## The Texas Probation Executive Development Program

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HIGH RISK PROBATIONERS AND COGNITIVE-BEHAVIORAL PROGRAMMING IN DENTON COUNTY, TEXAS: AN ARGUMENT FOR THE USE OF MORAL RECONATION THERAPY OR THINKING FOR A CHANGE

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#### **ABSTRACT**

Community supervision has seen a shift from community supervision officers (CSOs) acting as a case manager to a change agent. With this shift in focus, there has been an emphasis on addressing criminogenic needs through the use of the Risk-Needs-Responsivity (RNR) model. A tenet of this model is that cognitive-behavior interventions should be used to target behavior and attitude change among persons at highest risk of reoffending. While felony revocation rates have held steady in the state of Texas, it is important for community supervision and corrections departments (CSCDs) to continue to work to rehabilitate those most at risk of reoffending for public safety reasons. Common programs used to help lower recidivism rates include Moral Reconation Therapy (MRT) and Thinking for a Change (T4C). In Denton County, Texas specifically, high risk probationers should be required to complete one of these programs. Program efficacy has been well-established for MRT and T4C in reducing recidivism rates. Barriers to consider when implementing this policy change include the length and cost of the programs. However, longer programming has been found to be effective in reducing recidivism among high risk probationers, and the cost of the program could be offset by departmental assistance. If this requirement is approved, the department needs to take into consideration increasing departmental assistance, training staff in the implementation of one or both programs, and creating a sound policy regarding this requirement.

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#### INTRODUCTION

Community supervision has been used in the state of Texas since the early 1900s. Throughout the last century, community supervision as we know it has changed substantially. Historically, the role of community supervision officer (CSO) has been that of a case manager whose focus has been on making sure the probationer is complying with the terms of their sentence (Bourgon, et al., 2011). With the growing number of persons placed on community supervision, the role has shifted to include the case manager also working as a change agent. Not only does the CSO monitor the probationer's compliance with their court order, they also look to see what interventions and treatments will be beneficial in helping change the probationer's behavior (Bourgon, et al., 2011). This is generally done through looking at the risk level of the probationer.

Over the last 40 years, research has shown that the most effective supervision techniques rely on the risk-needs-and-responsivity principles (The Pew Charitable Trusts, 2020). First developed by Andrews and Bonta, the Risk-Need-Responsivity (RNR) model looks at three general principles related to offender rehabilitation (Bosker, et al., 2013). The *risk* principle deals with matching intensive services to higher risk probationers, the *needs* principle looks at targeting criminogenic needs, and the *responsivity* principle focuses on matching the style and mode of intervention to the abilities of the probationer with an emphasis on cognitive-behavioral interventions (Bonta, et al., 2011; Bourgon, et al., 2011). When treatment programs adhere to at least one of the three principles, it has been shown that there is a small decrease in recidivism (3%), and larger decreases in recidivism have been shown with two of the

principles (17%) and all three of the principles being adhered to (25%) (Bonta, et al., 2011; Bourgon, et al., 2011).

Within the field of community supervision, there has been much focus on both the *needs* and *responsivity* principles, as it is important for probationers to successfully complete probation instead of being revoked to county jail or prison. By targeting criminogenic needs (*needs principle*) using effective programming (*responsivity* principle), the idea is that revocation rates will decrease. While felony revocation rates have held relatively steady in the state of Texas, with rates ranging from 11.3% to 16.0% over fiscal years 2015 to 2020, it is still important to focus on programming that will help people successfully complete probation (Legislative Budget Board Staff, 2021).

Of particular interest are probationers who have been identified as having a high risk of recidivating. Since these persons have been identified by a risk assessment as being the highest risk, it is important to target services and interventions towards these offenders. The *risk* principle asserts that treatment will have a greater impact on high risk offenders than low risk offenders (Landenberger & Lipsey, 2005). Cognitive-behavioral based programs, more specifically, have been shown to have a recidivism reduction rate of 30% on average (Landenberger & Lipsey, 2005). When it comes to high risk offenders, programming delivered to these offenders is "...five times more effective in reducing recidivism than programs delivered to lower risk offenders" (Viglione, 2019, p. 656). Two common cognitive-behavioral based programs used in probation are Moral Reconation Therapy and Thinking for a Change.

In 2020, Denton County had 564 high risk probationers, and 25 were revoked to county jail or prison. Using the RNR model, these high risk offenders are whose CSOs

and probation departments should prioritize the most with regards to resources and programming (The Pew Charitable Trusts, 2020). Often, high risk probationers present with multiple criminogenic needs, and using a cognitive-behavioral program can help address these needs and facilitate positive behavior changes (Bourgon, et al., 2011). In order to target these high risk offenders, it should be a requirement that high risk probationers in Denton County, Texas should complete a cognitive-behavioral program, such as Moral Reconation Therapy or Thinking for a Change.

#### **POSITION**

Cognitive-behavioral therapy (CBT) is based on the assumption that dysfunctional thinking patterns are the basis for criminal activity (Milkman & Wanberg, 2007; Wilson, et al., 2005). The thoughts, choices, and attitudes commonly associated with antisocial behavior is what is often targeted during CBT in order to teach new skills in areas such as evaluating consequences, resisting peer pressure, and not acting on first impulse (Barnes, et al., 2017; Milkman & Wanberg, 2007). CBT based programs have been found to be effective with high risk probationers in reducing recidivism, which is of particular concern to community corrections as it is important to target these offenders with programming (Arvidson, 2019, Lowenkamp, et al., 2006). In community corrections, two common programs used are Moral Reconation Therapy (MRT) and Thinking for a Change (T4C).

### Moral Reconation Therapy (MRT)

Moral Reconation Therapy (MRT) was developed and implemented in the 1980s by Greg Little and Ken Robinson. It was initially used in a therapeutic community in a prison setting, but due to its success, the program has been expanded for use with

offenders, juveniles, and other groups resistant to treatment (Milkman & Wanberg, 2007). While based on cognitive-behavioral theory, it is more specifically centered on Kohlberg's theory of moral development. Kohlberg's theory posits that moral development happens in six stages with very few adults ever reaching the highest stage of moral reasoning (Wilson, et al., 2005). According to this theory, those who reach the highest level of moral reasoning are less likely to engage in criminal behaviors.

MRT's underlying theory is that offenders are often in the lower stages of moral reasoning, and thus, the overall goal of MRT is to enhance the "...social, moral, and behavioral deficits of offenders" (Hansen, 2008, p. 46; Arvidson, 2019). Some of the specific deficits among offenders include low ego, low self-esteem, strong narcissism, and a resistance to change (Hansen, 2008). When these deficits are addressed, reasoning levels increased from self-centeredness to having a concern for the "...welfare of others and for societal rules" (Milkman & Wanberg, 2007, p. 22). With regards to the RNR model, MRT does a good job addressing the *needs* and *responsivity* principles in that it focuses on moral development and antisocial attitudes and is cognitive-behavioral in format (Ferguson & Wormith, 2012).

#### Effectiveness of MRT

One of the developers of MRT, Greg Little, posits that MRT is likely the most widely researched treatment for offenders (Little, 2005). Given that it has been around since the mid-1980s, it follows that it would have been extensively researched. When discussing the effectiveness of MRT, recidivism is used as the indicator of efficacy with an expected recidivism rate 1 year after release of 48 percent (Milkman & Wanberg, 2007).

Little (2005) published a meta-analysis of MRT recidivism results that looked at nine studies comprised of 2,460 MRT-treated individuals and 7,679 individuals in control groups. These studies were compromised of individuals on both probation and parole as opposed to probation only. Little (2005) found that the overall effect size was about .2257 for MRT-treated offenders, and overall, recidivism was cut by nearly two-thirds when looking at a time period of 6 months to over 2 years. Another study analyzed the post-release criminal records of 1,052 MRT-treated persons and 329 control group individuals. After a period of 20 years, 93.6% of the control group had at least one rearrest while 81.2% of the MRT-treated group has at least one rearrest (Ferguson & Wormith, 2012). When looking at reincarceration rates, 81.2% of the control group had been incarcerated again for at least one new offense versus 60.8% of the MRT-treated group (Ferguson & Wormith, 2012). This shows the long lasting effects of MRT in its effectiveness for lowering both rearrest and reincarceration rates.

### Thinking for a Change (T4C)

In 1997, the National Institute of Corrections and Bush, Glick, and Taymans developed a new cognitive-behaviorally based program called Thinking for a Change (T4C). This program was designed to target high risk offenders to reduce recidivism (Kosson, et al., 2019). Unlike MRT, T4C does not focus on moral reasoning. Instead, the idea behind T4C is that if offenders can control their thinking, they can control their life (Lizama, et al., 2014). Offenders are taught how to do this using a combination of approaches. Cognitive restructuring, social skills, and problem solving are the tenets of the program; the program for T4C starts off by teaching offenders introspection techniques to examine not only their thinking patterns but also their feelings, beliefs,

and attitudes (Milkman & Wanberg, 2007). From there, social skills are taught as an alternative to antisocial behaviors (Milkman & Wanberg, 2007; Arvidson, 2019). Lastly, problem solving is used as the central approach for offenders to learn how to avoid reengaging in criminal behavior (Milkman & Wanberg, 2007; Bush, et al., 2016). If they are able to effectively solve their problems, they are less likely to turn to criminal activities (Arvidson, 2019).

#### Effectiveness of T4C

Despite having been implemented in community corrections for over two decades, there is little research into the efficacy of T4C. Kosson, et al. (2019) notes that prior to their study, there were three previous studies completed that addressed the effectiveness of T4C. While the first study noted a 33% percent drop in new offenses for the T4C treated group, while the second study found a non-significant difference in the reoffending rate between the T4C treated group (13.2%) and the comparison group (20%) (Kosson, et al., 2019; Golden, et al., 2006). A third study found that of the 121 probationers who completed T4C, approximately 28% were rearrested versus 48% of the 96 probationers in the comparison group (Lowenkamp, et al., 2009; Kosson, et al., 2019). Kosson, et al. (2019) completed a study that looked at 167 probationers in the T4C treatment group and 120 probationers in the comparison group. One thing to note is all participants were assessed to be either high or medium risk. Kosson, et al. (2019) found that 54.3% of the T4C treatment group successfully completed probation compared to 18.45% of the comparison group. The small number of studies currently available on T4C allude to the potential efficacy of this program yielding positive results in future studies.

### Why Should These Programs Be Utilized in Denton County?

The crux of the current issue at hand is why should Denton County require one of these programs for high risk probationers. Research shows that when community supervision is focused heavily on surveillance and monitoring instead of promoting success, incarceration rates can increase (The Pew Charitable Trusts, 2020). The fact of the matter is CSOs are not only tasked with enforcing court orders, surveilling the probationer, and monitoring compliance; CSOs, especially within Denton County, are also focused on offender rehabilitation and recidivism reduction. This is done by following the change agent approach with the focus on tailoring case plans based on the highest criminogenic needs identified by the risk assessment to help the probationer learn new skills and thinking patterns. Cognitive-behavioral based programs, while not a "...panacea for the reduction of offending...", offer probation departments an opportunity to apply a noninvasive form of treatment that is both cost effective and shown to reduce offending (Barnes, et al., 2017, p. 627). If Denton County probation can reduce the revocation rates of its probationers who are already identified as being the highest risk to recidivate, we can not only help people better themselves and their futures, but also help maintain public safety.

#### **COUNTER ARGUMENTS**

As with many program implementations, there are potential barriers that must be addressed and mitigated. If Denton County, Texas requires high risk probationers to complete either Moral Reconation Therapy (MRT) or Thinking for a Change (T4C), we must take into account the concerns the probationers have related to both the length of

the programs, the cost of the programs, and what can be done to either reduce or mitigate these concerns.

### **Barrier #1: Length of Program**

Both programs are lengthy in nature, highly structured, and use a scripted manual (Lizama, et al., 2014). For MRT, groups of 10 to 15 participants typically meet one to two times per week for sessions that last one to two hours for a total of 12 to 16 sessions (Lizama, et al., 2014; Ferguson & Wormith, 2012; Wilson, et al., 2005). If participants attend once weekly, they can expect to be in MRT for 12-16 weeks, and if they attend twice a week, they can expect to be in MRT for 6-8 weeks. Participants purchase a workbook, are assigned homework between sessions, and practice these techniques together in small groups ("About MRT", n.d.; Milkman & Wanberg, 2007). For T4C, groups of 8 to 12 participants meet two times per week for sessions that last one to two hours each (Bush, et al., 2016; Lizama, et al., 2014). Over the course of 11 weeks, 25 sequential lessons are completed. Similarly, to MRT, participants must complete homework assignments between sessions, but T4C utilizes role-play during group sessions in addition to other techniques (Lizama, et al., 2014).

Both program require approximately 3 months to complete. It is expected that this timeframe may be a concern for probationers, not only due to time away from their jobs and family, but it may also present transportation issues. However, research supports that the benefits outweigh the costs overall.

Following the Risk-Needs-Responsivity (RNR) Model, specifically the *risk* principle, in order to effectively reduce recidivism, treatment dosage should increase to match the risk level (Viglione & Taxman, 2018; Lowenkamp, et al., 2006). More simply,

individuals identified to be at a higher risk of recidivating should receive the highest levels of treatment (Newsome & Cullen, 2017; Starfelt Sutton, et al., 2021). It has been shown that cognitive-behaviorally based programming is five times more effective in reducing recidivism among high risk probationers (Viglione, 2019). Even a small reduction in the amount of criminal behaviors among these high risk offenders has the potential for fewer crimes to be committed within the community.

### **Barrier #2: Cost of Program**

Currently, probationers are responsible for paying program costs. In Denton County, there are two providers probationers are referred to for MRT: Bell Counseling and Sereneco Wellness Center. The overall cost for MRT, including the cost of the workbook, is \$1070 at Bell Counseling and \$1075 at Sereneco Wellness Center.

Denton County only has one referral for T4C: Maze of Life. No current prices could be obtained for this provider. However, other local T4C providers, Genesis Counseling Associates, Bee Services, and Ace Education, cost \$325, \$375, and \$400 respectively. (Bee Services, Inc., n.d.; Ace Education, n.d.). At this time, T4C appears to provide a smaller financial burden than MRT.

These programs can provide a financial burden on probationers who are already often underemployed and suffer from financial instability (The Pew Charitable Trusts, 2020). In addition to the cost of this program, probationers also must pay supervision fees and are frequently ordered to pay court costs and fines (Ruhland, 2016). However, the idea of probationer "buy in" when it comes to programming has garnered increased support in the field of probation, because it holds probationers accountable for their criminal behavior and encourages them to be more invested in their success while on

probation as they are the ones paying for the program (The Pew Charitable Trusts, 2020; Ruhland, 2016). Denton County Community Supervision and Corrections

Department (CSCD) can provide financial assistance for probationers who are unable to pay for programming. Currently, this is limited to MRT programs only, and probationers must complete a financial profile and provide paystubs to apply. CSOs then staff it with their supervisor, and if they are eligible for assistance, CSOs will complete a department referral to one of the two MRT agencies outlining the amount paid by Denton County and the probationer. Another way to mitigate the costs to the probationer is to have CSOs trained in MRT or T4C and offer the program in-house at a reduced rate. This can help offset the financial burden a probationer may be experiencing if they are required to do programming.

#### RECOMMENDATION

Robust literature supports the efficacy of CBT based programs in reducing recidivism rates. CBT based programs have been found to have a 30% recidivism reduction rate, and programming specifically delivered to high risk probationers is five times more effective at reducing recidivism when compared to low risk probationers (Landenberger & Lipsey, 2005; Viglione, 2019). As recidivism reduction is an important part of a CSO's job, mitigation of future criminal behavior is vital. In taking into account these factors, it is recommended that Denton County should require all high risk probationers to complete a cognitive-behavioral based program, such as Moral Reconation Therapy or Thinking for a Change.

#### Plan of Action

If the recommendation of requiring high risk probationers to complete MRT or T4C is approved by the director and/or judges, the following points must be taken into consideration: department referrals being expanded to include T4C providers, training staff to implement MRT or T4C, and official policy regarding this new requirement.

### **Department Referrals**

Currently, the CSCD is limited to only offering financial assistance for MRT. However, it may be beneficial for Denton County to also investigate offering assistance for T4C as it appears to be a more cost-effective program that could lessen the financial burden on the probationer and increase changes of program completion. In order to be eligible for consideration for department assistance, the provider must speak with the referral secretary, provide information on how much they charge for their program, and have a current certificate/license for the programming under consideration. The referral secretary then takes the pricing and certification information to the director for final approval. Once approved, the department is notified that this particular agency can now have department referrals to help pay for the cost.

### Staff Training

It may also be beneficial to both the department and probationers to offer inhouse programming for MRT or T4C for a reduced rate. Currently, Denton County
CSCD offers a life skills program in-house and charges \$100 that must be paid by the
probationer. A similar cost could be charged in MRT or T4C were they completed inhouse. Benefits to this include reducing the cost to the probationer and giving staff the
opportunity to gain a deeper understanding of these programs and the positive impact

of their implementation. A potential disadvantage to in-house training is the inflexibility of class time options that would otherwise be afforded to probationers should they have the ability to choose from multiple providers. However, the low cost of the program may diminish this to some degree.

Both programs require facilitator training. Training for MRT consists of 32 hours across 4 days (Milkman & Wanberg, 2007). Currently, trainings are being held online, cost \$610, and are hosted by Correctional Counseling, Inc. (Correctional Counseling, Inc., n.d.a; Correctional Counseling, Inc., n.d.b.). Training for T4C consists of 44 hours within a 7-week timeframe and currently includes 6 Virtual Instructor Led Training sessions, intersession work, and 10 virtual face-to-face sessions ("When and ", 2021). There is no cost to register, but participants must pay for printing the training manual and intersession assignments ("When and", 2021). From a cost-to-the-department standpoint, it would make more sense to train staff in T4C. Denton County CSCD also did train staff several years ago for T4C, but no in-house program was ever implemented. This author does not know why. However, this does mean several staff members are already familiar with T4C, and a pilot program could quickly be established.

### **Policy Recommendation**

If this is approved, it would need to be decided by the agency director of Denton County CSCD whether or not the required program should be MRT, T4C, or if probationers should have the ability to choose which program to complete. The official policy should discuss risk level, programming options, and time frame. Policy should state that this requirement is intended specifically for probationers who have been

identified as high risk per the CSCD's risk assessment. This requirement is not for persons supervised as a Level 1, as supervision levels can be overridden for a variety of reasons. Supervision levels determine the frequency and intensity of supervision contacts whereas risk level relates to risk of reoffending. While high risk probationers must be supervised as a Level 1, not all Level 1 probationers are classified as high risk. In Denton County, it is not uncommon for enrollment within 60 days of the court order for other court ordered programs; this policy could utilize that precedent to require enrollment in MRT/T4C within 60 days of referral.

### **Concluding Remarks**

Both Moral Reconation Therapy (MRT) and Thinking for a Change (T4C) have been researched and shown to be effective in reducing recidivism rates. Recidivism was cut by nearly two-thirds among individuals treated with MRT (Little, 2005). While recidivism rates in studies with T4C effectiveness have varied, Golden, et al. (2006) have shown a 33% reduction in recidivism. Length and costs of these programs to probationers can be a concern. However, the benefits to completing these programs outweigh the costs in the form of recidivism reduction. Financial costs can specifically be mitigated in Denton County through the use of departmental financial assistance for MRT and the possibility of training staff to implement one or both of these programs at a reduced cost to the offender. Overall, based on research available, implementation of this recommendation would benefit the high risk probationers of Denton County, Texas.

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