

Abstract

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Effectiveness of an Individually Administered CBT program in Sweden (2003-2006) on Criminal Recidivism: A Quasi-Experimental Study

Objective: We conducted a quasi-experimental study of the effectiveness of a general offender treatment program in reducing criminal recidivism among program participants within the Swedish Prison and Probation Service (Kriminalvården).

Background: The Prison and Probation Administration supply over 15 different treatment programs for clients with the aim to reduce criminal recidivism. As part of the accreditation process each treatment program undergoes a thorough effectiveness evaluation.

“One-to-One” was developed in England and has been used in Sweden since 2000. It is a manual-based, individually administered CBT program administered in 20 sessions, usually over 10-20 weeks. Both clients in prison and on probation are offered the program with the aim to decrease recidivism in general crime such as theft, burglary, and fraud.

Method: We identified 728 clients who had finished One-to-One during 2003 to 2006. They had also either been released from prison or been on probation during the same period. The treated group was compared with 7 280 control individuals chosen using a stratified selection based on sentence, and who had not participated in any treatment program during the same period. All clients were followed to first new crime leading to a conviction, death, or end of follow-up (September 1, 2008), whatever occurred first. The average time for follow up was 1.9 years. Data were analyzed in multivariate Cox’ regression models, taking into account identified confounders of the association between treatment participation and criminal recidivism.

Results: We found no statistically significant difference in recidivism rates between the full treatment group and control group after controlling for confounders. Participants who completed the programme (n=366, 50%) were found to have 25% reduced risk for re-conviction compared to the control group (also controlled for confounding).

Conclusion: The results points out the need to identify what distinguishes individuals who completes the program from those who do not. Another limitation is restricted data on individual risk (e.g. impulsivity, motivation, pro-criminal attitudes) that might vary between treatment and control groups and differentially affect recidivism.