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Crime Control Strategies and Community Change— Reframing The Surveillance vs. Treatment Debate*

* Adapted from a presentation at the 14th World Congress of Criminology, Philadelphia, PA, August 10th, 2005. This paper is a revised and expanded version of an article by James Byrne and Faye Taxman, "Crime (Control) Is A Choice: Divergent Perspectives on The Role of Treatment in The Adult Corrections System," which was published in *Criminology and Public Policy* (May, 2005).

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IN A RECENT monograph, *Rethinking Rehabilitation*, David Farabee challenges much of the theory, research, and policy associated with “liberal” offender treatment strategies (Farabee, 2005). He argues that we have attempted (and largely failed) to “treat” offenders in both institutional and community settings for a range of problems (drug abuse, alcohol abuse, mental health, educational/employment deficits, etc.) based on the misplaced notion that if we can successfully address these problems, offenders will desist from crime. Farabee suggests that since attempts to rehabilitate offenders have not worked particularly well, perhaps it is time to move in a different direction and consider crime control policies *not* based on the underlying assumptions of offender rehabilitation. He offers an alternative offender change strategy, which is based in large measure on his attempt to apply the assumptions of classical criminology found in the “broken windows” model of crime control [1](#) to the offender change issue (see, e.g. Wilson and Kelling, 1982). At the outset, he offers the following three principles for our consideration:

First, crime is a choice, not an unavoidable response to a hopeless environment. Most offenders could have completed school, but didn’t; most had held jobs in the past, but chose easier, faster money over legal employment... Moreover, the pervasive belief that these criminals essentially had no choice but to resort to crime and drugs conveys a profoundly destructive expectation to them and to future criminals that undermines their perceived ability to control their own destinies (Farabee, 2005:54).

Second, most offenders give little or no consideration to the risk of getting caught for crimes they are about to commit. This is not because they don’t consider the imposition of a prison sentence to be a negative experience; rather, it is because they know that the risk of getting caught is extremely low: (Farabee, 2005:54).

Third, social programs have not and never will produce long-term changes in the behavior of career criminals. The majority of us grew up perfectly well without various programs to teach us how to act. We completed school, became employed, avoided drugs (or limited their use), and never resorted to crime. We followed this path for the same fundamental reason: the rewards of doing so...crime is not the result of a deficit in social services. When we rush to provide social programs to those who have chosen to break the law, we undermine our own efforts by fostering the misperception that the responsibility for changing an offender's behavior lies outside the offender himself (Farabee, 2005:55, 57).

Farabee's three principles offer support and justification for policies that emphasize the importance of formal (crime) control strategies, while challenging the underlying assumptions of both individual offender rehabilitation strategies and community-level change strategies, such as restorative justice initiatives (Bazemore and Stinchcomb, 2004; Clear & Cadova, 2003), and interventions targeting "at-risk" communities (see, e.g. Sampson, Morenoff, and Raudenbush, 2005, Pattavina, Byrne, and Garcia, 2006). ² By focusing his critical review on evaluations of the effectiveness of offender treatment programs, Farabee certainly makes a strong case for improving both the quantity and quality of treatment programs currently operating in both prison and community settings. However, by arguing that we should abandon treatment-driven corrections policy because programs do not typically get implemented as designed or evaluated rigorously, he is ignoring a long-standing admonition in the field of criminology: bad practice and bad research should not be confused with bad theory (Sampson and Laub, 2001). Perhaps more importantly, Farabee does not consider that desistance from crime may be affected by a variety of community-level factors, including community structure, resources, risk level, and collective efficacy, that are directly related to the level of formal and informal social controls exhibited in neighborhoods where offenders reside (before and after prison) (Pattavina, Byrne, and Garcia, 2006).

Even the most ardent supporter of individual offender rehabilitation programs recognizes that desistance from crime is most likely a consequence of person-environment interactions. Of course, it is one thing to recognize the complexity of the offender change process; it is quite another to do something about reframing the issue in terms of both individual and community change. There is a large body of research that demonstrates the importance of informal social controls (e.g., family, peers, school, job, mentors, marriage) throughout our lives (see, e.g., Gottfredson and Hirschi, 2001; and Laub and Sampson, 2001). Perhaps most notably, the research on intensive probation supervision programs conducted in the mid-80s demonstrated the importance of a "mixed model," incorporating treatment, informal control mechanisms, and formal control mechanisms (see, e.g. Byrne, 1989, Byrne, 1990; Taxman, Young, and Byrne, 2004). ³ Despite this research, we continue to rely on individual-level change strategies and ignore the larger, more difficult issue of community change, despite the concentrated cycling of a large number of offenders between institutional and community control (Clear, Waring, and Scully, 2005).

In his monograph *Rethinking Rehabilitation*, Farabee offers a number of specific recommendations for changes in our current sentencing and correctional control strategies that challenge the policy recommendations offered by advocates of offender rehabilitation (*See summary table*). In the following review of the surveillance vs. treatment debate, we offer our own critical examination of the treatment and deterrence research, and then present an alternative model for our corrections system that recognizes the need to develop *both* individual, offender-based rehabilitation programs *and* the community-based change strategies targeting the "at-risk" communities where many offenders reside.

Farabee's Correctional Control Model

Recommendation 1: "Deemphasize prison as a sanction for nonviolent reoffenses and increase the use of intermediate sanctions...Furthermore, minor parole violations....should be punished by using a graduated set of intermediate sanctions, rather than returning the offender to prison" (p 63).

Recommendation 2: “Use prison programs to serve as institutional management tools, not as instruments of rehabilitation” (64).

Recommendation 3: “Mandate experimental designs for all program evaluations” (66).

Recommendation 4: “Establish evaluation contracts with independent agencies” (67).

Recommendation 5: “Increase the use of indeterminate community supervision, requiring three consecutive years without a new offense or violation” (68).

Recommendation 6: “Reduce parole caseloads to fifteen to one, and increase the use of new tracking technologies” (71).

Source: Farabee (2005)

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1. The Difference Between a Treatment and a Surveillance/Control-Based Corrections System

There appears to be a new understanding of the limits of an incarceration-based correctional control strategy emerging in this country, not only due to the cost of incarceration, but also due to the negative consequences of incarceration for offenders and communities (Jacobson, 2005; Travis and Visher, 2005; Clear and Cadova, 2003). After reviewing the six policy recommendations identified by Farabee and comparing them to the recent policy recommendations of several prominent treatment advocates (e.g., Jacobson, Cullen, Latessa, and Gendreau), at first glance it might appear that Farabee has embraced much of the liberal correctional reform agenda of the past two decades. Farabee’s control-based model is based on a recognition—shared by “liberal” treatment advocates—that we rely much too heavily on *incarceration* as an offender control strategy. In addition, there is a central role for community corrections programs in both treatment-oriented and Farabee’s control-oriented model of offender change. The difference—and it’s a critical one—is that Farabee would design community corrections programs that focused primarily on offender surveillance and control, while treatment advocates would design community corrections programs that emphasized the delivery of treatment to offenders in both institutional and community settings. Both models emphasize “crime control” effects, and both models define “success” in terms of individual “desistance” from crime, rather than changes in the crime rates overall in a particular community. ⁴ As we noted in our original review of *Rethinking Rehabilitation*, Farabee may or may not be correct when he declares that “*crime* is a choice,” but we are certain that *crime control* is a choice and the community control “choices” offered by Farabee are quite different from those offered by treatment advocates (Byrne and Taxman, 2005).

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2. New Directions in Offender Treatment and Control

For the purpose of this review, we examine two alternative views of the corrections system’s proper strategic focus: one model emphasizes the central role of offender treatment; the other dismisses its importance as an effective offender change strategy. To treatment advocates, the existing body of institution and community-based evaluation research demonstrates (once again) that “treatment” (for substance abuse, mental illness, and a range of other individual-level problems) is directly associated with both short-term and long-term offender change (in criminal behavior). To Farabee (2005), a review of this same body of research leads to a very different conclusion: *there is no strong link between provision of treatment and subsequent changes in the criminal behavior of offenders*. He points out that much of the treatment research is nonexperimental in design, utilizes misleading comparison groups and outcome measures, and offers—at best—mixed evidence of a treatment effect. For this reason, Farabee concludes that it

is time to move away from strategies based on offender treatment and to focus instead on new strategies of offender surveillance and control (Farabee, 2005).

From Farabee's perspective, the application of weak research designs by treatment evaluators is not only a function of conducting research in the real world; it is also due to the influence of funding sources in the public and private sector (i.e., funding-related bias), the pressure on academics to search for statistically significant subgroup effects in the hope of getting published (i.e., publication-related bias), and the political/religious affiliations of the researchers (i.e., research-related bias). Stated simply, Farabee sees the problem in the following terms: 1) researchers tell funding sources what they want to hear, because they are under pressure from universities and/or research organizations to obtain external funding; 2) the same individuals and groups developing treatment interventions are (often) conducting the evaluation of their effectiveness, 3) researchers overanalyze their data in the search for publishable findings; and 4) most researchers in the social sciences "hold liberal attitudes regarding the causes of social problems and how to solve them" (Farabee, 2005:20). These are serious allegations to be sure, and if Farabee's assessment is correct, then we certainly should be careful when we review the results of an evaluation that purports to have identified the latest treatment panacea (Finckenauer, et al., 1999). However, we suspect that this admonition may apply equally to both "liberal" and "conservative" research on the effectiveness of treatment and control-oriented correctional strategies. For this reason, the recent movement toward systematic, evidence-based research reviews of the research on criminal and juvenile justice intervention is a major step forward for the field of criminal justice in general and for corrections in particular (see for example Farrington and Welsh, 2005; and Welsh and Farrington, 2006).

After reviewing the available systematic reviews conducted through the Campbell Collaborative, it is clear that we need to conduct more rigorous evaluations of a wide range of criminal justice interventions, including both the "broken windows," problem-oriented policing strategies Farabee advocates be applied to corrections *and* the correctional treatment programs focused on in his review. Recent systematic reviews of problem-oriented policing (National Research Council, 2004), drug courts (GAO, 2005), and correctional treatment (Weisburd, Lum, and Petrosino, 2001), certainly underscore this view, because in each instance the results of these systematic reviews suggested that the initial, non-experimental research painted an overly optimistic portrait of the impact of the strategy under review. It seems obvious to even the casual observer that we need to conduct experimental research on a wide range of criminal and juvenile justice programs in order to improve the "science" underlying our policies and practices. Unfortunately, it has proven to be quite difficult to conduct quality, experimental research on criminal and juvenile justice strategies and programs.

Despite this research shortfall, we are beginning to conduct the type of independent, external, rigorous evaluation research needed to inform corrections policy and practice. At present, a small but growing body of scientific evidence based on experimental research on justice-related interventions does exist and we can examine the conflicting claims of treatment and control advocates in light of this empirical evidence. Farrington and Welsh (2005) recently identified 83 randomized field experiments conducted in the last two decades with "offending outcomes," compared to only 35 for the period 1957–1981. Their meta-analyses of these studies revealed the following:

we conclude that recent experiments show that prevention methods in general, and MST (multisystemic therapy) in particular, are effective in reducing offending. However, Scared Straight and Boot Camp programs cause an increase in offending. Correctional therapy, batterer programs, drug courts and juvenile restitution are [also] effective in reducing reoffending. There are indications that police targeting of "hot spots" places is effective in reducing crime, but the effect size is small (Farrington and Welsh, 2005:22).

Given the fact that the most comprehensive review of experimental research currently available supports the notion that the provision of treatment can change offender behavior, some observers might wonder *why* we are still debating this issue. The answer is simple: the overall effect sizes

identified in these meta analyses are modest (about a 10 percent difference in the desired direction between treatment and control groups), while the differences between treatment and control groups identified in individual studies are *not* generally statistically significant, often due to a combination of moderate differences between groups and small sample size. [Table 1](#) on the next page, taken from Farrington and Welsh's recent review of all experimental research conducted in corrections (Farrington and Welsh, 2005), highlights this issue (i.e. strength of association and direction vs. statistical significance). Included in the table are 14 experimental evaluations of correctional interventions with an overall effect size of 10 percent in the desired direction. However, only two of the studies included in this review identified statistically significant ($p < .05$) differences in recidivism between treatment and control groups.

Paradoxically, both the evidence *in favor of* and the evidence *opposed to* rehabilitation is found in the same systematic review. Because we believe that effect size and direction across a number of studies are better indicators of the impact of a particular intervention than the alternative strategy of counting the number of studies with statistically significant differences, we do not find an *empirical* justification for Farabee's pessimistic view of the future of offender treatment and the prospect for offender change. However, it is important to recognize that unless large-scale experimental research is conducted on a wide range of correctional treatment programs, questions can and should be raised about the impact of these interventions on offenders.

Farabee's own exhaustive review of the treatment research highlights both the limitations of this body of research and the mounting evidence of effectiveness for specific modes of treatment. [5](#) As Cullen's recent review of the correctional treatment literature succinctly states: "the empirical evidence is fairly convincing...that treatment interventions are capable of decreasing recidivism. In contrast, correctional programs based on the principles of specific deterrence are notoriously ineffective" (2004:287). [6](#) One interesting point to consider is that the evaluations of both institution and community-based treatment programs conducted over the past three decades were often poorly funded, in large part because the provision of treatment in institutional and community settings was not a priority area for NIJ and other federal funding agencies. It is conservative ideology that has dominated the crime control scene for the past three decades (e.g., war on drugs, war on crime) and it is deterrence-based research that has received the bulk of the funding from federal agencies during this period; in many instances, this research attempted to affirm the surveillance and control-oriented initiatives *funded* by these same agencies, and many of the early assessments of these initiatives were *self*-evaluations. Consider just a few of these initiatives: weed and seed, mandatory arrest for domestic violence, zero-tolerance policing, gun violence reduction strategies, mandatory sentencing, boot camps, electronic monitoring and other surveillance-oriented community control programs. As Farabee has observed about the field of rehabilitation, the early non-experimental evaluation research offered considerable support for each of these deterrence-based initiatives, but the subsequent (and more rigorous) evaluations—using better research designs—offered a much more pessimistic view (Cullen, 2005). [7](#)

Our point is simple: apply the same review criteria to *both* rehabilitation-based and control-oriented research and see what you find. The fact that we identify this same pattern when we examine research on *both* liberal and conservative crime control policies suggests two things: 1) conspiracy theories need to be applied to *both* bodies of research (including Farabee's own analysis, published by the American Enterprise Institute); and 2) despite the alleged conspiracy, quality research testing the underlying assumptions of both liberal and conservative initiatives has been conducted. Indeed, it is the recent failure of conservative crime control strategies to demonstrate effectiveness that has been one of the main reasons that "treatment" has reemerged as a key feature of the latest wave of federal initiatives, such as drug courts and offender reentry (Byrne, 2004; Cullen, 2004).

In addition to his call for more rigorous, independent evaluations, Farabee also offers specific recommendations for both sentencing and corrections that have implications for the design and implementation of residential community corrections programs. His first (two-part) recommendation is to "*de-emphasize prison as a sanction for nonviolent re-offenses and increase the use of intermediate sanctions*" (Farabee, 2005:62). We doubt Farabee would get much of an argument from "liberals" (or more correctly, treatment advocates) with this two-part

recommendation. If we expanded the alternatives to incarceration that typically fall under the name of intermediate sanctions, then we could potentially reduce the size of the federal and state prison population by almost *fifty* percent. As Farabee observed,

although in 2002 about half (49 percent) of state inmates were sentenced for violent crimes, about a fifth (19 percent) were sentenced for property crimes, and a fifth (20 percent) were sentenced for drug crimes. During that same year, over half (57 percent) of federal inmates were serving sentences for drug offenses, and only 10 percent were in prison for violent offenses. Taken together, we can see that the majority of incarcerated offenders in the United States are serving sentences for nonviolent offenses (2005:64).

There would appear to be a place for residential community corrections programs in this strategy, since these programs are typically identified as one of a number of possible intermediate sanctions (Byrne, Lurigio, and Petersilia, 1992). For example, Lowenkamp and Latessa's recent research findings (2005) offer support for the use of residential community corrections programs as a direct sentence option for "high-risk" offenders; low- and moderate-risk offenders could be sanctioned using one of the other forms of intermediate sanctions (e.g., day fines, house arrest/electronic monitoring, community service, day reporting centers, and/or intensive probation supervision).

In addition, residential community corrections programs could be used as part of a structured hierarchy of non-incarceration sanctions for the large number of probation and parole violators who are currently reentering prison in numbers equal to the number of "new" prison commitments (for reconviction) each year. Ironically, this "dual role" for residential community corrections (as a halfway-in and a halfway-back control strategy) was first proposed by Latessa over a decade ago (Latessa and Travis, 1992). However, we suspect that there would be one important difference between Farabee's RCC design and the Latessa design: Farabee would emphasize the surveillance and control features of residential programs, while Latessa would emphasize the quantity and quality of treatment provided in these same settings (Latessa, 2004).

Farabee suggests that public opinion generally and public policy makers in particular would have no problem with our continued reliance on incarceration for nonviolent offenders "if it appears to serve as a deterrent, [but] unfortunately, this has not proven to be the case" (Farabee, 2005:62). Our own review of public opinion research reveals no such support for costly, ineffective prison and jail terms for nonviolent offenders, particularly those with drug, alcohol, and/or mental health problems. More problematic, it appears that while his policy recommendations on the need to deemphasize institutional sanctions flow logically from the negative research findings on the deterrent effects of incarceration (see, e.g., Decker, Wright and Logie, 1993; Welsh and Farrington, 2005; Blumstein, 2004; and Levitt, 2004), the same cannot be said for his review of deterrence in community settings. Farabee examines intermediate sanctions research, arguing that "the research to date supports only the modest claim that they [intermediate sanctions] cost less than prison and do not appear to *increase* recidivism" (Farabee, 2005:63). Our own review of this body of research suggests that it tells us a bit more, particularly about the inability of surveillance and control-oriented intermediate sanctions (i.e., intensive supervision, electronic monitoring, and boot camps in particular) to reduce recidivism among targeted offenders. As Farabee has suggested, the early non-experimental research on each of these three intermediate sanctions was quite positive, but the more rigorous evaluations led to a very different view of effectiveness (Byrne and Pattavina, 1992). Indeed, it now appears that a *combination* of treatment and surveillance/control strategies is the key to recidivism reduction in these programs (Byrne, 1990). For some reason, Farabee has not considered the policy implications of these research findings, which support the development of initiatives that balance these surveillance and treatment components.

One study often cited by proponents of intermediate sanctions is the multi-site evaluation of intensive supervision programs by the RAND Corporation in the late 1980s (Petersilia and Turner, 1993). In this study, selected offenders (in Oregon) were given a choice: participate in an intensive supervision program with strict program requirements (such as curfews, random

drug testing, mandatory employment and treatment) or go to prison (for about six months, on average). Almost one-third of the offenders refused to participate; in effect, they chose prison over intensive supervision. While Farabee and others have argued that “the more criminal justice experience offenders have, the less punitive they perceive prison to be relative to intermediate sanctions” (2005:63), we believe a very different thought process is at work here. For offenders who chose prison, it is certainly possible that a short period of *lifestyle interruption* is preferable to the prospect of (forced) *lifestyle (and life-course) change* .

We should also point out that offenders do not always make the best life-course decisions. When offenders “choose” prison, they are making a bad choice, not only for themselves (in terms of the negative effects of incarceration on their employment prospects, family, personal relationships, and living situation upon release), but also for their community (in terms of the negative effects of incarceration on community “stability,” (Clear and Cadova, 2003). When viewed in this context, the use of mandatory treatment in a residential facility for older (mid-30s) “high-risk” offenders represents one example of how a combination of treatment *and* control can have a positive effect on offenders, while minimizing the level of community destabilization associated with an offender’s entry into—and release from—prison.

The fact that the evidence of effectiveness reported in treatment evaluations is modest (A 10 percent overall reduction is reported by Welsh and Farrington, 2005) is not surprising, given the staffing and treatment resource constraints faced by correctional program developers across the country. ⁷ Rather than focusing limited financial resources on the punitive features of intermediate sanctions, we would argue that it is much more cost-effective to expand both the quantity and quality of treatment resources available to intermediate sanctions in general and residential community corrections in particular (Welsh, 2004).

Farabee has also offered a series of recommendations related directly to those offenders who will go to prison (or jail) in his model: convicted violent offenders. First, he argues that we should “use prison programs to serve as institutional management tools, not as instruments for rehabilitation” (64). Second, he recommends that we “increase the use of indeterminate community supervision, requiring three consecutive years without a new offense or violation” (68). And third, he advocated that we reduce parole caseloads to fifteen to one, and increase the use of new tracking technologies” (Farabee, 2005:71).

The phrase most often associated with successful treatment models such as the one described in our HIDTA (High Impact Drug Treatment Area) evaluation (Taxman, Byrne and Thanner, 2002) is *continuity of treatment* . The underlying assumption of models based on this strategy is that for offender change to occur, what happens in prison—in terms of treatment for a variety of individual problems, such as mental illness, substance abuse, educational/employment deficits, etc.—must be followed up in both residential and outpatient community treatment settings. As Latessa (2004) has recently observed, this is a difficult task, given the resistance to change found in both the institutional and community corrections system in this country. However, “continuity of treatment” throughout the reentry process appears to be a critical component of the new wave of reentry partnership initiatives currently being implemented across the country (Taxman, Byrne and Young, 2002).

A review of the research on prison-based treatment programs reveals that the provision of treatment *in prison* is directly related both to the offender’s behavior while in prison and to an offender’s subsequent life-course choices (to return to crime or remain crime free) upon return to the community (Byrne, Taxman, and Hummer, 2005). It is not simply a short-term prison management strategy that could be replaced by the provision of non-treatment programs, such as recreation (Farabee, 2005). Evidence to support this view can be viewed in every major review of the prison treatment evaluation research literature released in the last decade (see, e.g., Farrington and Welsh, 2005; and Mitchel, MacKenzie, and Wilson, 2006 for an overview). While the provision of treatment in prison will not eliminate the negative consequences of incarceration on the subsequent life-course “events” that likely will await offenders upon release from prison (employment, marriage/divorce, living situation, participation in crime), it may minimize these effects.

Perhaps the most controversial recommendation for change offered by Farabee is found in his argument for three years (minimum) of mandatory post-release supervision, to be extended if the offender commits a new crime or technical violation during this period of post-release supervision. Until the offender is able to demonstrate that he/she has changed, community supervision and control will remain in place. To ensure that the two elements of deterrence that Farabee views as critical are in place (certainty and celerity), it will be necessary to decrease caseload size dramatically while concomitantly improving the technology of community control (e.g. GPS systems). These are critical policy recommendations that can and should be field tested in the near future.

In Farabee's model of correctional control, it is critical that offenders take responsibility for their own behavior. If they think they may need some form of treatment, then they should obtain it. The cost of such voluntary treatment would still be the responsibility of the state, perhaps through "offering vouchers to parolees to cover the expenses of certain kinds of community-based treatment for offenders who believe they are unable to change on their own" (Farabee, 2005:69). The option of residential treatment is never directly mentioned, perhaps because Farabee takes the view that "the more time an offender spends in the community—assuming he is under close supervision—the more likely he will adopt and practice behaviors associated with a lawful lifestyle" (Farabee, 2005:66). However, current treatment research suggests something quite different: some offenders (i.e., those at a high risk to recidivate) need the time spent in residential treatment to make a successful transition from institutional to community control (Lowenkamp and Latessa, 2005). While in these residential facilities, the offender can continue to receive treatment for mental health, substance abuse, health, and other problems first addressed in prison settings.

It is our contention that Farabee's strategy would place both the offender *and* the community at risk and no amount of surveillance and control would reduce this risk. One in every five offenders leaving prison today have significant mental health problems (Clear, Byrne and Dvoskin, 1993; Lurigio, Rollins and Fallon, 2004). It has been estimated that up to 90 percent of our current prison population have a substance abuse problem, but fewer than 10 percent receive appropriate treatment while in prison. In terms of health, a significant number (up to 40 percent) of returning offenders have a communicable disease (RAND, 2003). Add to these three factors the potential criminogenic consequences of negative prison culture (Byrne, Taxman, and Hummer, 2005), the offender's isolation from the community (Maruna, 2004), and the rather obvious immediate problems associated with obtaining employment, reconnecting with family and finding a suitable place to live, and the need for transitional assistance becomes obvious. When viewed in this context, the provision of treatment in both institutional and community corrections programs is perhaps the most effective system-wide (community) crime control strategy currently available. Farabee's model of community supervision, by design, would deemphasize the treatment component of community control and focus instead on the surveillance activities of community corrections personnel.

In order to fully implement the deterrence-based community supervision model advocated by Farabee (with higher levels of detection for both criminal behavior and technical program violations), much smaller caseloads (15 to 1) would be needed to give probation and parole officers the time needed to monitor offender movements and behavior in the community. There is one aspect of smaller caseloads and more face-to-face contacts between probation/parole officers and offenders that deserves mention here: the relationships that develop between officers and offenders during supervision. Farabee argues for interactions that will be *outcome-* oriented (e.g., Did you get a job? Did you pass your random drug test? Did you violate your curfew? Did you get rearrested?) rather than *process-* oriented (e.g. How is your job? Have you been going to treatment? Have you made contact with your family?) It appears he bases this recommendation on the notion that for deterrence to work, community corrections officers would need to "detect" violations at least 30 percent of the time (similar to getting a community's clearance rate for a particular reported crime type over 30 percent). While such a "tipping point" analogy might sound plausible in the aggregate, there is no evidence that we could find supporting its application to the supervision of individual offenders. In contrast, there is a body of research

supporting the use of motivational interviewing and other related behavioral management strategies by line probation and parole officers as an effective case management strategy (see for instance Taxman, et al., 2004).

Our review of the correctional change literature suggests that power coercive change strategies are less likely to be effective than normative reeducative change strategies (Taxman, Sheppardson, and Byrne, 2004). Smaller caseloads only make sense if the emphasis is placed on the development and implementation of treatment strategies for offenders; the transformation of community corrections officers into police officers is *not* a strategy based on sound empirical evidence. We tried this approach in the 1980s and early 1990s with intensive supervision, electronic monitoring, and other surveillance-oriented programs. It doesn't work (Byrne, Lurigio and Petersilia, 1992; Petersilia, 2005).

A review of the research on formal and informal social control mechanisms underscores the limitations of individual-level change strategies, regardless of whether the focus of the intervention is surveillance *or* control. There is considerable research suggesting that informal social controls are more effective than formal social controls, at both the individual level (Hirshi and Gottfredson, 2001) and the community level (Sampson, Raudenbush, and Earls, 1997; Sampson, Morenoff, and Raudenbush, 2005). However, it is certainly plausible to suggest that the relationship that develops between a probation/parole officer and an offender—in conjunction with other influences, such as family, peers, work, neighborhood—could represent an important informal social control mechanism. With smaller caseloads and closer contact, it seems plausible to suggest that offenders will consider *the consequences of their decisions* in terms of the impact of these actions on their relationship with their parole officer. We agree with Farabee that there is a potential deterrent effect that may operate as a result of increased contact between officers and offenders; but it will more likely occur as the result of the “bond” that develops between these two individuals, not because of either the certainty of detection/apprehension (i.e., the magical 30 percent tipping point for detection) or the celerity of a probation/parole officer's punitive response. Because Farabee argues that offenders need to remain both crime free and technical violation free for three consecutive years, we anticipate that a significant number of offenders would remain under community surveillance and control for decades. The cost of such a control-based strategy would be prohibitive, while the consequences for communities—particularly high-risk neighborhoods with large concentrations of poor minority offenders—are potentially devastating (Clear and Cadova, 2003).

There is certainly an alternative approach to offender “control”—and change—in community settings that should be considered, based on the assumption that smaller caseloads may be needed, but for a very different purpose. As Sampson and Laub's recent research on crime through the life-course has demonstrated (Sampson and Laub, 2004), desistance occurs as a consequence of “identity shifts” for some offenders, leading to new ways of viewing key lifestyle choices (including work, family, drug use, and criminality). The key turning points in an offender's life-course identified by Sampson and Laub include: 1) marriage, 2) work, 3) military, and 4) residential relocation. It is certainly possible that the effect of smaller caseloads and a supportive relationship between offenders and probation/ parole officers will be manifested in stronger offender ties to family, work, the probation/ parole officers, and the community. If this occurs, then we suspect that there will be significant changes in offender (criminal) behavior, due in part to the effect of informal social control, at the individual and community level.

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Conclusion: The Link Between Individual Change and Community Change

The previous review has identified two very different sets of criminal justice policy recommendations: one (Farabee) is based on classical criminology and two-thirds of the deterrence argument (i.e., certainty and celerity are the keys to offender control); the other treatment (or rehabilitation) camp is based on positivist assumptions about crime causation and the central role of treatment in the offender change process. Clearly, our “choice” of crime control policies has implications for sentencing and community corrections that are important to

understand. In this review, we have examined the links between/among theory, research, and policy identified by both Farabee and treatment advocates, while also offering our own perspective on the need to develop initiatives that integrate both individual and community change strategies. By this point, it should be clear that we view the surveillance vs. treatment debate as largely irrelevant, because it focuses on the *individual* offender and ignores the community context of change/desistance from crime.

The recent development of offender reentry initiatives has renewed interest in initiatives that target both at-risk offenders and at-risk communities. It is becoming increasingly clear that only incremental, short-term changes in offender behavior should be expected from the full implementation of evidence-based practices in both adult and community corrections. In large part, this is because the treatment research highlighted in these evidence-based reviews focused on *individual-level* change strategies. If we are interested in long-term offender change, we need to focus our attention on the *community* context of offender behavior, focusing on such factors as community involvement in crime prevention (Carr, 2003; Pattavina, Byrne, and Garcia, 2006), collective efficacy (Sampson, Raudenbush, and Earls, 1997), community risk level (e.g., communities with higher proportions of first-generation immigrants, particularly Latinos, will have lower violence levels; Martinez, 2002) and community culture (Sampson and Bean, 2005). Our basic premise is supported by a review of the research we cite here: we must develop intervention strategies that recognize the importance of person-environment interactions in the desistance process and incorporate both individual and community change into the model.

Figure one (see next page) presents one possible model of offender reentry, highlighting both the importance of treatment (assessment, placement, quality, and continuity) and the need to integrate both formal and informal social controls at each stage in the offender reentry process. While attention to individual-level problems and treatment needs is a critical component of the reentry model we depict here, program developers need to recognize that each community has a unique set of informal and formal social control mechanisms that will also influence these individuals and affect the desistance process.

It is our view that a review of the treatment research provides support for the continued development of both institution-based and community-based offender rehabilitation programs. While we agree with Farabee that intermediate sanctions can and should be used for many of the nonviolent offenders (e.g., property and drug offenders in particular) currently in our federal and state prison system, we find no empirical justification for abandoning the treatment component of intermediate sanctions and utilizing program resources to improve the surveillance and control components of these programs. The challenge now is to develop initiatives (such as a civic engagement model of restorative justice) that focus on both individual and community change (Bazemore and Stinchcomb, 2004; Clear and Cadova, 2003), because it is becoming increasingly clear that you cannot realistically expect offenders to change unless you begin to change the long-standing problems in their “home” communities (such as poverty, collective efficacy, culture). Farabee’s control-based corrections model ignores the larger issue of community change completely, while offering a vision for individual offender change that is simply not supported by a review of the available research evaluating both treatment-based and deterrence-based correctional interventions. While advances in the new technology of surveillance and control offer a tempting “quick fix,” we suspect that may actually only exacerbate the problem, both for offenders and communities.

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Table 3. Correctional experiments (14).

<i>Publication, location</i>	<i>Initial sample</i>	<i>Conditions</i>	<i>Results (N)</i>	<i>Effect size d (%)</i>
Lewis (1983), California	108 male delinquents age 14–18	E = Scared Straight C = no treatment	12 months arrests: E 81.1% (53) C 67.3% (55)	-0.41 (+21)
Cook and Spurrison (1992), Mississippi	176 male delinquents, mean age 15	E = Scared Straight C = no treatment	12 months offenses: EB 1.32 (97) EA 0.43 (97) CB 1.25 (79) CA 0.38 (79)	-0.03 (+7)
Peters et al. (1997), Cleveland	About 354 male delinquents	E = Boot Camp C = confinement	9 months convictions: E 72% (182) C 50% (172)	-0.52 (+44)*
Peters et al. (1997), Denver	About 230 male delinquents	E = Boot Camp C = confinement or probation	9 months convictions: E 39% (124) C 36% (106)	-0.07 (+8)
Peters et al. (1997), Mobile	About 526 male delinquents	E = Boot Camp C = probation (mostly)	9 months convictions: E 28% (187) C 31% (339)	0.08 (-10)
CYA (1997), California	632 male delinquents, mean age 17	E = Boot Camp C = confinement	12 months arrests: E 60.7% (313) C 58.0% (243)	-0.06 (+5)
Greenwood and Turner (1993a), Ohio	150 male delinquents, age 15 or over	E = Paint Creek C = usual training school	12 months arrests: E 50.7% (73) C 61.3% (75)	0.24 (-17)
Robinson (1995) Canada	4072 male offenders, mean age 29	E = Reasoning and Rehabilitation C = Other	12 months convictions: E 21.3% (1,673) C 24.8% (369)	0.11 (-14)
Ortmann (2000), Germany	228 male prisoners	E = social therapy prison C = usual prison	5 years convictions: E 60.4% (111)	0.18 (-11)

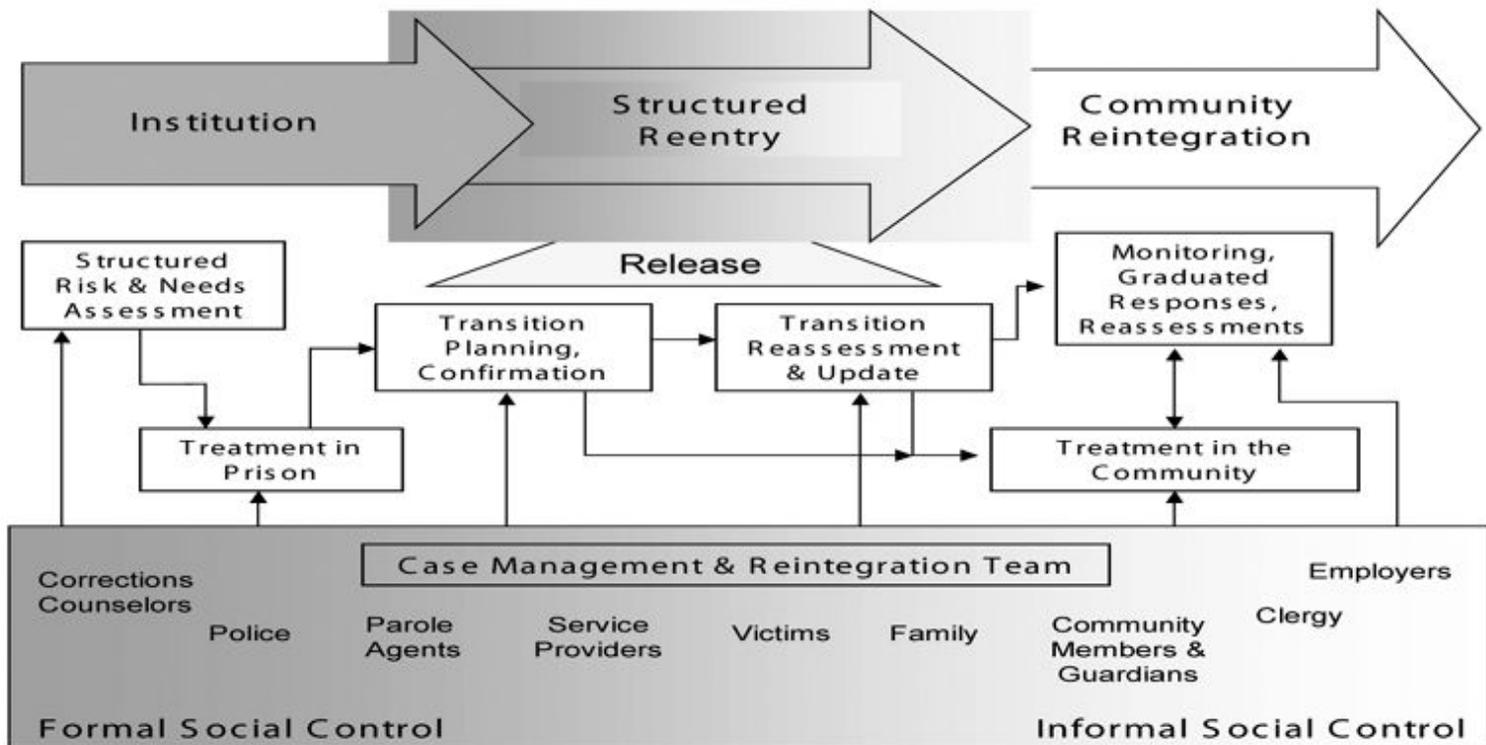
Author (Year), Location	Sample	Intervention (E) / Control (C)	Outcomes	Effect Size (d) (95% CI)
Armstrong (2003), Maryland	256 male inmates, mean age 21	E = moral reconnection therapy C = no treatment	E 66.7% (111) C 67.9% (112) 2.3 years convictions: E 64.5% (110) C 64.7% (102)	0 (0)
Inciardi et al. (1997), Delaware	367 drug-involved inmates	E = therapeutic community C = no treatment	18 months arrests: E 43% (179) C 53.9% (180)	0.24 (-20)*
Dugan and Everett (1998) Washington	145 drug-involved inmates	E = therapeutic community C = no treatment	2 year arrests: EM 4.5 (61) ES 6.3 (61) CM 3.4 (56) CS 5.2 (56)	-0.20 (+32)
Wexler et al. (1999), San Diego	715 drug-involved inmates, mean age 30	E = therapeutic community C = no treatment	3 years reincarceration: E 68.9% (289) C 75.1% (189)	0.17 (-8)
Marques et al. (1994), California	229 volunteer male sex offenders	E = Cognitive behavioral treatment C = No treatment	34 months sex arrests: E 10.4% (106) C 13.4% (97)	0.16 (-22)

Effect size shows standardized mean difference (d), with relative percentage difference between experimental and control conditions in parentheses.

*p < 0.05

E: Experimental, C: Control, EB: Experimental Before, EA: Experimental After, CB: Control Before

CA: Control After, EM: Experimental Mean, ES: Experimental SD, CM: Control Mean, CS: Control SD



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Crime Control Strategies and Community Change

¹ Farabee does not discuss the “broken windows probation” model developed by John DiIulio and his colleagues on The Reinventing Probation Council (2000). For a critique of this model, see Taxman and Byrne (2001). Unlike Farabee, who focused on individual offender change, the Reinventing Probation Council argued strongly that the “bottom line” for community corrections is the crime rate in their community, not offender recidivism. In subsequent articles, members of the council have embraced our view that “treatment” must be a core feature of community corrections (see, e.g. Rhine, 2001).

² In their recent discussion of the need for a “civil engagement” model of reentry, Bazemore and Stinchcomb (2004) discuss reintegration and life-course intervention. They argue, for example, that “civic service experience may accomplish this [desistance] in two ways: (1) by developing participants’ public image through increasing skills as human capital, and (2) by creating opportunities for the development of more affective connections associated with social support” (18). This is an intriguing avenue for future research, because it moves the discussion of the policy implications of life-course criminology beyond the “good marriages and the desistance process” discussions now available (see, e.g., Laub, Nagin, and Sampson, 2001). In addition to restorative justice-based and life-course-based research, it would certainly make sense to consider the prospects for individual offender change within the general framework of person-environment interactions (Gottfredson and Taylor, 1986), focusing specifically on the impact of community-level, informal social controls (i.e. collective efficacy) on offender reintegration. Clear and Cadova (2003:77-79) offer an interesting discussion of the impact of these community-level factors on offenders *and* the communities in which they reside.

³ Given the recent attention focused on Hirschi and Gottfredson’s “General Theory of Crime,” Laub and Sampson’s “Life-Course Perspective,” and most recently, Sampson and colleague’s research demonstrating the importance of community-level, informal social controls (i.e.

collective efficacy) as a violence prevention strategy, it is surprising that Farabee did not review this important body of research.

⁴ Clear and Cadova (2003:78) offer a somewhat different view of the role of community corrections. From a community justice perspective, it is “not only how an offender is behaving, but also how that offender’s situation—in or out of prison—affects the people who are not under correctional authority.”

⁵ We agree with Sampson and Laub’s assessment that “the effectiveness of rehabilitative interventions in reducing criminal behavior is not as dismal as common wisdom (“nothing works”) allows” (2001:255). They go on to argue that it is important to distinguish between/among bad theory, bad research (e.g., design choice, analytic procedures and criterion problems), and bad practice (in terms of program design and implementation). Farabee’s review of the treatment research identified a number of effective interventions, including those based on cognitive restructuring (Pearson, et al. 2002) and multifactor initiatives (Antonowicz and Ross, 1994).

⁶ The most recent example of a deterrence-based intervention that received a very favorable initial evaluation (Kennedy, et al. 2001) was “operation cease-fire,” a strategy to reduce gun violence in Boston. Attempts to replicate the Boston model in Los Angeles were unsuccessful (see, Tita et al., 2005) and the initiative “did not have the *desired deterrent effect*” (20). The recent negative evaluation research reviews of problem-oriented policing generally (National Research Council, 2004), and the underlying assumptions of “broken windows” policing in particular (Sampson and Raudenbush, 2001; Taylor, 2001; Sampson and Raudenbush, 2004), should also be examined. Sampson and Raudenbush (2004:1) challenge the empirical foundation of the “disorder causes crime” thesis, which is a central tenet of the broken windows model. Their research revealed that “it is the structural characteristics of neighborhoods, as well as neighborhood cohesion and informal social control— *not levels of disorder* —that most affect crime (4). More recently, these same researchers presented findings from their long-term study of Chicago neighborhoods that revealed that strategies consistent with the broken windows model “may have only limited payoffs in neighborhoods inhabited by large numbers of ethnic minority and poor people. The limitations on effectiveness in no way derives from deficiencies in the residents of such neighborhoods. Rather, it is due to social psychological processes of implicit bias and statistical discrimination as played out in the current (and historically durable) racialized context of cities in the United States. In other words, simply removing (or adding) graffiti may lead to nothing, depending on the social context” (Sampson and Raudenbush, 2004:337). Given the current concentration of offenders in a small number of “high risk” communities across the country (Byrne and Taxman, 2004), it appears that “broken windows”- based strategies would not have the deterrent effect proposed.

⁷ Farrington and Welsh point out that one of the problems with previous reviews of the effectiveness of a wide range of criminal justice interventions is the tendency on the part of reviewers to mistake statistical significance for strength of association (or effect size). They observe that “... a statistically significant result can reflect either a large effect in a small sample or a small effect in a large sample. [For this reason] it is important to measure effect size.” (Farrington and Welsh, 2005:21). The rule of thumb they used in their meta-analysis of the effects of interventions combined significance and effect size differences, with a 10 percent or greater difference being the criterion of effectiveness.

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¹ Department of Justice Press Release (March 15, 2006).

² Lawrence A. Greenfield. “Sixty Percent of Convicted Sex Offenders are on Parole or Probation,” *Bureau of Justice Statistics* News Release, February 2, 1997 (Department of Justice).