EVIDENCE-BASED PRACTICES: COGNITIVE-BEHAVIORAL PROGRAMMING EFFECTIVENESS (MORAL RECONATION THERAPY)

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Basic Criminal Justice Data

• In 2009, 7.2 million adults (3.1% of the adult population) were under criminal justice supervision.

• This is the first decline (down 0.7%) observed in total correctional population since BJS begin reporting in 1980.

Bureau of Justice Statistics – Revised December 2010
BY 2007, STATES SPENT MORE THAN $44 BILLION ON INCARCERATION AND RELATED EXPENSES, A **127% JUMP FROM 1987.** OVER THIS SAME PERIOD, SPENDING ON HIGHER EDUCATION ROSE **JUST 21%**.  

THE U.S. PRISON POPULATION ROSE BY **700%** FROM 1970 TO 2005, A RATE FAR OUTPACING THAT OF GENERAL POPULATION GROWTH AND CRIME RATES.
PRISONS DOMINATE SPENDING

Across 34 states, nearly 9 of 10 correctional dollars went to prisons in FY2008.

- Amount to Probation and Parole: $2.53 billion
- Amount to Prisons: $18.65 billion

Total Corrections Spending: $21.18 billion

Sources: Spending figures were collected from AR, AL, AK, CO, DE, GA, ID, IA, KY, LA, ME, MD, MI, MN, MS, MO, MT, NC, ND, NE, NH, NM, NY, OK, OR, PA, RI, SC, SD, TN, TX, VT, VA, and WY.
EXPLOSIVE GROWTH IN PRISON SPENDING

Across 8 states, 88 percent of additional corrections spending since FY1983 has gone to prisons.

- 1983: $136.48 million
- 2008: $788.80 million
- 1983: $930.06 million
- 2008: $5,672.74 million

PROBATION AND PAROLE vs. PRISON
• “The empirical evidence regarding intermediate sanctions is decisive, without a rehabilitative component, reductions in recidivism are elusive”

Unraveling “What Works” For Offenders in Substance Abuse Treatment Services
Faye S. Taxman, Ph.D., National Drug Court Institute Review.
Characteristics of Successful Treatment Programs

• Assist the offender to change his/her behavior
• Are longer in duration
• Have multiple levels of care
• Utilize the leverage of the Criminal Justice System
Elements of Successful Program Development

• Develop clearly defined treatment goals
• Develop a comprehensive assessment tool that can be used across criminal justice agencies
• Match the offender to the appropriate treatment program and provide the necessary ancillary services
• Develop a treatment readiness component that focuses on motivational issues
Successful Program Elements continued...

- Ensure the program establishes a continuum of care to engage the offender for longer periods of time
- Develop a behavioral contract specifying expectations of all parties
- Provide reliable drug testing to monitor use
- Develop a comprehensive system of sanctions and incentives to address compliance
“The challenge … is to focus on effective treatment strategies and demand that treatment agencies provide services that are effective with criminal justice populations, rather than those that merely link to existing modalities.”

Unraveling “What Works” For Offenders in Substance Abuse Treatment Services

Faye S. Taxman, Ph.D.
Treatment Adherence

Moving from assessment to treatment requires addressing the sources of adherence problems

- Client beliefs and perceptions about the problem
  - Perceptions about treatment
  - Ambivalence about change
  - Expectancies about treatment outcomes
Individuals who do not believe that they have problems that need changing, and are placed in a treatment that they do not believe will help, are susceptible to adherence problems.

- Level of self-efficacy
- Barriers
- Previous negative treatment experiences
- Practitioner outcome expectancies
- Stigma
External Controls & Behavior

- Supervision
- Residential Programming
- Incarceration
- Admin Segregation
- Death
Internal Controls & Behavior

• Cognitive
• Choices
• Consequences
• Empowerment
• Intergenerational
• Long-term
Issues Effective Intervention Must Address

• Client Characteristics:
  – Have a criminal or negative self-identity
  – Think others cannot be trusted and are dishonest just as they are
  – Are impulsive and lack internal controls
  – Have little self-awareness
  – Are apathetic and indifferent
  – Have negative peers and associates
Core Concepts of the Cognitive Behavioral Approach

• Self Diagnosis
• Self-Analysis
• Self-Management
  – *Overall goal, to assist the client/addict to assume responsibility for his/her actions through the new techniques provided in therapy.*
Cognitive Behavioral Treatment

- Cognitive behavioral approaches are more structured and directive.
- Cognitive behavioral approaches consistently appear to be the most effective treatment therapy for substance abusers.
- Programs that include the cognitive component are more than twice as effective as programs that do not

MRT® Focus

- Confrontation of beliefs, attitudes, and behaviors
- Assessment of current relationships
- Reinforcement of positive behavior and habits
- Positive identity formation
- Enhancement of self-concept
- Decrease in hedonism
- Development of frustration tolerance
- Development of higher stages of moral reasoning
Unique Program Attributes

1. Open Ended and Self-Paced
2. Usable across Systems
3. Culturally neutral and encompasses a range of learning styles
4. Utilizes an Inside-Out Process
5. Standardized curriculum provides facilitator structure and accountability
6. Program emphasizes feedback and client reflection
7. Enhances personal problem solving and self-direction
8. Help clients identify their unique strengths
Conation

• A term derived from the philosopher Rene DeCartes to describe the point where body, mind and spirit are aligned in decision making. Reconation refers to altering the process of how decisions are made.
Correctional Program Goals for MRT

• Decrease high program dropout rates
• Improve program completion rates
• Improve outcomes with minority populations
• Provide integration of programming across the continuum of treatment levels
• Reduction of criminal recidivism
Kohlberg’s Six Stages of Moral Reasoning

• Stage 1: Pleasure/Pain
• Stage 2: Reciprocity (back-scratching)
• Stage 3: Interpersonal Concordance
• Stage 4: Law and Order
• Stage 5: Social Contract
• Stage 6: Universal/Ethical Principles
Moral Reconation Therapy

• MRT® seeks to move clients from egocentric, hedonistic (pleasure vs. pain) reasoning to levels where concern for social rules and others become important.

• Research on MRT® has shown that as clients pass steps, moral reasoning increases in adult and juvenile offenders.
Why MRT Works

• The delivery of MRT is both highly structured and directive, which gets clients engaged and keeps them on track.
• Achievements of each step in the program are clearly understood and client progress can be documented at every stage of the program.
• Clients quickly establish ownership of their participation in the program because the program emphasizes feedback and client reflection. Each step in the program involves completing specific assignments and reporting on how they completed the step.
• The program is culturally neutral and gender sensitive.
• Standardized curriculum and facilitator training ensures consistent program delivery and quality assurance.
• Finally, MRT is extremely cost-effective compared to other programs.
Ten-Year MRT® Recidivism Study

**Reincarceration Rates of MRT® Treated Felony Offenders Compared to Non-Treated Controls One to Ten Years After Release**

(Shelby County Correction Center, Memphis, TN 1987-1998)

**Data Analysis:**
- Year 1: $X^2 = 43.36; p < .001$
- Year 2: $X^2 = 11.44; p < .001$
- Year 3: $X^2 = 37.81; p < .001$
- Year 4: $X^2 = 15.52; p < .001$
- Year 5: $X^2 = 84.32; p < .001$
- Year 6: $X^2 = 39.94; p < .001$
- Year 7: $X^2 = 33.21; p < .001$
- Year 8: $X^2 = 12.38; p < .001$
- Year 9: $X^2 = 7.8; p < .01$
- Year 10: $X^2 = 4.74; p < .05$
Taxpayers receive $8.17 in criminal justice benefits for every dollar spent… Crime victims save an average of $946 in costs for every program participant, for a combined taxpayer and crime victim benefit of $11.48 for every dollar spent.

SOURCE: THE COMPARATIVE COSTS AND BENEFITS OF PROGRAMS TO REDUCE CRIME A REVIEW OF NATIONAL RESEARCH FINDINGS WITH IMPLICATIONS FOR WASHINGTON STATE, WASHINGTON STATE INSTITUTE FOR PUBLIC POLICY, MAY 1999.
COMBINED TAXPAYER AND CRIME VICTIM BENEFIT FOR EVERY DOLLAR SPENT

SOURCE: THE COMPARATIVE COSTS AND BENEFITS OF PROGRAMS TO REDUCE CRIME
A REVIEW OF NATIONAL RESEARCH FINDINGS WITH IMPLICATIONS FOR WASHINGTON
STATE, WASHINGTON STATE INSTITUTE FOR PUBLIC POLICY, MAY 1999.
Success of MRT with Adult Drug Court Clients

- Delivery of Moral Reconciliation Therapy (MRT), a cognitive behavioral therapeutic modality that has proven its effectiveness in accelerating client’s progress to recovery – completion of MRT leads to increases in graduation rates.

Thurston County (Olympia, WA) Drug Treatment Court – Eight (8 yr) Study – 2007

Recidivism: Drug Court versus Control Group

Recidivism by Drug Court

<table>
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<tr>
<th>Control</th>
<th>Grads</th>
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<tbody>
<tr>
<td>Overall</td>
<td>0.45</td>
</tr>
<tr>
<td>Felony</td>
<td>0.35</td>
</tr>
<tr>
<td>Drug Felony</td>
<td>0.16</td>
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<tr>
<td></td>
<td>0.20</td>
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<td></td>
<td>0.10</td>
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<td>0.07</td>
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Control versus Graduate Outcomes
“Overall, those who received MRT treatment had significantly lower recidivism in comparison to the control groups. In sum the research provides strong evidence that MRT programs are effective in reducing the recidivism of offenders.”

Year Four Of The Georgia MRT/Life Skills Outcome Evaluation

- MRT programming can produce positive changes in the lives of offenders. Progressing to the second half of the program results in a statistically significant reduction (10%) in recidivism measured as return to prison. Among the intervention group, 18% of TC residents progressing through the first half of the program returned to prison, compared to only 8% of residents reaching the second half of the program.

Georgia Re-Incarceration by MRT Step Completed

<table>
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<tr>
<th>MRT Steps 7+ (n=144)</th>
<th>Less Than Step 7 (n=397)</th>
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<tbody>
<tr>
<td>Returned to Prison</td>
<td></td>
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<tr>
<td>8%*</td>
<td>18%</td>
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*Statistically significant difference (Pearson Chi Square, p<.01).

Moral Reconciliation Therapy (MRT®) was selected for inclusion on the National Registry of Evidence-based Programs and Practices (NREPP) sponsored by the Substance Abuse and Mental Health Services Administration in 2008.

NREPP is an on-line registry of mental health and substance abuse interventions that have been reviewed and rated by independent reviewers. The registry was created to assist the public in identifying approaches to preventing and treating mental and/or substance use disorders that have been scientifically tested and that can be readily disseminated to the field.

NREPP is one way that SAMHSA is working to improve access to information on tested interventions and thereby reduce the lag time between the creation of scientific knowledge and its practical application in the field.
An analysis of the outcome data reveals that Standard Probation (SP) clients were **over three times more likely** than Day Reporting Center (DRC) clients to recidivate more than one year after discharge (34.8% versus 9.6%). In addition, SP clients were more likely to be re-arrested less than one year after discharge (13.0% versus 8.6%).

**GRAPH 1. DRC vs. SP: Time to First Arrest**
These data indicate that, overall, during the specified time period SP clients were more than twice as likely to be re-arrested when compared to DRC clients (47.8% versus 18.2% respectively; $p < .001$)

GRAPH 2. DRC vs. SP: Any Arrest (Yes versus No)

SP versus DRC: $p < .001$
This study reports on a meta-analysis of moral reconation therapy (MRT). Recipients of MRT included adult and juvenile offenders who were in custody or in the community, typically on parole or probation. The study considered criminal offending subsequent to treatment as the outcome variable. The overall effect size measured by the correlation across 33 studies and 30,259 offenders was significant ($r = .16$). The effect size was smaller for studies published by the owners of MRT than by other independent studies.

It was statistically significant with potential for substantial social significance. The current meta-analysis is consistent with studies which show that MRT is effective in reducing recidivism. In our view, it warrants serious consideration by any correctional agency that has designs to influence the antisocial and criminal attitudes, behavior, and lifestyle of its clientele. We also encourage more detailed, descriptive, and analytic research on this meritorious mode of offender treatment.

Virginia Adult Drug Treatment Courts Cost Benefit Analysis

The multilevel analysis of the determinates of in-program recidivism indicates that participants who participate in drug court programs that utilize Moral Reconation Therapy (MRT) have a significantly lower probability of in-program recidivism than similar participants from programs that do not use this treatment approach.

Overall Conclusions
The lower recidivism rate of drug court participants relative to “business-as-usual” processing leads to lower outcome and victimization costs, along with lower placement costs, result in average savings of almost $20,000 per drug court participant, relative to the cost of “business-as-usual” processing. Consequently, the 12 drug courts are cost-effective.

Excerpted from Virginia Adult Drug Treatment Courts Cost Benefit Analysis: October 2012 by Fred L. Cheesman, Ph.D., Tara L. Kunkel, MSW, et. al., National Center for State Courts, Williamsburg, VA.
Results from these analyses also suggest that drug court programs that incorporate MRT are more effective at reducing the incidence and frequency of post-exit recidivism than drug court programs that do not.

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<tr>
<th>Factors that Predict In-Program Recidivism</th>
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<tbody>
<tr>
<td><strong>Factor</strong></td>
</tr>
<tr>
<td>-------------------------------------------</td>
</tr>
<tr>
<td>Having pre-program felony convictions***</td>
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<tr>
<td>Age***</td>
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<tr>
<td>Using MRT in the program†</td>
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<tr>
<td>Dismissing the placement charges if a defendant graduates from drug court†</td>
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