expectancy in three ways: 1) express an attitude of hope without minimizing the current problems/feelings of the probationer; 2) focus the treatment goals and plans towards the future, not the past and 3) inspire empowerment and possibility.

√ **Model and Technique factors** account for 15% of the total contribution for positive change. Procedures, techniques and beliefs fit in this category. The basic strategies and methods employed in groups and treatment provide a venue for the other factors to be utilized and demonstrated. Mainstream treatment models and content will be beneficial if the other factors are used in the process.

### Limitations of Information

The focus of this article and the work of the author, Michael Clark, is limited to adolescents. Nonetheless, application to an adult population is possible. No adult outcomes studies were included in this article.

Although this article refers mostly to treatment and therapists’ interaction with probationers, the author specifically indicates these “common-sense” methods transcend treatment and therapy settings and are applicable to all who work with probationers.

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