



# Research & Evaluation At a Glance

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## Concept Mapping for EBP Implementation Strategic Planning

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### What are Evidence Based Practices?

- Evidence-based practices (EBP) are treatment programs that have been scientifically shown to reduce recidivism rates.
- The EBP research-driven approach to solving the problems of recidivism follows the traditional medical model—crime is seen as a problem that needs to be solved and various approaches are used to determine what works best to reduce crime.

**Abstract:** Over the course of a year, Probation and Parole staff at Virginia’s four EBP pilot sites met with VADOC Headquarters evaluators and EBP staff to answer the focus question: “What strategies, actions, or initiatives are most needed to move Virginia’s Probation and Parole offices to full-fledged Evidence Based Practice (EBP) status?” Findings indicate a critical need to retain veteran and trained staff; provide additional internal and external training; develop collaborative efforts between Headquarters and EBP pilot sites; and implement a comprehensive strategic plan for long term development and maintenance of EBP. The results also suggest that staff judge current EBP training as satisfactory and have confidence in their EBP skills and training.

**Introduction:** A comprehensive plan is needed to guide the EBP implementation process. Correctional staff and POs who interact directly with offenders will ensure the fidelity of EBP implementation. Therefore, gathering information from those in the field was viewed as important in designing an

EBP implementation plan that would have field support and the best chance for success.

**Research Questions:** The current study utilized a nominal group process aided by statistical analysis (known as concept mapping) to create a strategic plan for full EBP implementation by answering the following question: What strategies, actions, or initiatives are most needed to move Virginia’s Probation and Parole communities to full-fledged EBP District Offices?

**Methodology:** Concept mapping is an efficient method of collecting group suggestions and then having the group rate the suggestions. The data collection procedure involved asking P&P staff at the four pilot sites to contribute five recommendations for achieving full EBP implementation in their district. After gathering the group data, the participants were asked to rate each suggestion on two metrics – importance and feasibility. With ratings from 1 to 10, the group averages were calculated and the ratings were ordered into priority lists. Four types of analyses were

conducted: (1) rank order of importance ratings; (2) rank order of feasibility ratings; (3) calculation of difference between importance and feasibility ratings on each initiative category and (4) grouping of initiative categories by EBP dimension (EBP Practices and Principles, Organizational Development, and Collaboration).

**Major Findings and Implications of Findings:** Literature on EBP implementation recommends simultaneous advancement of three dimensions—Organizational Development, Collaboration, and Evidence Based Practices and Principles—for EBP to effect system-wide change. The Collaboration Dimension, rated highest in importance by the group (mean score = 8.13) included initiatives such as collaborating with the Judiciary on mutual issues, generating more EBP support from the community and DOC Administration, and external training of community partners. Among the issues included in the Organizational Development dimension were resource issues (e.g., staff needs for salary increases and smaller case

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loads for staff and offender needs for medication, transportation, and housing). The EBP Principles and Practices Dimension included staff training needs, clearer EBP benchmarks and guidelines, and additional resources to support the successful implementation of EBP. The initiatives that staff found most frustrating included resource allocation, EBP-related support from upper-management, and external training of the judi-

ciary and other outside partners.

Collective findings from four concept mapping workshops indicated that probation and parole staff have confidence they can successfully implement those aspects of EBP over which they have the most control. They demonstrated less confidence in their ability to implement those initiatives that require outside assistance and collaboration (e.g., resource allocation, policy changes, external training, etc.).

There is a critical need to

maintain fully-trained and seasoned staff; provide training for Probation Officers, the judiciary, jail staff, and DOC administrators; and develop a comprehensive and clear strategic plan (with well-defined activities, timetable for accomplishments, and efficient, assessment tools) in all demonstration sites. Suggested initiatives also reflected the P&P staffs' beliefs that collaboration with Headquarters is mandatory to EBP success. Overall, the small mean differences between importance

and feasibility ratings of initiatives in the EBP dimension suggest staff confidence in their EBP skills and their belief that the EBP skills training program is adequate.

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## Cost Benefits of Evidence Based Practice Implementation in VADOC Community Corrections

**Abstract:** In Virginia, probation and parole violators comprised 47.9% of the total VADOC prison admissions in 2005. Using Washington State's Institute for Public Policy's cost benefit template, the current study investigated whether full and faithful implementation of evidenced based practices would have significant impact on reducing offender recidivism and the costs associated with crime and recommitment to Virginia's Department of Corrections. The findings indicate that statewide implementation of EBP has the potential to gradually reduce the number of probationers and parolees who are recommitted to the VADOC and result in significant future criminal justice cost savings including victimization, police, court, and incarceration costs.

**Introduction:** In an attempt to stem the growing tide of prison commitments resulting in costly new prison construction, states around the U.S. have implemented community-oriented strategies to reduce new crime and technical violations by probationers and parolees. The Washington State Institute for Public Policy (WSIPP) completed a comprehensive meta-analysis of correctional programs and identified adult offender treatment programs and services that rigorous scientific studies have shown to lower recidivism. These adult offender treatment programs and services are called "evidence-based practices" (EBP). A cost benefit analysis by WSIPP researchers indicated that a significant amount of prison construction would be

avoided if these EBP programs were implemented statewide resulting in a two billion dollar savings in prison construction avoidance, lower crime costs, and lower incarceration costs (Aos, Miller, and Drake, 2006). Full EBP implementation calls for effective programs and services for chronic offenders, mentally ill offenders, sex offenders, substance abusing offenders, violent and serious offenders, and job training and job placement.

**Research Questions:** There were four research questions in this study: (1) what are the costs of implementing evidence-based treatment options?; (2) what is the potential impact of EBP implementation on VADOC recommitment rates?; (3) what are the cost avoidance benefits of implementing

evidence based options?; and (4) do potential crime reductions savings justify the costs of implementing evidence-based practices?

**Method:** Methods included gathering data about the costs of crime (victimization, police costs, court costs, and incarceration costs) by different types of criminal offenders including violent non-sexual, violent sexual, non-violent non-sexual, non-violent sexual, property and drug offenders. The current Virginia recidivism rates for different types of offenders were gathered. The expected recidivism reductions were calculated using WSIPP recidivism reduction figures. The cost avoidance was calculated on the expected reduced number of offenders who would be recommitted to the VADOC. Three im-

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plementation portfolios were considered: (1) full EBP implementation only in the original four EBP sites; (2) a moderate implementation plan that would gradually add four or five new EBP sites every year starting in 2009; and an aggressive implementation plan to implement EBP statewide within the next biennium. The costs for implementing high-fidelity EBP treatment programs and services were calculated. The EBP implementation costs were subtracted from the expected avoided criminal justice costs. The resulting net savings were calculated for the three portfolios.

**Major Findings and Implications:** The report examined projected Probation

and Parole (P&P) violators that EBP programs and services could potentially impact. Probation and parole violators comprised 47.9% of the total VADOC prison admissions in 2005. Applying the crime change statistics identified in WSIPP's report to the P&P violator population, researchers estimated the potential recidivism reduction Virginia might expect if EBP programs were faithfully applied to this population. It is important to note that the projected avoided P&P commitments are based on FY2005 data as reported in the 2006 VADOC Forecast Report.

Findings indicated that if EBP were implemented statewide in the 43 P&P offices, the minimum recommitment reduction estimate

would be 545 offenders and the maximum recommitment reduction estimate would be 884 offenders per year. This recommitment avoidance would result in a total criminal justice cost savings (law enforcement, court, corrections, and victimization costs) of approximately \$165,792,125. When the EBP treatment and infrastructure costs were subtracted from the criminal justice cost savings, the total cost benefit equaled \$19,395,860. With the minimum expected recommitment reduction of 545 offenders, Virginia could also reduce the \$99 million capital prison construction costs by the equivalent of a half a prison per year. However, it is important to note that these cost benefits are predicated on full EBP imple-

mentation in all 43 P&P offices. In reality, it will take approximately six years to achieve statewide EBP implementation. During the interim, Virginia will continue to need additional prison beds. Although there are no short-term solutions that will make a demonstrable impact on climbing Virginia prison admissions, VADOC needs to plan and implement incarceration alternatives including EBP in an expanding number of Probation and Parole offices to reduce the upward and costly trend of incarceration.

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## Prison Rape Elimination Act Grant Activities

In accordance with the Prison Rape Elimination Act (PREA; Public Law No. 108-79), the Virginia Department of Corrections (VADOC) maintains a zero tolerance policy for inmate-on-inmate sexual violence and staff sexual misconduct. The VADOC is committed to making every effort to curtail sexual violence within the prison system. In 2004, the U.S. Bureau of Justice Assistance (BJA) awarded a \$1 million PREA grant to VADOC.

Six major goals are outlined in the PREA grant including

(1) development and dissemination of sexual assault protocol; (2) installation of video surveillance equipment in three women's prisons that currently lack adequate surveillance coverage; (3) implementing a hotline number to report sexual violence and provision of follow-up response team for complainants; (4) development and implementation of sexual abuse prevention training for inmates; (5) development and implementation of a sexual assault training program for correctional staff; and (6) creation of a

web-based training program for on-going staff training in effective handling and prevention of inmate sexual abuse for veteran staff.

PREA analysts have reviewed the sexual violence policies from DOCs in other states and researched nationally-adopted guidelines and standards. This information has been used to develop a rough draft of sexual violence policy for VADOC consideration. Sexual abuse awareness and prevention pamphlets and posters will be created and distributed to

institutions. Preparations to install video cameras in the three women's prisons have begun. Use of the sexual abuse hotline is being field tested. Inmates and staff are currently being trained in the prevention of sexual violence and the training academy has begun to work on the web-based training for veteran staff.

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## VADOC Re-Entry Matrix Report

**Abstract:** In an attempt to reduce the number of recommitments, the Virginia Department of Corrections (VADOC) implemented reentry programs and pre-release programs. Reentry refers to an inmate's process of community reintegration after leaving institutional confinement. Pre-release refers to preparing an inmate to leave prison and return to the community.

During the past few years, several types of reentry and pre-release programs have been created to meet the offenders' community readjustment needs. These programs target different offenders and offer varying program services. This report describes the array of VADOC-supervised reentry and pre-release programs. It describes the program locations, eligibility, program components, and research outcomes.

The reentry and pre-release programs included in this report are:

- Community Residential Programs (CRPs);
- Detention Programs;
- Dillwyn Transition Cooperative Program;
- Diversion Programs;
- Offender Jail Based Reentry Programs;
- Powhatan Correctional Center Cognitive Community Program;
- Preventing Recidivism by Educating for Parole Success (PREPS);
- Productive Citizenship;

- Residential Transitional Therapeutic Communities (TTCs);
- Southampton Pre-Release Cognitive Community Program;
- VDSS Academy Prisoner Reentry Program;
- Virginia Correctional Center for Women (VCCW) Pre-Release Program; and
- Virginia Serious and Violent Offender Reentry Initiative (VASAVOR) Program.

**Introduction:** The number of inmates released from Virginia's prisons has steadily increased from 8,997 prisoners in 1999 to 12,811 in 2006. Two recidivism studies of Virginia inmates released in 1998 and 1999 revealed a consistent 29% recidivism rate when measured over a three year post-release time period. In other words, almost a third of released prisoners were recommitting to the VADOC within three years of release. In an attempt to reduce the number of recommitments, VADOC implemented reentry programs and pre-release programs.

**Research Questions:** This is a descriptive report which explores the unique qualities of the existing VADOC reentry and pre-release programs. It describes the program locations, eligibility, components and outcomes. While these programs are fairly new, a few have operated long enough that outcome evaluations have been conducted. Evaluations of

VADOC reentry programs are considered baseline or preliminary.

**Methodology:** Information for this report was gathered through multiple sources from within the VADOC.

**Major Findings and Implications of Findings:** While all the programs provide services and knowledge for offenders that will be needed once they leave VADOC, each has their own unique characteristics:

**Community Residential Programs (CRPs)** provide housing and services to returning offenders who do not have stable placement when returning to their home community. These programs require offenders to pay room and board. There are 7 CRPs in Virginia. There have been over 2,500 offenders who have participated in the CRP.

**Detention and Diversion programs** are used as sanctions for local responsible offenders who need structure and services but are not at a risk or need level that requires long term secure incarceration in a jail or prison. There are currently 4 Detention and 5 Diversion programs in Virginia. No outcome evaluations have been done to date on these programs.

**The Dillwyn Transition Cooperative** has its own living pod at the institution and functions as a business, paying offenders for their "jobs" and preparing them for employment once released. Two hundred and thirty eight

offenders (61%) have successfully completed the Dillwyn Transition Cooperative.

**Offender Jail Based Reentry Programs** are programs for male offenders which houses them in the local jail while they receive services prior to their release to the community. There are currently 14 Jail Based Reentry Programs in Virginia. Early outcome results are promising. Reentry participants had significantly reduced numbers of felony re-arrests and total re-arrests;  $t(1, 296) = 2.039$ ;  $p < .10$ ,  $t(1, 296) = 1.860$ ;  $p < .10$  respectively. In addition, Staff and Participant Perception surveys showed positive opinions of the program.

**The Powhatan Correctional Center Cognitive Community Program and the Southampton Pre-Release Center Cognitive Community Program**, for males and females respectively, are institutional programs which emphasize cognitive behavioral treatment and encourage offenders to adjust their actions by understanding the antecedent thoughts and feelings propelling their behaviors. Due to the youth of the program, CCP at Powhatan has not yet been evaluated. There are currently 55 offenders participating in this program. While it is still too soon to see true outcomes for the Southampton Cognitive Community program, early outcomes are promising.

**PREPS** is an institutional program created and led by

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## VADOC Re-Entry Matrix Report

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an ex offender and facilitated by other trained inmates. Although outcomes should be viewed as preliminary, there was a 19% difference between the re-arrest rate of the control group (33.3%) and the PREPS participant group (14.3%). While preliminary, the outcomes are promising.

Productive Citizenship is a 15 week mandated program for all institutionalized offenders. There are currently no outcome reports for the Productive Citizenship program.

TTCs are the community-based, residential, reentry phase of the Therapeutic Community (TC) Programs. TC programs start in the prisons with intensive, peer-support drug treatment. TC participants transition to community-based TTCs upon prison release. There

are currently 6 TTCs in Virginia. There have been no outcome evaluations on the TTC program (Reentry Phase) as a separate entity.

VDSS Policy Academy Prisoner Reentry Program focuses on specific institutions and communities and brings together stakeholder community agencies to provide the needed integrated support for successful community integration. This program has five pilot sites. VADOC is cooperating with VDSS on the evaluation design and data collection. VDSS researchers will be conducting the outcome evaluation. The program began accepting participants on November 21, 2006.

VCCW program for women, is an institutional pre-release program and offers cognitive-behavioral classes that help women change negative thinking and criminal be-

havior and better deal with situations when they are released to the community. In a recidivism study completed by VCCW staff, the Pre-Release Program participants had a lower recidivism rate (12.8%) than the females that did not participate in the reentry program (17.3%). The study shows promising results of the Pre-Release program especially because the overall 1999 recidivism rate for VCCW was 22.8%.

VASAVOR program is geared towards sexual and violent offenders and offers intensive treatment and services to assist these offenders' reintegration into society. There are two VASAVOR programs in Virginia: Fairfax and Newport News. Seventeen percent (17%) former Fairfax VASAVOR participants have returned to VADOC for either technical or new crime violations.

None have been returned in the Newport News program. Only 4 recidivists committed new violent crimes (3%) from VASAVOR Fairfax during their first three years. Staff and Participant Perception surveys have a positive skew, indicating both staff and participants feel the program is beneficial.

Because of the youth of reentry programs, there are few definitive outcome evaluations. Future evaluations can identify which aspects of their programs are effective, whether the program's target population is appropriate, and whether changes should be made in program structure and eligibility criteria.

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## VADOC Female Sex Offender Exploratory Study

**Abstract:** The researchers collected data on female sex offenders who were incarcerated in VADOC facilities between January 1980 and December 2005. Ninety-four (94) women met the study criteria, 69 of whom had been released from prison prior to December 2005. Comparisons with other samples showed that VADOC's female sex offenders have less education and less severe abuse histories, but are comparable otherwise to female sex offenders in other states and countries. Vir-

ginia's female sex offender recidivism rates are higher than those reported in the few other national studies on female sex offenders. The full evaluation report includes recommendations on research and treatment for this population.

**Introduction:** The literature on female sex offenders is fragmented and beset by multiple problems, including small sample sizes, few outcome evaluations, and a lack of sophisticated research methods. Nearly all re-

searchers agree that the prevalence of sex offenses committed by females is much higher than reflected by current rates. Several biases regarding female sex offenders (e.g., they do not exist, their crimes are not as severe, the results of abuse by a female are not as damaging) have resulted in not only lower arrest, conviction, and incarceration rates, but also in a lack of steady information about the population. However, several commonalities exist among current studies. The major-

ity of female sex offenders are white, and 60-70 percent have a GED, high school diploma, or higher degree. Adult offenders usually offend for the first time between the ages of 18 and 30, and adolescent offenders tend to offend for the first time between the ages of 11 and 13. Female sex offenders primarily victimize children, particularly those under the age of 15; however, victim sex is split equally between males and females in most samples.

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## VADOC Female Sex Offender Exploratory Study

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Most female sex offenders are either parents, caretakers, or social acquaintances to their victims. They tend to have prior criminal records, but few women have prior sex offenses on record (though they may have an unacknowledged history of sex offending). Female sex offenders have very high rates of sexual abuse and physical abuse in their personal histories (70-100%) and moderately high rates of substance abuse (40-70%). Many researchers have noted a significant presence of mental health issues, especially depression, borderline personality disorder, and post-traumatic stress disorder.

Treatment for this population has not been well documented to date, but researchers who commented on treatment recommended that females be treated with greater attention and sensitivity to their own victimizations. Humanistic, interpersonal, and cognitive-behavioral approaches have been documented (though not researched) in the literature.

Recidivism rates also have not been well-documented for this population. The few studies available indicate that recidivism rates are low for sexual recidivism, but moderate for general recidivism among female sex offenders. One study documented that among females, conviction of a sex offense was a predictor of re-arrest.

**Research Questions:** How large is the female sex offender population? What are the demographics of the population, including criminal history and sexual offense characteristics? Are the demographics of the Virginia population similar to those of female sex offenders from other states and countries? What is the recidivism rate of this population? Is the recidivism rate similar to that of other female sex offenders? Are there any demographic or criminal offense variables that place an offender at a higher risk for recidivism? What are the parameters of female sex offender treatment in Virginia? How can increased knowledge about the VADOC female sex offender population be used to improve data collection, management, and treatment?

**Method:** The researchers used DOC automated database systems to identify female sex offenders who had been incarcerated in a VADOC facility, and used Pre-Sentence Investigation reports and institutional files to access demographic data, criminal history data, and victim data. Finally, the researchers used VCIN records to collect recidivism data for the population. A series of *t* tests and chi-square analyses were conducted to examine the relationship between each demographic variable and recidivism.

**Major Findings and Implications:** The VADOC female sex offender population

closely matched other national samples in demographics, criminal history, and sex offense history. The majority of the sample was white (79.8%), married (39.4%), and relatively young at the time of the offense (mean age = 29.64 years). Only 48% of the sample had a GED, high school diploma, or higher degree which is smaller than the national sample of female sex offenders which indicated that 60-70% had completed high school. The educational level of Virginia's female sex offenders is also lower than female offenders in general (about 60% have completed high school).

Offense details revealed that the Virginia sample committed a wide variety of sexual offenses. A substantial minority (42.6%) had a male accomplice during the offense. Victim sex was evenly split, with a small number of offenders having victims of both sexes. Nearly all victims (97.9%) were under the age of 18. Most of the victims were either the children or stepchildren (36.7%) or the social acquaintance (35.6%) of their abuser. All of these statistics are similar to findings from other samples.

Details about the offenders' criminal and personal histories show that most of these women have serious mental health and substance abuse issues. A small number (9.7%) had a juvenile record, but nearly half (42.6%) of the women had prior crimi-

nal offenses. Only 2.1% had a prior sexual offense, which was expected based on published research. The majority of women reported mental health treatment (70%), and nearly half of the sample reported drug abuse (45.7%) or alcohol abuse (43.6%). The number of women in the Virginia sample who reported prior sexual abuse (51.3%) or prior physical abuse (43.8%) was substantial, but not as large as the numbers recorded in other samples.

Recidivism, in contrast, was high compared to other samples of female sex offenders. It should be kept in mind, however, that there is little data available in this area. Sixty-nine of released offenders were included in the recidivism analysis. Of this number, 34.8% were arrested for at least one new offense. Arrest types included property crimes (24.2%), violent crimes (19.7%), and property crimes (9.7%). No new sexual crimes were recorded. A substantial number of recidivists (21.2%) were arrested for failure to register on Virginia's Sex Offender Registry. One-quarter of the recidivists were arrested for other types of crimes, including technical offenses such as probation/parole violation and/or court-related charges.

**Conclusions:** The Virginia sample is relatively similar to other state and national samples of female sex offenders. Female sex offenders tend to differ from other female offender samples in

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## VADOC Female Sex Offender Exploratory Study

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that they are predominantly white, slightly younger than other serious female offenders, and generally have a better educational history. They also tend to have more serious histories of sexual abuse, physical abuse, mental illness, and substance abuse. Female sex offenders are similar to male sex offenders in the variety of their offenses, but differ in that: a) they primarily abuse children; and b) they abuse males and females equally.

Female sex offenders also tend to be less violent and have shorter criminal histories.

The Virginia sample has several key differences from other female sex offender samples. Virginia offenders have fewer years of education. They also report less sexual abuse and physical abuse, though this statistic may result from data collection occurring in a correctional environment as opposed to a treatment envi-

ronment. Finally, the Virginia sample has higher rates of recidivism than other samples to date, though no sexual recidivism is recorded. Recommendations for this population include increased data collection, greater efforts placed on education for this population, and treatment that is specific to female sex offenders. A treatment program tailored specifically to this population might include anger management, therapy for trauma and abuse, as

well as cognitive-behavioral elements common in male sex offender treatment (e.g., family patterns, relapse prevention). This population also needs more information about successfully navigating the Virginia Sex Offender Registry requirements.

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## Sex Offender Residential Treatment Program Process Evaluation

**Abstract:** The Sex Offender Residential Treatment (SORT) program process evaluation was conducted to measure staff and participant opinions about the SORT program. Staff members and current and former participants were mailed surveys. The program director also was interviewed about SORT's history, development, and current goals. Quantitative survey data showed that staff and participants rated the program positively overall. Staff members rated incorporation of EBP as a program strength and program-prison relations as a program weakness. SORT participants rated sex offender treatment high, but gave lower ratings to transition programming. Qualitative data echoed and expanded the quantitative survey results.

**Introduction:** The process evaluation was conducted to gain a better understanding of program practices, as well as staff and participant perceptions of SORT. Given that detailed program descriptions generally are not published in peer-reviewed journals or made available for public consumption, it is not possible to identify a comparison for the findings of this study. Rather, the purpose of this study was to identify strengths and weaknesses of a specific program. Findings from the SORT outcome evaluation indicated that the program may have problems in admission and discharge procedures.

**Method:** The process evaluation occurred in three phases. First, the Evaluation Unit conducted an interview with the SORT director to gather information about program statistics,

program history, and perceptions of current program strengths and weaknesses. Second, Evaluation staff sent surveys to 14 current and former staff members. Staff surveys included 30 scaled items, two qualitative items, and a timeline exercise to record more facts about SORT's history. In the third stage, Evaluation staff mailed 279 surveys to current and former SORT participants. Participant surveys included 29 scaled items about SORT and one qualitative item.

Once all data was collected, means and standard deviations were calculated and reported for all scaled items. Qualitative data was analyzed and organized into content themes. A series of *t*-tests were conducted to determine if participants who gave qualitative feedback had significantly lower

scaled item means than those who did not provide written feedback.

**Major Findings and Implications:** The interview with SORT's director revealed that the program had initially planned to use evidence-based practices (EBP) but faced several difficulties in implementing some EBP procedures and practices. Problems included difficulty in setting up the desired referral process, a lack of institutional information about offenders entering the program, and housing problems. Housing problems related to the poor relationship between the program and its host institution. Strengths of the program include dedicated and knowledgeable staff, low turnover rates, and an evidence-based treatment protocol.

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## Sex Offender Residential Treatment Program Process Evaluation

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SORT staff surveys showed that current and former staff approved of the program overall, but perceived several areas that needed improvement. The majority of staff (78.6%) responded to the survey and most respondents (72.7%) were employed at SORT during survey administration. Staff members rated SORT highly on its use of evidence-based practices, and supported their ratings with positive written comments about program offerings. Staff members also gave their co-workers positive ratings and feedback. Lower ratings were given for program support by the prison administration. This opinion also was reflected in qualitative comments, which

discussed a lack of space, low emotional support, and concerns with paperwork and staff burnout.

Over half (50.5%) of SORT participants returned surveys. Of this number, 46.8% provided written feedback. Although qualitative responders tended to provide lower scores on scale items than those who did not give qualitative feedback, the difference between means was not statistically significant. SORT participants rated sex offender treatment highly, particularly on perceptions of treatment efficacy. They also rated the staff highly on performance of their professional duties. These ratings were echoed in the qualitative comments about SORT. Less positive

ratings were given to perceptions of staff friendliness and willingness to help and to transition programming. One qualitative concern that was not on the scaled items regarded civil commitment. Staff participants had a very negative perception of SORT's relationship with the civil commitment program.

In conclusion, the Evaluation Unit noted that SORT is a strong program with motivated and well-trained staff. However, success rates have been affected by several factors including a poor relationship with its host facility, problems with the admissions process, and lack of relationships with community-based treatment providers and other transition staff. Recommendations for the program in-

cluded working more closely with transition programs, clarifying SORT's relationship with the civil commitment program, and creating time for staff cohesion and mental health maintenance in order to avoid burnout. Recommendations for Mental Health and other administrative figures that oversee SORT included increasing treatment space, adding single cells for SORT's use, and providing funds for SORT to create a treatment incentive program.

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## Preliminary Impact of Evidence-Based Practices on Technical Offender Recidivism

**Abstract:** In 2005, the Virginia Department of Corrections (VADOC) began to implement motivational interviewing (MI) in four evidence-based practice (EBP) probation and parole (P&P) pilot sites. The primary purpose of the technical violator report was to test whether MI reduced recidivism for technical violations. The sample consisted of 2,137 offenders who began probation between June 1, 2005 and December 31, 2005. Roughly half (48.3%) of the offenders were from the four EBP P&P sites. The remainder of the sample was from the matched sites. The results of the study indicated

that the EBP P&P sites had a significantly lower technical violator recidivism rate (1.1%) compared to the matched control sites (2.4%).

**Introduction:** The VADOC reported a three-year out recidivism rate of 29% in 2005. As this statistic indicates, recidivism is a significant problem. Nearly one third of offenders are reincarcerated within three years of their release. The VADOC has been diligently trying to reduce recidivism rates to make the community safer, to increase the rehabilitation rates of offenders, and to save the taxpayers from the steep costs of reincarceration. One such re-

cidivism reduction effort was the introduction of Evidence Based Practices (EBP) in four P&P pilot sites: Charlottesville, Lynchburg, Williamsburg, and Winchester. In 2005, the VADOC began to employ the first phase of the EBP initiative by implementing Motivational Interviewing in the four EBP P&P pilot sites. MI is a component of the EBP model that is used by P&P officers to encourage resistive offenders to change their criminal behavior and criminal thinking patterns.

**Research Questions:** VADOC divides recidivism into two types: new crime recidivism and technical violation recidivism. The purpose of

the current study was to determine whether EBP reduces recidivism in general and more specifically, reduces recidivism for technical violations.

**Methodology:** A quasi-experimental design matched probationers or parolees in the four EBP sites to offenders in four non-EBP (control) sites. The control sites included Chesapeake, Farmville, Martinsville, and Staunton. The sample was composed of 2,137 offenders who began probation between June 1, 2005 and December 31, 2005. Roughly half (48.3%) of the offenders were from the EBP pilot sites. The EBP sites were

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*“Research & Evaluation At a Glance”* is the newsletter produced by the Virginia Department of Corrections Agency Evaluation Committee to disseminate findings from evaluation projects performed by internal DOC and external researchers. This newsletter is published twice per year and made available on the Department of Corrections internal and external web sites. For more information about this newsletter or the Agency Evaluation Committee, you may contact the Research and Management Services Unit at [rms@vadoc.virginia.gov](mailto:rms@vadoc.virginia.gov) or 804-674-3268 x1248.

## **Preliminary Impact of Evidence-Based Practices on Technical Offender Recommitments**

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not statistically different from the control sites in regard to age, race, sex, and most serious committing offense.

Seventy-seven percent (1,641) of those sampled were male and 23% were female (496). The offenders ranged in age from 19 to 83 years of age. The average age was 35 with a standard deviation of 10.6. Fifty-four percent (1,156) of those sampled were white and 46% (981) were non-white (Black, Hispanic, Asian, etc.).

**Major Findings and Implications of Findings:** The results of this study indicate that the use of motivational interviewing results in both new crime and technical violation recidivism reductions. There were 73 (7.1%) recommitments for both new offenses and technical offenses in the treatment group versus 114 (10.3%) recommitments in the control group. The treatment condition had 10 (1.1%) recommitments for technical violations versus 26 (2.4%) in the control condition. An additional analysis also indicates that EBP is

beginning to reduce re-arrest rates. There were 368 (35.6%) re-arrests in the EBP group compared to 432 (39.1%) re-arrests in the control group.

Although these results are promising, it is important to note that these are preliminary findings. The offenders in the sample have been on probation or parole for less than the customary three-year out period used for recidivism studies. It is important to note that EBP implementation is only in the preliminary phase. Research literature indicates that matching of

offenders with appropriate treatment modalities is key to reducing recidivism. Treatment matching with the offenders' criminogenic needs has not yet begun. Once this phase begins, greater reductions in recidivism may occur.

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