



National Offender
Management Service

NOMS Evidence and Segmentation

**Companion document
to NOMS
Commissioning
Intentions from 2014**

NOMS Evidence and Segmentation

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Contents

1. Introduction	3
2. Evidence-informed commissioning.....	4
Defining evidence and how it should be used.....	4
Impact evaluations.....	4
Process Evaluations.....	5
When there is no evidence base.....	5
3. Using segmentation information to inform commissioning	6
Offenders’ likelihood of any reconviction.....	6
Likelihood of any violent reconviction	6
Likelihood of sexual reconviction	7
Likelihood of seriously harmful reoffending.....	7
Offenders’ current offence.....	7
Offenders’ sentence length and type.....	8
Gender.....	8
Age	8
4. The evidence behind the Commissioning Intentions from 2014	9
Environment and culture in community services for offenders.....	9
Effective prison environment and rehabilitative culture	10
Staff behaviours that promote desistance.....	11
What drives reoffending?	12
Characteristics of effective interventions.....	13
Quality	13
Evidence based supervision of offenders in the community.....	17
What is unlikely to reduce reoffending?	17
Sex offenders	19
Violent offenders	19
Acquisitive offenders, including burglars and robbers	20
Drugs offenders.....	20
Motoring offenders.....	20
Responsivity and diversity.....	20
Women.....	21
Young male adult offenders	22
Short sentence prisoners (those sentenced to less than 12 months imprisonment).....	23
Indeterminate sentenced prisoners (life and ISP sentences)	24

1. Introduction

The National Offender Management Service (NOMS) is continually working to improve the effectiveness of the services it is responsible for commissioning, and ensure that investment maximizes outcomes for offenders and the public, providing good value for money. As part of this, NOMS is committed to improving our understanding of what works, with whom, and under what conditions, and to ensure that this understanding is used to inform the effective commissioning of offender services.

This document sets out NOMS' position on evidence, how it should be used, and summarises what is currently known about the effectiveness of different approaches with different groups of offenders, following the segmentation model that was introduced by the Agency last year. It builds on the information that was published to support the 2013-14 commissioning process. It also complements the recently published '*Transforming Rehabilitation: a summary of evidence on reducing reoffending*' (Ministry of Justice Analytical Series, 2013). This document has been revised to support the Agency's commissioning intentions from 2014, with which it should be read in conjunction, and so there has been a change in structure and emphasis from last year's Commissioning Intentions Evidence Chapter. There have been some additional changes or updates as a result of new evidence coming to light, and some small changes to phrasing here and there in response to feedback or to make the document more readable. We have also added academic references to support the points made.

The evidence has been structured to reflect the high level intentions as set out in '*NOMS Commissioning Intentions From 2014*' (NOMS, 2013). It is designed primarily to help inform discussions and negotiations between commissioners and providers of custodial services, including public sector prisons, as they agree SLAs and contracts from 2014. We anticipate that it will also be of interest to wider stakeholders and partners across the criminal justice system.

The document starts by explaining how NOMS defines evidence and outlines approaches that should be taken where evidence is lacking or inconclusive. It then explains in more detail the ongoing work in NOMS to segment the offender population and improve understanding of what works in delivering different outcomes for different groups. Finally, it sets out the relevant evidence that supports the first five of the high level overarching intentions from 2014.

2. Evidence-informed commissioning

NOMS is committed to evidence-informed commissioning and wants the services it commissions to make a real and positive difference that delivers desired outcomes for offenders and the public. NOMS commissioning intentions for 2014 describe our desire to see resources focused on evidence-informed interventions and services which are likely to deliver the best outcomes for the investment. This includes targeting factors shown to be related to our range of outcomes and using a service design which will be effective with the groups who receive it.

Criminal behaviour has multiple causes, and desistance is more likely to be achieved through a combination of activities, services and social circumstances. It is not expected that a single service will always demonstrate an impact on reconviction without taking into account the other circumstances of an offender's life.

Defining evidence and how it should be used

There is a range of research and evaluation evidence available. However, not all research is of sufficient quality to reliably answer important questions about the impact of services. This section aims to explain the different types of evaluation, and how they can be used to best effect to inform commissioning decisions in order to ensure public money is well spent and that services deliver the right outcomes for offenders and the public.

Impact evaluations examine the extent to which a service is achieving the outcomes it sets out to achieve, whether this is a reduction in reoffending or other intermediate outcomes. NOMS particularly values **impact evaluation evidence** that uses a matched comparison group, a large enough sample size to detect an effect, statistical analysis to be sure that any apparent effect did not just happen by chance, and evidence that has been peer-reviewed. Suitable impact evaluation evidence includes the following:

- Randomised controlled trials
- Evaluation studies that compare the group receiving the intervention or service with a suitably matched comparison group (using propensity score matching or individual matching techniques) of offenders who did not receive the service
- Evaluation studies that demonstrate the value of the intervention or service on reducing reoffending by comparing the actual reconviction rate against the predicted rate produced from a high quality predictor such as OGRS¹

An impact evaluation which meets the criteria above and which shows positive change on factors linked to reoffending (see Table 1 on pages 14-16) is an important demonstration of the value of a service. We recognise, however, that quantitative studies of the sort listed above are difficult to conduct, particularly for evaluations of services that run on a small scale, and which therefore may not be able to demonstrate a statistical measure of their impact. Consequently, conclusions may be drawn from **findings aggregated**

across several studies, as in, for example, meta-analyses², which combine the findings from two or more high quality individual studies (such as those mentioned above) to produce statistical estimates of impacts.

Process Evaluations describe how well an intervention or service is being implemented in practice. Process evaluations are an important type of research. They may explain *why* interventions are working or not working, and they can identify the quality of implementation (called “treatment integrity”). Process evaluations are particularly important when an intervention is running across different places, to know whether or not we can combine the data from the different sites for outcome analysis. But process evaluations in themselves do not tell us about the *outcomes* of an intervention – whether it works - and so have less value for commissioning than impact evaluations.

High quality qualitative research is also valuable particularly in understanding how people experience interventions and services, the nature and impact of the context, culture and mode of delivery of interventions and services, and for understanding whole systems such as prisons. Where **qualitative research is conducted according to rigorous standards**, and uses recognised analytical techniques to reach conclusions, it should be taken into account. Qualitative studies that do not meet these criteria, success stories or testimonials, and anecdotal reports are not considered to demonstrate evidence of effectiveness and therefore cannot, on their own, be used as evidence for commissioning services.

When there is no evidence base

As Table 1 (see pages 14-16) shows, there are many areas where an evidence base is limited or evolving. In these cases it is recommended that:

- There is a clear description of the service, including who it is for, and the outcomes it aims to deliver
- There is a clear, plausible rationale for why the service should work. The rationale should include reference to published high-quality evidence that supports the approach being taken. NOMS welcomes innovative approaches that are less tried and tested, but they should still be grounded in a credible theoretical model of change
- There is a strategy in place for gathering evidence about whether the service works, using a high quality methodology

NOMS will continue to work in partnership with providers to develop and enhance the evidence base on all outcomes and share our position in relation to this evidence. Through its National Research Committee, which advises on and clears research proposals³, we will aim to improve the quality of research and thus improve the evidence base upon which we can commission.

The NOMS National Research Committee works to ensure that research conducted with offenders is of sufficient quality.

3. Using segmentation information to inform commissioning

Segmentation is an ongoing programme of work, led by NOMS Commissioning Strategies Group, which is developing and synthesising the evidence on what works in delivering different outcomes for different groups. Segmentation also provides commissioners and providers with a shared picture of relevant characteristics of the offender population at national, regional and local levels so that they can apply the evidence in order to invest in services that are most likely to deliver better outcomes and value for money.

Segmentation therefore supports NOMS in delivering efficient, quality services which are evidence informed (Commissioning Intention number 3) by ensuring delivery is matched to population, purpose and NOMS outcomes (Commissioning Intention number 4).

NOMS intends to develop its segmentation approach year on year, ensuring that the approach:

- Provides flexible tools which allow commissioners and providers to cut their data in different ways to answer different questions
- Reflects operational and organisational priorities and developments, such as aligning with the Transforming Rehabilitation Programme and the Reconfiguration of the Prison Estate
- Is clear and transparent
- Where possible uses assessment tools and data which are available locally
- Enables the evidence base to be matched to delivery
- Promotes new research that broadens our understanding of offenders' needs and how to work effectively to address them

From 2014, we will aim to provide information for each prison that describes the population in terms of the eight factors described below:

Offenders' likelihood of any reconviction

At present this is measured using the Offender Group Reconviction Score (OGRS). We will segment using the five score bands that were used for the commissioning round for 2013-14¹. Evidence suggests that interventions and services are most likely to impact on reconviction for those in the middle risk bands and may increase reconviction for those whose likelihood of any reconviction is low. Hence knowledge of the likelihood of any reconviction is crucial to applying investment principles.

Likelihood of any violent reconviction

As well as the likelihood of reconviction of any type, it is helpful when targeting violence-specific services to understand the likelihood of violent reconviction. Likelihood of violent reconviction is measured using the

¹ OGRS 0-24%, OGRS 25-49%, OGRS 50-74%, OGRS 75-89% and OGRS 90-99%.

OASys Violence Predictor (OVP) which is available as part of OASys, and so the segmentation approach for 2014-5 will include consideration of the OVP scores for violent offenders.

Likelihood of sexual reconviction

As well as likelihood of reconviction of any type, it is helpful when targeting provision for sex offenders who generally have low rates of any reconviction, to understand likelihood of sexual reconviction. The main instrument currently used to predict sexual reoffending is Risk Matrix 2000, however the RM2000 band cannot be generated from information held centrally. An alternative tool, the OASys Sexual Predictor (OSP), has however been developed and peer reviewed. It is a more accurate predictor of contact sexual reconviction and it has the advantage that it can be generated from information held centrally. Therefore, the segmentation figures that NOMS will make available to providers to assist planning of services for 2014-5 will rely on OSP scores for sex offenders. Practitioners will continue to use RM2000 when making individual decisions about treatment and case management, but OSP will provide commissioners and providers with information for volume commissioning.

Likelihood of seriously harmful reoffending

NOMS' definition of serious harm is: *'an event which is life-threatening and/or traumatic, from which recovery, whether physical or psychological, can be expected to be difficult or impossible.'* At present, an assessment of some offenders' risk of serious harm is made using the structured clinical ROSH assessment in OASys. Where completed, practitioners use their judgement to allocate offenders to a ROSH category: very high, high, medium, low. The ROSH assessment considers a range of future 'harms' (including harm to self, to staff, to known victims, to children or to members of the general public). An offender's ROSH category informs their allocation to an Offender Management Tier and is therefore integral to current resourcing models. However, it is not possible to use ROSH category as a core segmentation variable as these assessments are not available for all offenders and ROSH category cannot be generated from information held centrally.

As part of the Transforming Rehabilitation Programme, an actuarial tool is being developed (and expected to go live around April 2014), which will generate a score for every offender which will represent the probability that the offender will be convicted of one of a specified list of 'seriously harmful reoffences' within the next 12 or 24 months. The score generated will be a key piece of information for practitioners to consider alongside other risk information including their ROSH assessment. This information may in future be incorporated into the segmentation profile to assist commissioners and providers with volume commissioning in relation to seriously harmful reoffending. Refreshed data provided for commissioners and providers during the 2014-15 delivery period may be able to include this information. ROSH assessments, where available, will continue to inform the risk and case management priorities for individual offenders.

Offenders' current offence

While it is recognised that some offenders are versatile and that their index offence does not always represent their offending history, our work so far (and our review of international research in offence specialisation) suggests that for segmentation purposes, the index offence can be used as a proxy for a preference for a particular type of offending, and that individuals with different index offence types have meaningfully different characteristics.

Offenders' sentence length and type

Analysis of the short sentence prisoner group (those serving less than 12 months imprisonment) reveals, for instance, particular characteristics in terms of risk level and offending types. Indeterminate sentence prisoners may also be higher harm or have more needs than their likelihood of offending suggests, and are also subject to more stringent tests of suitability for release, and these conditions may justify additional case management or rehabilitation resources.

Gender

Different factors predict reoffending for women and men and these differences should be reflected in the commissioning of services.

Age

Young offenders are at higher risk of reoffending than older offenders, and their offending choices may be more versatile and less driven by drug dependency. These sorts of differences should be reflected in the commissioning of services.

4. The evidence behind the Commissioning Intentions from 2014

This section describes the evidence base underpinning NOMS' commissioning priorities as outlined in the NOMS Commissioning Intentions from 2014 document.

Commissioning Intention 1: Enhance public protection and ensure a safe, decent environment and rehabilitative culture

Successful rehabilitation needs an environment where an individual feels safe, hopeful, and where they are treated fairly and with consistency. These things are not *enough* for rehabilitation but they are *necessary*, and they are also important in their own right. The environment is largely determined by the attitudes and skills of frontline staff, and so creating an effective culture requires strong leadership.

Environment and culture in community services for offenders

One of the challenges for community-based offender managers is the requirement to perform both a surveillance/enforcement function and a support function through the same relationship. These tasks can often conflict. One United States study has found that a balanced position halfway between tough law enforcement and unchallenging support was associated with lowered reconviction⁴. This same study found that organisational supportiveness – such as having clear leadership in terms of the objectives and values of rehabilitation – was associated with better outcomes. Additional support for the importance of a rehabilitative focus for community sentences comes from a recent MoJ study on the relative effectiveness of community order requirements⁵. This study found that adding a supervision requirement to a punitive-only requirement reduced the rate of reoffending at one year and two years. Adding a programme requirement to a supervision requirement plus a punitive requirement also increased the reduction in reoffending. However, the addition of activity requirements did not reduce reoffending.

Theoretically, it would seem most likely that supervision will have an impact on recidivism when the relationship with the supervisor is personally important to the offender, and not just something that controls him or her. Emerging findings from the Offender Management Community Cohort Study (OMCCS⁶) suggested that the majority of people on Community Orders express positive attitudes towards their Order, believe it is likely to help them avoid committing further crimes and that it has given them an opportunity to give something back to society⁷. The most positive attitudes to Community Orders were associated with beliefs that the sentence was fair, that the Court had understood their personal situation, and that the Offender Manager had involved them in deciding the aims of the plan.

The SEEDS⁸ project, which has been introduced to many Probation Trusts, has developed training for staff based on the principles of collaborative supervision and organisational supportiveness described above. While there is no outcome information for the impact of SEEDS yet, staff trained in this way of working have responded positively to the training and believe it has improved their supervision practice.

Overall, therefore, the evidence suggests that **community supervision is most effective when those under supervision feel their circumstances are understood, that they are dealt with fairly and collaboratively by their Offender Managers, and when rehabilitation and supervision form part of their Orders.**

Effective prison environment and rehabilitative culture

While staff attitudes towards prisoners and rehabilitation are intuitively important, research by the Cambridge Prisons Research Centre⁹ suggests that positive staff attitudes are not *sufficient* for a prison to provide a safe, secure environment that supports rehabilitation. Above all, prisoners need rules to be enforced fairly but with authority, rather than inconsistently or with too much flexibility, so that their environments feel regulated. They express concerns about regimes they feel are insufficiently organised and boundaried.

Various different research programmes have independently established the importance that prisoners place upon **feeling safe**, which frees up the 'headspace' needed to **focus on using their imprisonment for rehabilitation and change**¹⁰. Prisoners and staff seem to differ in their perceptions of the degree to which a prison is safe, so it is important to understand this from the prisoners' point of view. Safety has been described as feeling you can trust others (both peers and staff), can find peace of mind, feeling free of the fear of attack, believing you are in safe hands, and consequently being able to relax your guard and think about other matters¹¹.

The Prisons Research Centre has carefully documented features of constructive relationships between prison staff and prisoners¹². There are two important aspects to a constructive staff-prisoner relationship: courtesy and effectiveness. Constructive relationships are first defined by **interpersonal courtesy, lack of aggression and avoiding insult and degrading behaviour**, and secondly that they involve '**getting things done**' – a willingness to support and swiftly process prisoners' applications and requests.

In addition, prisons which aim to mitigate the aspects of imprisonment that might lead to increased reoffending (such as disruption to relationships, impact on identity, labelling, and anti-social cultures where, for example, prisoners spend time boasting about their crimes to each other or teaching each other criminal skills) are more likely to have an impact on reoffending. The following five factors seem particularly important in mitigating the negative effects of imprisonment and reducing reoffending:

- 1) A safe, legal and decent environment where staff are confident but not aggressive in their authority and where everyone agrees that the purpose of the prison is to help people change their lives as well as protect the public.
- 2) Staff interactions with offenders are meaningful, consistent and constructive: tackling attitudes; teaching problem solving and perspective taking; leading by example; rewarding progress; giving hope; getting things done; making every conversation count. (See below for more information).
- 3) Effective interventions to address criminal thinking, attitudes and behaviour (see section 3 for more information).

- 4) Action to address drug and alcohol misuse (see Table 1 on pages 14-16)
- 5) A variety of resettlement and training services that improve prospects for housing, employment, income, strengthened family relationships, and social relationships with people not involved in crime (see Table 1 on pages 14-16)

Staff behaviours that promote desistance

The evidence described here draws mainly upon research with probation officers. We have assumed that the same principles apply in the prison environment and to other providers of supervision in the community. Studies of the way supervisory staff engage with offenders indicate that certain skills can enhance behavioural change. Two approaches evaluated in different countries and organisations (pro-social modelling^{13, 14}, STICS^{15, 16}) reach similar conclusions: **when frontline staff engage with offenders using a particular set of skills, there is a positive impact on reoffending.**

In addition, considerable research now suggests that individuals who desist from crime are usually very motivated to change their lives and feel confident they can turn things around. The offenders who clearly say they want to stop offending are most likely to desist¹⁷. The impact of these motivational factors has been found in long-term studies up to ten years after release from prison¹⁸. Many desisters talk about the powerful effect of having someone believe in them¹⁹ and of interactions that communicate a belief that they can and will change, that they are good people, and that they have something to offer society or others²⁰. Much work with offenders focuses on identifying and targeting risk factors – factors that increase the likelihood of reoffending. Often, less attention is paid to identifying and building personal strengths. Offenders notice when there is an emphasis on risks and deficits rather than strengths, and can be less inclined to engage when this occurs²¹. The best approach to take focuses equally on targeting risk factors, **and** recognising/building strengths. Staff with low expectations of offenders can create self-fulfilling prophecies which encourage recidivism. Staff with high expectations are more likely to increase determined attempts to change²².

The staff behaviours that seem to assist desistance, according to the research summarised above, are:

- The belief that engaging offenders in change is one of their most important objectives
- Conveying hope and optimism that change is possible; expecting success
- Demonstrating and teaching thinking and behavioural skills such as goal setting, communication skills, conflict resolution, emotional management and problem solving
- Building relationships that demonstrate genuine care about the individual, their desistance and their future
- Active listening
- Helping people set goals for changing their lives and steering them in a desisting direction

Commissioning Intention 2: Strengthen integration of service delivery between directly funded, co-commissioned providers and wider partners

To reduce reoffending it is important that offenders experience an integrated approach during their sentence, where individual relationships, interventions, and services combine holistically to address their individual risks and needs. A holistic approach requires an understanding of the whole offender journey, from court, via prison in some cases, to supervision and then unsupervised life in the community, and how an offender can be supported through that journey. If an offender receives consistent and integrated support, particularly at critical times in their journey, then desisting from crime is more likely.

Evaluations of the Integrated Offender Management pilots²³ identified that securing the support of key stakeholders is the cornerstone to the effective set-up and delivery of integrated services. Important features included co-ordinated support for offenders through the prison gate, inter- and intra-agency training to embed learning, cultural and operational change, robust governance and delivery structures, clear definitions of the roles and responsibilities of different agencies and agency staff and effective communication between all service providers. Barriers that inhibited development and delivery included a lack of shared understanding of different services, issues around leadership, competing agendas across different agencies, confusion around governance, problems coordinating data management, mixed messages around aims and sharing information too late.

Commissioning Intention 3: Deliver an efficient, quality service

Services are most likely to reduce reoffending if they are designed to target the risk factors that lead to reoffending, if they pay attention to quality of delivery, and if their methods are active and participatory and focus on teaching new skills.

What drives reoffending?

There are different, and sometimes conflicting, theories about why people commit crime and how reoffending can be prevented, and some theories have been more rigorously tested than others. It is only over time and through their application and testing across contexts that theories and the intervention based on them prove their worth, or not.

Criminological research has identified many cultural, social and economic factors related to reoffending – factors which are often exacerbated by possession of a criminal record. Most of these factors are beyond NOMS' control and so services tend to focus on the offender's personal factors which they can influence. Sometimes this means that wider contextual factors, and in particular problems caused by labelling and social exclusion, are ignored or seen as the responsibility of the offender to address. It is important to recognise the **obstacles to reintegration** that most offenders face, and work to help overcome these through both practical help and assistance.

Table 1 describes (in no particular order) nine factors that have good evidence to support their link to reoffending and desistance²⁴. The table suggests desirable intermediate outcomes associated with each

reoffending factor, and summarises the current evidence base for addressing each effectively. In some cases, the evidence base is strong and in others it is weak, inconclusive or almost entirely lacking. The table therefore exposes areas where additional evidence is needed and where evidence is promising but not yet conclusive. Table 1 will be updated as the evidence develops.

Characteristics of effective interventions

There is good evidence that three types of service can reduce reoffending:

- Offending behaviour programmes that are structured, mainly cognitive-behavioural, that tackle criminogenic needs (usually delivered in groups)
- Therapeutic communities (particularly for substance misusers but also for offenders with personality disorder or high risk offenders)
- Supervision in the community, particularly when sessions are structured and focused on criminogenic needs, such as those in Table 1

Evidence has shown that the following characteristics of an intervention or service are associated with reductions in reoffending²⁵. These principles apply to programmes, therapeutic communities, and supervision in the community:

- Explicit assessment and selection processes, so that interventions are focused on medium or higher risk offenders
- Focused on factors that predict reoffending (i.e. those set out in Table 1)
- Using well trained staff and supervising their delivery to ensure high quality implementation²⁶;
- Having an evaluation plan and researcher involvement
- Having an active, participatory style of working, rather than being mainly educational or very loose, unstructured and experiential
- Teaching participants skills, particularly social skills like interpersonal problem solving, conflict resolution, communication skills, and emotional management skills. Interventions that teach multiple skills are more effective than interventions that teach one skill only
- Effective interventions teach skills through active methods such as coaching and role-play, and encourage frequent practice of new skills in real life situations

Quality

The evidence is clear that interventions and services are more effective in reducing reoffending if attention is paid to the quality of delivery^{27 28 29}. Quality includes ensuring that the service is delivered as it was intended to be delivered and has not drifted away from its aims or methods. It also means using properly trained and supported staff, and paying attention to the quality of relationship between staff and clients, and between managers and those delivering the service. Although a focus on quality may make an intervention more expensive, paying attention to quality improves effectiveness and therefore, overall, value for money.

Table 1: Factors linked to reoffending/desistance and ways to address them

Reoffending Factors	Indicators (examples of behaviours indicating this reoffending factor is present)	Desired Intermediate Outcomes	Evidence based approaches to address this reoffending factor	Promising approaches (more evidence needed)
Drug misuse (particularly strongly linked to acquisitive offending)	Uses Class A drugs, injects drugs, drug addiction/dependency, lack of readiness to stop using drugs, drug use and obtaining drugs a major activity/occupation	Drug use reduced or stopped	Cognitive behavioural programmes designed for drug dependent offenders Detoxification, opiate substitution therapy (for acquisitive opiate-addicted offenders), psycho-social support to maintain abstinence, 12 step programmes, structured therapeutic communities focusing on substance misuse	Not applicable - good evidence exists in relation to this factor
Alcohol misuse (particularly strongly linked to violent offending)	Binge drinking, long term alcohol misuse, violent when intoxicated	Sobriety, reduced alcohol use, reduced binge drinking, reduced thought disturbances promoted by alcohol abuse	No approach has yet been demonstrated to have a solid evidence base for reducing alcohol-related offending.	Programmes that address the interaction between alcohol and violence
Impulsivity/low self control	Lack of problem solving skills, lack of awareness of consequences of action, poor perspective taking, difficulty managing emotions or impulses	Skills in pro-social problem solving and perspective taking. Emotion management skills	Structured cognitive behavioural programmes such as cognitive skills training and emotion management programmes	Not applicable – good evidence exists in relation to this factor
Attitudes that support crime	Rationalisations for crime, identification with criminal culture and norms, rejection of conventional attitudes to crime and the legal system. Seeing crime and a criminal lifestyle as a positive identity or as a necessity for survival. Believing that criminal behaviour is the only thing you are good at	Developing or enhancing a non-criminal identity Feeling hopeful and motivated about giving up crime	Victim-offender conferencing (Restorative Justice) (for violent and acquisitive offenders with an identifiable victim) Cognitive behavioural programmes that target attitudes	Pro-social modelling, positive staff interactions Case managers challenging anti-social attitudes

NOMS Evidence and Segmentation

Reoffending Factors	Indicators (examples of behaviours indicating this reoffending factor is present)	Desired Intermediate Outcomes	Evidence based approaches to address this reoffending factor	Promising approaches (more evidence needed)
Social network also engaged in crime.	Criminal friends; isolation from pro-social others; easily influenced by criminal associates	Having a place within a non-criminal social community; strengthening 'social capital' – such as having the support of extended family members, mutual aid associations, clubs, cultural, religious or sporting groups	The evidence is not yet sufficiently robust to enable particular approaches to be recommended	Mentoring, Circles of Support and Accountability (for sexual offenders)
Lack of supportive and pro-social family / marital relationships	Poor family relationships; no current relationship, no previous experience of close relationships, manipulative or aggressive in close relationships	Reduced conflict in close relationships, positive relationships, enhanced warmth and caring for others Strong and supportive family ties improving family and intimate relationship, confident and responsible parenting behaviours	Therapeutic approaches for young adult offenders that involve the family (such as multi-systemic therapy)	Relationship coaching interventions Encouraging and enabling family visits to prisoners
Lack of work/ unstable employment	Unable to find employment, unemployed, poor performance or low satisfaction at work; lack of work related skills, poor attitude to employment, lack of qualifications	Increased employability in the form of skills and motivation to work and confidence to relate constructively to others in the work setting Steady employment particularly if it offers a sense of achievement, mastery or satisfaction	Literacy, numeracy and life skills (where needed) Employment-focused programmes in which offenders can secure real jobs	Gaining work related qualifications, gaining employability skills Work-related mentoring
Lack of positive recreation / leisure activities	Lack of involvement and satisfaction in pro-social recreational activities. Regular activities encourage offending, and/or involve reckless and risk taking behaviours	Engaged participation in pro-social recreational activities, sense of reward from pro-social recreation and sustained involvement in pro-social lifestyle	The evidence is not yet sufficiently robust to enable particular approaches to be recommended	None identified

NOMS Evidence and Segmentation

Reoffending Factors	Indicators (examples of behaviours indicating this reoffending factor is present)	Desired Intermediate Outcomes	Evidence based approaches to address this reoffending factor	Promising approaches (more evidence needed)
Homelessness, or living in a criminogenic neighbourhood ³⁰	No fixed abode or transient	Finding and keeping suitable housing	The evidence is not yet sufficiently robust to enable particular approaches to be recommended	<p>Interventions that aim to achieve long term housing solutions, rather than temporary or crisis solutions</p> <p>Services which also address the causes of homelessness such as mental health, substance misuse, and lack of employment</p> <p>Intensive case management help to secure accommodation or linking offenders to existing housing services</p>

Evidence based supervision of offenders in the community

There is limited systematic research on probation supervision³¹ in England and Wales although we know that for some offenders (those with no or one previous conviction), supervision after custody has more of an impact on reoffending than being released without supervision³². However, international research suggests that supervision is most effective if it follows the 'Risk, Need and Responsivity' principles. That is, offenders with a low risk of reoffending do not benefit from intensive supervision and can be managed with minimal supervision³³. Medium and higher risk offenders are likely to benefit most from supervision that is (a) structured, (b) provided through a motivational and engaging, rather than control-oriented, relationship between the offender and the supervisor, (c) emphasises social (re)integration, (d) includes referral to other community agencies so that social support lasts beyond the end of the sentence, and (e) addresses the attitudes and thinking that drive crime as well as the social and circumstantial needs. The Citizenship programme³⁴ is an example of effective structured supervision following these principles; they can also be applied through regular one-to-one supervision meetings. An American review of the intensive supervision research concluded that intensive supervision focused on surveillance achieves no reduction in recidivism; intensive supervision coupled with treatment achieves about a 10 percent reduction in recidivism; and supervision focused on the 'Risk, Need and Responsivity' approach achieves a 16 percent reduction in recidivism³⁵.

What is unlikely to reduce reoffending?

It is recognised that the reduction of reoffending through the rehabilitation of offenders is only one of the purposes of the sentencing of offenders. Strategies that aim primarily to punish or control offenders for examples may not, by themselves, reduce reoffending although there may be other legitimate reasons for enforcing them as part of a sentence imposed by a criminal court. Services and interventions, however, are unlikely to have any impact on reoffending outcomes where they lack a connection with established theories of crime and desistance.

Deterrence-based interventions

The principle of deterrence holds that punishing criminal behaviour should deter criminals from both offending and reoffending. However, evidence that deterrence based programmes or interventions work is very scarce, and evidence that it does not work is plentiful³⁶. Deterrence-only based interventions that do not reduce reoffending include interventions that aim to deter young people from offending by presenting them with information about the long term consequences^{37, 38}.

Control-based interventions

The control principle holds that managing offenders so closely that their behavioural opportunities are limited will reduce reoffending. Control-based interventions that have not been found to have an impact on reoffending include intensive supervision (without any treatment component), and drug testing (without opportunities for addressing drug dependency)³⁹. However, if controlling strategies are perceived by offenders as intended to help rather than control them, they can be more effective. Consequently, intensive

supervision schemes that involve treatment components, such as substance abuse treatment, vocational training or support with re-integration, have better effects than those that do not⁴⁰.

Building discipline or self confidence without teaching skills

It is commonly believed that building discipline and self-confidence in offenders reduces their reoffending, but the evidence contradicts this. For example, military style regimes (“**boot camps**”) that solely aim to instil discipline into offenders have repeatedly been found to have no effect on recidivism^{41,42, 43}. Some boot camps appear to have some short-term effects in changing anti-social attitudes⁴⁴, but this does not appear to translate into reductions in reoffending. When boot camps include treatment components, participants have more favourable perceptions of the programme⁴⁵. These more treatment orientated boot camp regimes do seem to reduce reoffending⁴⁶.

Increasing knowledge and awareness without teaching skills

Some interventions aim to enhance knowledge and awareness in offenders but do not teach skills for self management or behavioural change. **Alcohol/drug awareness** programmes that are purely educational seem to be ineffective in promoting change, particularly for those addicted to opiates⁴⁷. **Victim awareness** (this does not mean face to face offender–victim conferences), when included in other programmes for offenders, is associated with poorer outcomes⁴⁸ (although there are no robust evaluations of victim *empathy* programmes as a stand alone approach).

Over-treatment for low risk offenders

Evidence indicates that delivering intensive services to low risk offenders is more likely to increase reoffending than reduce it⁴⁹. This finding also relates to Commissioning Intention 4 and the targeting of interventions.

Commissioning Intention 4: Ensure delivery is matched to population, purpose and NOMS outcomes

NOMS' Segmentation approach has begun to discover differences in how different sub-groups of offenders respond to interventions and services and have different patterns of needs. This reinforces that people convicted of crime are not all the same – some are more likely to reoffend than others, and people who commit different types of offences have different offending related needs.

For instance:

- Interventions have the best impact on reoffending rates when they are targeted at medium or higher risk offenders. Low risk individuals do not need intensive offence-focused interventions; these can increase rather than lower reconviction rates⁵⁰ for this group.
- Two studies have found that cognitive skills programmes reduce reoffending for adult male sexual and violent offenders, but not for those convicted of burglary or robbery^{51,52}. This pattern holds for

young male offenders and for women. (Female burglars and robbers do show reduced reoffending after cognitive skills intervention, but the impact is not as marked as it is for sexual and violent offenders.) This suggests we may need to explore different approaches to reducing reoffending for people who commit the more serious acquisitive offences.

The following summary indicates which approaches are most likely to be effective with different offender segments.

Sex offenders

Compared to other groups of offenders, sexual offenders have low recidivism rates over 2-5 years. This means it can be difficult even for robust studies to demonstrate statistically significant reductions in reoffending. Offence-focused offending behaviour programmes for sexual offending tend to focus on analysing offences, identifying individualised risk factors and considering the effect on victims, as well as providing the opportunity to develop skills for desisting from offending. The evidence is strongest for supporting offenders to develop cognitive and behavioural skills to aid desistance.

Meta-analysis indicates that, overall, sex offenders who receive treatment of this nature, in both prison and community settings, have a somewhat lower sexual reconviction rate than those who do not receive treatment⁵³.

Pharmacological treatment (for example, medication that reduces sexual drive) has been shown to reduce sexual reoffending⁵⁴. Circles of Support and Accountability (COSAs), a carefully overseen form of mentoring, also seem promising in their ability to aid desistance in high risk sexual offenders⁵⁵. Other approaches (psychotherapy, counselling and non-behavioural treatment) have generally not been found to reduce reconviction in sexual offenders⁵⁶. Reviews have also confirmed that sexual offender programmes that follow the 'Risk, Need and Responsivity' principles lead to the largest reductions in reconviction⁵⁷. That is, medium and high risk sexual offenders have lower reconviction rates after treatment. This is not seen for low risk (of sexual reoffending) sexual offenders and intensive treatment could, in fact, be counterproductive⁵⁸.

Violent offenders

There is good evidence that violence can be reduced through psychosocial interventions, such as anger and emotional management, developing interpersonal skills, social problem solving and anti-social attitudes^{59, 60}. This is specifically the case for programmes that follow the 'Risk, Needs and Responsivity' principles. Both generic cognitive skills programmes and cognitive behavioural programmes targeted specifically at violent behaviour have been found to reduce reoffending. The most effective interventions are intensive in session length and overall duration, and include cognitive skills training, role-play and relapse prevention. Basic education and empathy training have not been found to increase the effectiveness of interventions which aim to reduce violent behaviour⁶¹. The evidence is less strong about offence-specific programmes for domestic violence offenders⁶².

Acquisitive offenders, including burglars and robbers

We need to better understand how to reduce reoffending by acquisitive offenders, particularly burglars and robbers. Figures from the National Treatment Agency (from 2013, part of Public Health England) suggest that lower level acquisitive offending, such as shoplifting and buying/selling stolen goods, is particularly associated with drug dependency with between a third and a half of these offences being committed by drug dependent individuals, and these forms of offending reduce when individuals are enabled to overcome their dependency⁶³. However (although the evidence is only preliminary) it seems that burglary and robbery, particularly commercial robbery⁶⁴, are less associated with drug dependency⁶⁵. These offences may be better understood as “career” criminality i.e. a consciously chosen way of obtaining financial benefits⁶⁶. The kinds of attitudes and values associated with these crimes may include a strong desire for financial wealth⁶⁷ and justifications that such crime is a way of achieving financial equality⁶⁸.

Two studies, one in Canada and one of a NOMS Accredited Programme, have indicated that cognitive skills programmes did not impact on reoffending for people convicted of burglary and robbery⁶⁹. This suggests we need different approaches for motivating and promoting desistance with people who commit these crimes.

Drugs offenders

‘Drugs’ offenders include those convicted of import/export, those convicted of drug supply (for which the seriousness varies from small scale to very large), and those convicted of drug possession. Evidence shows that those convicted of drugs possession and small scale supply will be assisted by both treatment for drug dependency⁷⁰ and by cognitive skills programmes⁷¹. However not all of those convicted of drugs-related offences necessarily have drug dependency or drug misuse treatment needs. Further work is needed to understand how best to promote desistance in those convicted of more serious drug supply offences including import/export.

Motoring offenders

There is mixed evidence on the impact of drink driver programmes and its impacts on subsequent drink driving offences⁷². Programmes containing multiple elements, particularly those involving education and psychotherapy or counselling, together with follow up supervision contact, have greater impact on subsequent drink driving offences than programmes containing single elements⁷³.

Commissioning Intention 5: Ensure that delivery of services is responsive to individual needs and characteristics to maximise outcomes

Responsivity and diversity

Evidence suggests that effective services are flexible and responsive to the specific (and often multiple) needs and circumstances of individual participants. For instance:

- Offenders with learning disabilities and/or difficulties⁷⁴ may find it difficult to access and benefit from mainstream provision without deliberate consideration of their abilities and needs. Possible examples of

how offender services could be tailored include adapting materials and interventions, adjusting communication style and adding resources such as targeted one-to-one support

- Offenders who are gay, lesbian or bisexual may feel alienated in programmes or services that make an assumption of heterosexuality in their goals, methods or materials
- Poor mental health can have a destabilising effect. Ensuring individuals register with a GP and have access to appropriate health services, and helping with access to benefits and, if necessary, supported accommodation can therefore be particularly important for this group

The sections below provide some descriptive information to help providers understand some of the differing needs of different subgroups and the preliminary evidence about how services could be tailored.

Women

Analysis of the June 2012 sentenced prison population and community caseload reveals that:

- One third of women, both those in prison and those on community sentences, are in the low risk of re-offending band (OGRS score below 25). Among women in prison, black and minority ethnic groups are over-represented in this lowest risk band, a high proportion of whom are convicted of drug import/export
- For both community and prison settings, the clear majority of women at the very highest likelihood of reoffending overall (OGRS 90+) are convicted of shoplifting
- The majority of women in prison are sentenced for violent (37 per cent) or acquisitive offending (29 per cent)
- Just under half of women prisoners (46 per cent in custody and 43 per cent in community) are likely to reoffend within two years of release, and 29 per cent in custody and 22 per cent in the community are likely to be reconvicted of a violent offence over the same time period
- The women most likely to reoffend violently are those with a current conviction for robbery, followed by women with current violent convictions. Women imprisoned for acquisitive crimes are not far behind in terms of their risk of committing future violence. Even women with a community order and index acquisitive offence have a 20 per cent likelihood of committing a violent crime over the 2-year follow up
- In prison just under a fifth of women are serving sentences of less than 12 months. The majority are serving sentences of one to four years (34 per cent) or a determinate sentence of 4 years plus (28.5 per cent). Women on short sentences are more likely to reoffend than women on longer sentences
- Looking at the whole community caseload, 35 per cent of women had been convicted of a violent offence; 36 per cent had current convictions for acquisitive crimes. For those serving community orders (12,102) just 11 per cent had been convicted of a violent offence and 40 per cent had an acquisitive index offence

The evidence suggests there are some distinct needs for women and some needs that are more salient for women than for men after taking into account risk and type of offending. Therefore, some interventions and services may need to be designed or adjusted to match the specific needs of women, although some interventions seem to work well with both women and men. Currently the evidence⁷⁵ suggests that:

- Drug misuse, particularly of Class A drugs, is an important criminogenic factor for women offenders⁷⁶; women may also commit crime to support others' drug habits. Women are generally motivated to participate in treatment for drug dependency
- Alcohol misuse is another important factor (particularly in relation to violence). Binge drinking is particularly associated with reoffending for women prisoners
- Women in prison who suffer from combined anxiety and depression are more likely to reoffend
- Parental stress (struggling with parenting) and lack of self efficacy (women's belief that they can't control their lives and can't achieve their goals) have been found to be related to reoffending⁷⁷
- Cognitive skills programmes that are currently delivered to both men and women reduce reconviction rates for women prisoners, particularly sexual, violent and non-acquisitive offenders. There is less impact on robbery and acquisitive offenders
- Targeting women's educational needs can reduce reoffending

Young male adult offenders

Young adult males are those offenders falling into the age category 18-20. However for the purpose of this document, evidence relating to the broader age group 18-25 has also been included. Intervening with young adults can potentially cut off what could otherwise be a long criminal career, thereby saving considerable money to the taxpayer and future harm to victims.

Young offenders have some different needs to older adults. According to OASys assessments on the June 2012 caseload, young adult male offenders (compared to older male adults):

- Are considerably higher risk than the older adult population
- Are much less frequently assessed as having relationship difficulties that are linked to their offending or as having unstable accommodation
- Are more frequently sentenced for violent offences
- Have different patterns of drug use. The MoJ Surveying Prisoners Crime Reduction (SPCR) study⁷⁸ indicated that although the majority of young adult offenders have used drugs, they use different drugs to older adults and their drug use seems less serious (for example, fewer of them inject drugs, fewer of them had used drugs in the four weeks before custody). When young adult offenders are

assessed by OASys as having problematic drug use, this usually refers to their use of cannabis – their overwhelmingly preferred drug.

- Have different patterns of alcohol use. The SPCR findings suggest that for young adult offenders this is **more likely to take the form of binge drinking than alcohol dependency**. Although more young adults reported heavy drinking than older adults, their drinking was more likely to be weekly than daily

By definition, young adults are still maturing, both neurologically and psychologically. Some of their apparent risk factors, such as impulsivity and poor emotional control, may be directly explained by delayed maturational (emotional and coping reactions) processes. Maturation may itself be sufficient to enable some young men to desist from offending; however others may find themselves more deeply socially isolated or engulfed in a criminal lifestyle.

The evidence suggests that with age, the relative importance of different risk and protective factors changes. With juvenile offenders, a supportive family is a key protective factor, and interventions that strengthen family ties have been found to reduce reoffending. However by the age of 18, the influence of peers is stronger and some young adult offenders have often become enmeshed in criminal circles and lifestyles which can harden criminal attitudes. Criminal attitudes, poor problem-solving skills and aggression are highly related in young male offenders, and so interventions which target this cluster of risk factors are seen as crucial⁷⁹. One particularly robust American study has found that young, high-risk men particularly benefited from an employment programme which involved job readiness training, job experience, and help in finding permanent employment⁸⁰.

The combination of different needs and a different maturity level may mean that some interventions and services should be specifically designed for younger adults. However it is also the case that interventions, such as cognitive skills programmes, that are currently delivered to both older and younger adults seem to work equally well with all ages.

Short sentence prisoners (those sentenced to less than 12 months imprisonment)

The profile of short sentence prisoners (SSPs) drawn from the prison and probation caseload on 30 June 2012 shows that overall SSPs have a very high likelihood of reoffending (78 per cent of men aged 21+, 92 per cent of men aged 18-20 and 84 per cent of women had OGRS scores of over 50 per cent). The most prevalent offence type for men was violence against the person, the next most common offence was shoplifting and other lower harm acquisitive crimes. For women this pattern was slightly different with just over a third convicted of shoplifting, then 18 per cent convicted of violence, followed by fraud and forgery. Eight out of ten men and women who had OGRS scores of 90% or higher were convicted of acquisitive offences. Compared to older offenders, more very high OGRS young adult men had an index offence for violence but this tended to be public order or criminal damage rather than violence against the person.

Indeterminate sentenced prisoners (life and ISP sentences)

The profile of indeterminate sentenced prisoners drawn from the prison caseload on 30 June 2012 shows that adult men serving a **life sentence** in custody are generally not at very high risk of reoffending. It is estimated that 39 per cent will be convicted for any offence in the two years after their release - 28 per cent for a violent offence.

They do of course have a serious current offence: 86 per cent of lifers have convictions for violence and a further 11 per cent for a sexual offence (in order of frequency, murder and attempted murder, manslaughter, wounding, rape, kidnap and arson are the most frequently seen offences among lifers). The three per cent of lifers with index offences of robbery, acquisitive or other offences are at higher risk of both general and violent reoffending than other life sentenced prisoners.

Adult men on **indeterminate sentences for public protection** (IPPs) are higher risk than lifers - around 48 per cent will reconvict within two years of release - 38 per cent for a violent reoffence. In contrast to life sentence prisoners, just under half of IPPs have a violent index offence while 30 per cent have a sexual current offence. An IPP with a current conviction for robbery is most likely to reoffend violently whilst motoring and acquisitive IPPs are generally most likely to reoffend.

¹ Offender Group Reconviction Scale.

² Meta-analysis is a statistical method of combining evidence from two or more studies in order to improve reliability of results.

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