Summary

The effectiveness of young offender intervention programmes and intervention conditions that influence their effectiveness

The vast majority of young people in the Netherlands cause no problems or show only transient involvement in delinquent behaviour. A relatively small proportion of young people continue to commit offences and remain a cause for concern. In spite of numerous prevention and intervention projects and other initiatives over the past years, youth offending is a persistent problem demanding our continual search for effective countermeasures.

The review

In 2004, the Research and Documentation Centre of the Dutch Ministry of Justice conducted a review of international literature to answer the following questions:
1. Which types of intervention programmes are (probably) most effective at reducing recidivism (re-offending) in youth?
2. Under what conditions are these interventions effective?

The review sought to gather studies of the effectiveness of intervention programmes in the Netherlands and abroad.

An explicit set of criteria was established for inclusion of studies in the review:
1. the study examined the following types of interventions for young people 12-25 years of age:
   - legal interventions for young offenders;
   - mental health interventions appropriate in a legal context for young people with serious conduct disorders like delinquency.
2. the study used a control group that did not experience the treatment under examination.
3. the study measured the impact of treatment on recidivism (new offences) or conduct directly related to delinquency and recidivism (for example aggression).

Since a search of the literature identified no study of a Dutch programme meeting these criteria, this review includes only studies conducted outside the Netherlands.
Results of the review

The effects of intervention programmes on recidivism

The information about intervention programme effectiveness is based on the results of reviews and meta-analytic investigations selected as meeting the above study criteria.

The following intervention programmes are effective:

— intervention programmes focussed not only on the target youth, but on the youth’s environment as well (parents, family, peer group):
  - parent training;
  - functional family therapy (FFT);
  - multisystemic therapy (MST);
  - temporary placement in a therapeutic foster family home.
— some behavioural programs:
  - non-residential behaviour therapy
  - residential social skills training;
  - community-based social skills training.
— Other types of intervention programmes:
  - individual counselling in the community.

An intervention is ‘effective’ if the recidivism of youth in the treatment group is lower to a statistically significant degree compared to youth in the control group who did not receive those intervention forms.

The following interventions are probably effective:

— some behavioural programs:
  - residential behaviour therapy;
  - anger management training;
  - individual life skills training;
  - group life skills training (which reduces recidivism if the group comprises deviant and non-deviant youth — mixed groups — and which sometimes increases recidivism if the group contains deviant youth only).
— Intervention programmes directed at teaching academic skills and/or employment skills:
  - community service programmes;
  - educational programmes;
  - residential vocational programmes;
— other intervention programmes:
  - individual counselling in an institutional/correctional setting;
  - group counselling in a residential setting (especially with a well structured approach);
  - group counselling in the community (especially with mixed groups of deviant and non-deviant youth and with a well structured approach);
  - intensive supervision combined with treatment and support (after care);
  - a multimodal approach in a residential setting or in the community;
  - case management;
  - teen courts (in the USA).
Most of these intervention programmes have been the subject of several studies. The results are mixed but overall they indicate that the recidivism risk of the treatment group is lower than that of the control group to a statistically significant degree. The remaining intervention programmes have not been thoroughly evaluated, but the available research indicates a significant reduction of recidivism.

Some types of intervention programmes do not reduce and sometimes even increase recidivism, for instance group life skills training (if the group contains deviant youth only), boot camps and deterrence programmes ('Scared Straight').

Conditions of interventions influencing the effect on recidivism of these interventions

The influence of specific intervention conditions on the effect of these interventions is also examined. Intervention conditions are:

- type of response (e.g., intensity and duration of interventions, specific activities, individual or group interventions, one or more treatment modalities);
- the programme setting, the environment in which the programmes take place (e.g., community-based or residential setting, home or clinical setting);
- characteristics of the target group (e.g., age, gender, ethnicity) or of the environment of the target group (e.g., family social-economic status, degree of the social cohesion in the neighbourhood).

The conditions of some specific interventions are studied by means of separate effect evaluations meeting the criteria mentioned earlier. The interventions selected comprise programmes that are little known in the Netherlands or programmes that are especially interesting for Dutch justice policy aimed at reducing youth delinquency. Information was gathered about the conditions of the following interventions: parent training, functional family therapy (FFT), multisystemic therapy (MST), counselling, community service, after care and deterrence programmes ('Scared Straight').

In general, the following intervention conditions appear to decrease the likelihood of recidivism:

- interventions in the social setting of the young offender (interventions in the home instead of in a clinical setting);
- sufficient treatment dosage/length (number of hours spent in direct treatment; length of time the youth participated in the treatment programme);
- a clear programme structure (a solid theoretical basis; transparent policy; clear targets; unambiguous instructions);
- formalization of obligations (participation involves meeting certain obligations; established rules and sanctions);
- a multimodal approach (e.g., counselling combined with another intervention is more effective than counselling alone);
- a trained and experienced staff which receives supervision regularly and which complies with the programme instructions and rules;
— attuning the intervention to the age of the target group (e.g., family-focused interventions for 12-15 years olds, peer group-focused interventions for 15-17 year olds, and independent living skills programmes for young people 16 years and older);
— matching the intervention to the level of recidivism risk of the target group (for example, no intensive supervision for low risk youth and no Scared Straight programme for high risk youth because this could increase the risk of re-offending).

The present researcher is unaware of any evaluations that compare the effect of an intervention in a residential setting with the effect of that intervention with a comparable group in the community. However, the results of the reviews and meta-analytic syntheses of the literature indicate that community interventions may be more effective than residential interventions.

Moreover, there are indications that group interventions (for instance group counselling or life skills training) in groups comprising deviant youth only may increase recidivism, especially if the trainer or counsellor is inexperienced and the approach unstructured. For this reason, in a residential setting individual intervention may be preferable to group intervention. However, group interventions that target groups comprised of both delinquent and non-delinquent youth, which are sometimes possible in the community, appear to reduce recidivism among delinquents without creating conduct problems among non-delinquents.

Methodological comments

As pointed out before, the present literature review is limited to research using at least one control group. The advantage of this approach is that the research incorporated in the review is methodologically rather well grounded. However this approach has some limitations:
— Some relevant research like bench marking and replication research with measurements of delinquency before and after programme participation without a control group is excluded. This kind of research, too, can be rather well grounded methodologically and is often easier to carry out. As it happens, random assignment of youth to an intervention or control group can in the opinion of the sentencing judges conflict with the principle of equality in the administration of justice.
— The selection of the research is based solely on the quality of the study design irrespective of the programme quality (theoretical basis, programme integrity or the amount of experience of the trainers/therapists).

The review aims solely to determine the effectiveness of interventions in reducing recidivism (re-offending). In so doing, it has not dealt with some other objectives of interventions for young delinquents such as:
— outcomes which in turn can prevent new offences (e.g., changes in attitudes or improvement of cognitive or social skills);
— no attention is paid, for example, to the restoration of the legal order, retribution, the affirmation of norms or the protection of the community for which criminal justice interventions are also meant.
Implications and suggestions

The results of this literature review provide direction to Dutch policy aimed at reducing youth delinquency in two ways.

The findings could help improve existing interventions by reinforcing effective intervention conditions and by adding new conditions that appear to improve programme effectiveness.

Finally, in developing new approaches, interventions could be modelled after interventions abroad that have been proven effective, under conditions that have been demonstrated to have the most beneficial impact.

It remains unclear whether intervention programmes that reduce recidivism among youth in other countries will have the same positive effect in the Netherlands. Only methodologically sound research can answer this question.