

Violent Behaviour, Treatment and Recidivism: Evaluation of the RNR Model at Quatre Camins Prison

Executive Report

Authors' own research

Authors

Criminal Enforcement Research and Training Department
Quatre Camins Prison Violence Evaluation Team

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Violent Behaviour, Treatment and Recidivism: Evaluation of the RNR Model at QC Prison

Authors: Manel Capdevila and Miguel Marrufo (coordinators);
 Laura Ruiz, Ruth Díez, Berta Framis, Carles Soler, Aroa Arrufat (Centre for Legal Studies and Specialised Training – CEJFE);
 Laura Salvanyà; Carmen Macarrón; Joaquim López, Joan Pere Queralt (QC Prison)

1. Presentation of the Study

In 2016, Centre Penitenciari Quatre Camins (hereinafter, “QC Prison”) launched the *Violent Behaviour Evaluation Programme* to improve its work with people convicted of violent offences based on the RNR model. Implementing the programme entailed moving away from an **offence-based** rehabilitation model to one **based on inmates’ risks and criminogenic needs**.

Andrews and Bonta’s RNR model (2007) is based on three principles: *Risk*, *Necessity* and *Responsivity*. The first of these, *risk*, relates to the importance of adapting the type of intervention to the level of risk posed by each offender, increasing the intensity of each individual’s treatment and supervision directly in accordance with their level of risk: the greater the risk, the greater the closed-regime intervention; the lower the risk, the lower the level of intervention. Secondly, the *need* principle entails working with each person on the factors that directly affect their likelihood of reoffending in their specific case. Thirdly, *responsivity* indicates that the type of treatment should be tailored to each individual’s characteristics and learning styles, taking into account the gender perspective, cultural differences in the case of those coming from abroad, language difficulties and each person’s intellectual and learning abilities. Finally, the authors present clear evidence that interventions are more effective when they continue to be applied in the community.

The first part of this study, which was presented in 2018 under the title “*Avaluació de la conducta violenta al CPQC*” [“Evaluation of Violent Behaviour at QC Prison”], contained the initial conclusions following this change in the way of working at QC Prison. More information is available at <http://cejfe.gencat.cat/ca/recerca/cataleg/crono/2018/conducta-violenta-QC/>.

This update sets out the results of the programme following several years of implementation, giving the model time to become established and providing a post-release monitoring period to ascertain its impact on recidivism.

2. Most Relevant Aspects of the Change in Intervention Model and Paradigm Shift

A) Intervention founded on evidence-based structured professional judgement (fourth generation)

Table 1. Professional judgement models

Assessment method	Base	Application	Prediction and accuracy rate
Unstructured clinical judgement (1st generation)	Judgement based exclusively on the professional’s own experience and perception.	Social arena Criminal enforcement Judiciary	25-50%

Actuarial judgement (2nd generation)	This type of judgement is based solely on mathematical algorithms, scales and cut-off points. It focuses on mainly static factors (those that no longer change) and is not sensitive to the person's ability to change and improve. In view of this, such judgements cannot be linked to interventions.	Insurance policies Criminal enforcement Judiciary Forensic science	50-70%
Structured clinical judgement (3rd generation)	This type of judgement is based on the professional's expertise combined with the use of algorithms and dynamic factors (which can change over time such that, if they are approached as needs to be covered and subsequently re-assessed, the effectiveness of the programmes and supervision strategies used can be ascertained).	Healthcare arena Criminal enforcement	60-80%
Systematic and comprehensive structured professional judgement (4th generation)	Systematic integration of risk assessment and treatment planning. This combination of assessment and individual pathway supported by professional mentoring must evolve in accordance with the evidence (changes in behaviour, habits and values and whether the offender takes on a desistant identity).	Healthcare arena Criminal enforcement	70-80%

Source: Bonta, J. & Andrews, D.A. (2007). *Risk-need-responsivity model for offender assessment and rehabilitation* (Corrections Research User Report No. 2007-06). Ottawa, Ontario: Public Safety Canada

B) Change in the intervention model used with inmates in relation to the therapeutic pathway

Table 2. Differences between the *classic prison* (control group) and *RNR* (programme group) models

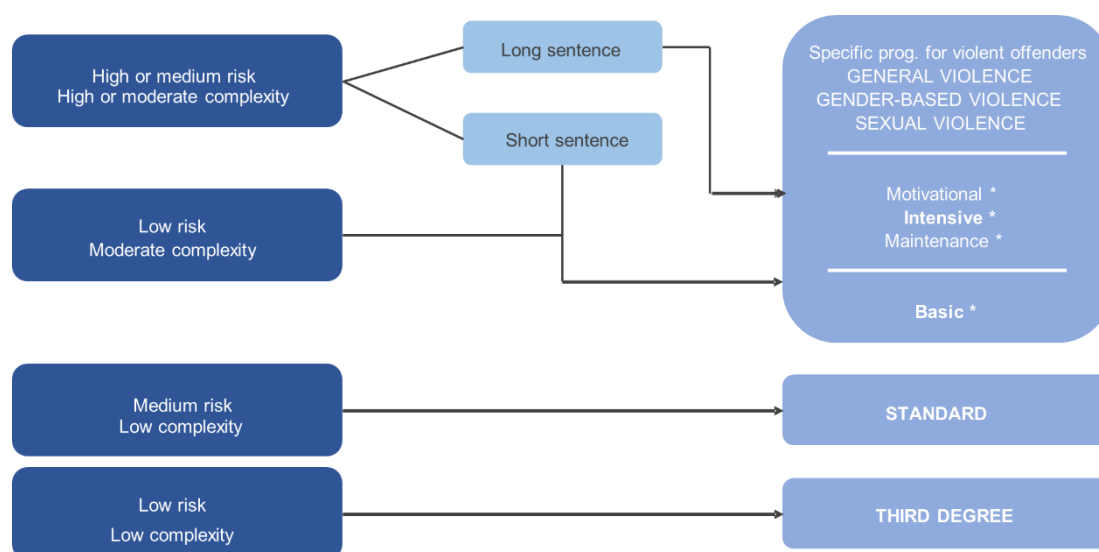
<i>Classic prison</i> model (control group)	<i>RNR</i> model (implemented at QC Prison) (programme group)
Initial assessment (<i>RisCanvi</i>) providing the basis for some actions.	Initial assessment (<i>RisCanvi</i>) setting the rules and conditions for the entire process and leading to distinct pathways (based on each person's risk level and dynamic factors).
All offenders convicted of violent crimes follow the specific pathway for violent offenders .	Only those offenders convicted of violent crimes who present a high or medium risk of recidivism follow the specific pathway for violent offenders . Convicts with a low risk of recidivism are placed directly in the third degree (open regime) . Convicts with a medium or low risk of recidivism and other factors resulting from the degree of complexity follow the standard pathway.
<i>Classic prison</i> model (control group)	<i>RNR</i> model (implemented at QC Prison) (programme group)
The specific intervention programme for violent offenders starts when a large proportion of the sentence has been served (close to three quarters).	The intervention programme starts immediately after the initial assessment and, for those following the specific pathway for violent offenders , as close as possible to one quarter of the way through their sentence.
Although participation in and completion of the specific programmes is a necessary requirement, it is not enough to start on the temporary release scheme (release on temporary licence (ROTL) and others).	Participation and completion of the specific programmes must have an impact on the proposal to start offenders on the temporary release scheme.

Excessive intervention by treatment teams because they have to take action in relation to all inmates regardless of risk.	Treatment staff specialise in higher-risk and higher-need cases. In addition, in cases requiring less intervention due to presenting a low risk and low needs, monitoring and mentoring tasks are shared with other professionals at the prison.
Difficulty obtaining ROTLs for resettlement purposes and transfer to an open regime (third degree or conditional release) before the end of the sentence, despite meeting the applicable criteria.	Access to ROTLs for resettlement purposes after serving close to one quarter of the sentence, which in turn encourages the application of other prison benefits.

C) Other characteristics introduced by the team at QC Prison (see the previous report)

QC Prison has introduced to the intervention and paradigm shift model discussed above a number of characteristics that are worth noting because they are specific to this particular prison and the way it works and are now being evaluated in this second report: the **complexity** of the case (as a factor added to the *RisCanvi* assessment), the **initial assessment** of the risk of violence by a specialist team (VET) and the creation of a set of **theoretical pathways** based on the combination of the intersection between the *risk* and *complexity* variables (see Figure 1).

Figure 1. Theoretical pathways according to risk and complexity



*Since 2019, programmes no longer include these options. Instead, the intensive programme is now carried out in all cases, supplemented by other psychoeducational programmes in accordance with each subject's needs. At the time of starting the study, no such programmes were yet in existence.

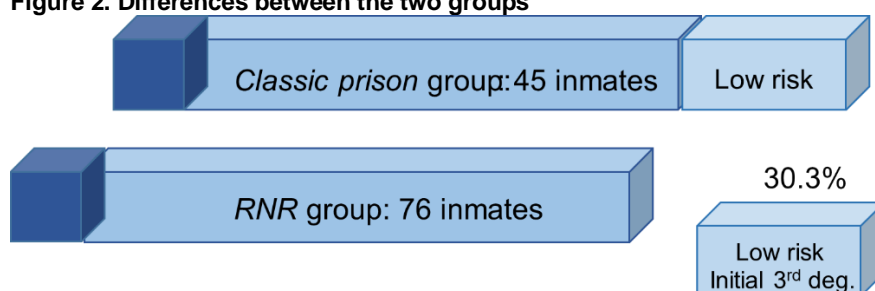
The data was collected at three different moments: just before the treatment programme (M1), six months after the end of the programme (M2) and one year after its end (M3). This was then used to see how the variables had evolved in the short (between M1 and M2 = M4) and long (between M1 and M3 = M5) terms. In addition, a number of variables were updated to 31 May 2021, as they are indicators of offenders' prison and post-prison history, which makes them important for analysing the effectiveness of the new model: prisoner category evolution while serving the baseline sentence, incidents, disciplinary proceedings, application of ROTLs for resettlement purposes, the inmate's current situation and reincarceration rates.

3. Differences between Groups

The differences in variables between the two groups (the *RNR* group and the *classic prison* group) had already been analysed in the previous study. It was found that the two groups were similar **before** the intervention but that, **following the initial assessment and transfer of low-risk cases to an open regime**, the inmates in the *RNR* group presented a more homogeneous and higher-risk profile.

This is because the *classic group* included those inmates with a low risk of reoffending who would not be released until very late into their sentence. As for the *RNR group*, on the other hand, as the intervention was based on inmates' risk level and those at low risk of reoffending had already started on the third-degree pathway, these inmates were no longer included and were not going to take part in the in-prison treatment programmes for violent offenders. As a result, the *RNR group* had a tougher criminological profile because it was made up of offenders at high and medium risk of reoffending, while the *classic group* was more heterogeneous.

Figure 2. Differences between the two groups



How had the differences between the two groups changed by the end of the monitoring period? Their evolution is shown in Table 3.

Table 3. Significant differences between the *classic prison group* and the *RNR group*

<i>Classic prison group</i>	Prison variables	<i>RNR group</i>
4.4%	Initial classification in the third degree	30.3%
2.3%	Incidents at M1	44.7%
95.6%	Second degree (under which inmates can access prison benefits) at M3	53.9%
2.2%	Third degree at M3	28.9%
93.3%	No upgrades at M3	75.0%
26.7%	Current status: conditional release (CR)	3.9%
48.9%	Current status: full release (FR)	77.6%
46.7%	Current status: upgrade to the third degree	27.0%
0.0%	Current status: remaining in the third degree	17.6%

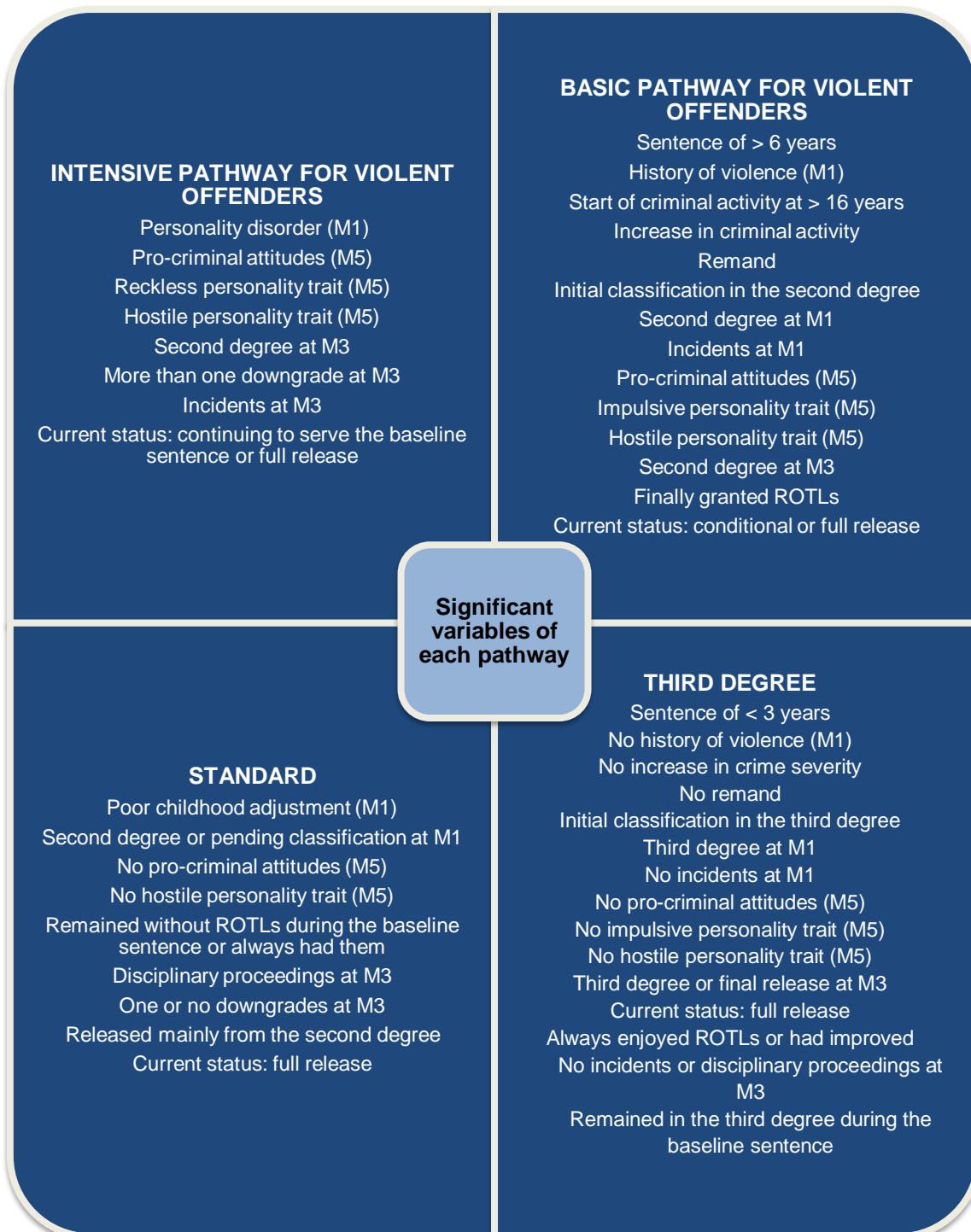
The main conclusion that can be drawn from this evolution is that the *RNR* group moved up faster and remained more stable in its evolution than the *classic prison* group, which ended up being upgraded less and later.

4. Evolution Profiles in the RNR Group According to Treatment Pathway

Were there any significant differences in evolution variables based on the treatment pathways followed by the members of the *RNR* group?

Yes, as shown in Figure 3.

Figure 3. Significant differences between pathways



People following the *intensive pathway for violent offenders* were more likely to have more complex personality traits and a more fluctuating evolution in prison. This was the group with the most prisoner category downgrades and incidents. Most of them were in the second degree when they finished their sentence. This was also the group with the highest number of inmates who were still serving their sentence (they have been disregarded for recidivism monitoring purposes). This was the group with long (3-6 years) or very long (over 6 years) sentences. Rate of recidivism: 22.2%.

People following the ***basic pathway for violent offenders*** had quite a few personal, criminal and prison risk variables and little or very slow positive evolution while in prison. They had been downgraded at least once and had at most been granted ROTLs for resettlement purposes, and most of them were in the second degree on release. As in the previous group, this group also includes people who are still serving their sentence and have similarly been disregarded for recidivism monitoring purposes or who have been reincarcerated for a new offence. Offenders serving long or very long sentences were also overrepresented in this group. Rate of recidivism: 13.6%.

People following the ***standard pathway*** had few personal and criminal risk variables, although some of them had had an irregular prison evolution, including disciplinary proceedings and being downgraded a significant amount of time into their sentence, in many cases leading them to be released in the second degree. Rate of recidivism: 17.6%.

People on the ***third-degree pathway*** had few personal, criminal and prison risk variables and remained incident-free throughout their sentence. This coincides with the group of offenders sentenced to less than 3 years. Rate of recidivism: 5.0%.

However, the differences in percentage between their rates of recidivism were not significant.

RESULTS

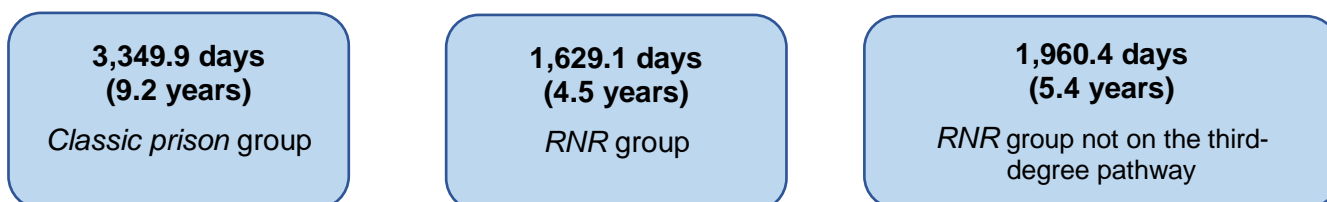
PART 1: Differences between the *RNR* Group and the *Classic Prison* Group

5. Sentence Length and Time Taken to Do the Treatment

The average time served by the sample as a whole was **2,269.0 days** (6.2 years). The *classic prison* group thus had a significantly longer average sentence and the *RNR* group's was shorter. The differences between the two groups were statistically significant.

Furthermore, the average time served by the *RNR* group was calculated without taking into account those inmates who were following the *third-degree* pathway. This is because, when analysing certain variables (such as the time taken to be granted ROTLs for resettlement purposes), it makes no sense to include this group, whose members were classified in the third degree from the start.

Figure 4. Average sentence length



On the face of it, sentence length is the only significant variable differentiating the two groups from each other. The amendments to the Spanish Penal Code, particularly those carried out in 2015, resulted in the incarceration of many offenders who would not previously have received a custodial sentence and have now been sentenced to less than three years. These are mainly cases of gender-based violence, which prior to the reform were given non-custodial sentences.

At what point in the sentence did they undergo the treatment programme?

In order to compare the two groups and avoid biases caused by the difference in average time served, we calculated the average number of days taken to do the programme from the first day of the baseline sentence, and the resulting figure was used to obtain the percentage of time served.

Figure 5. Percentage of time served when starting the treatment programme

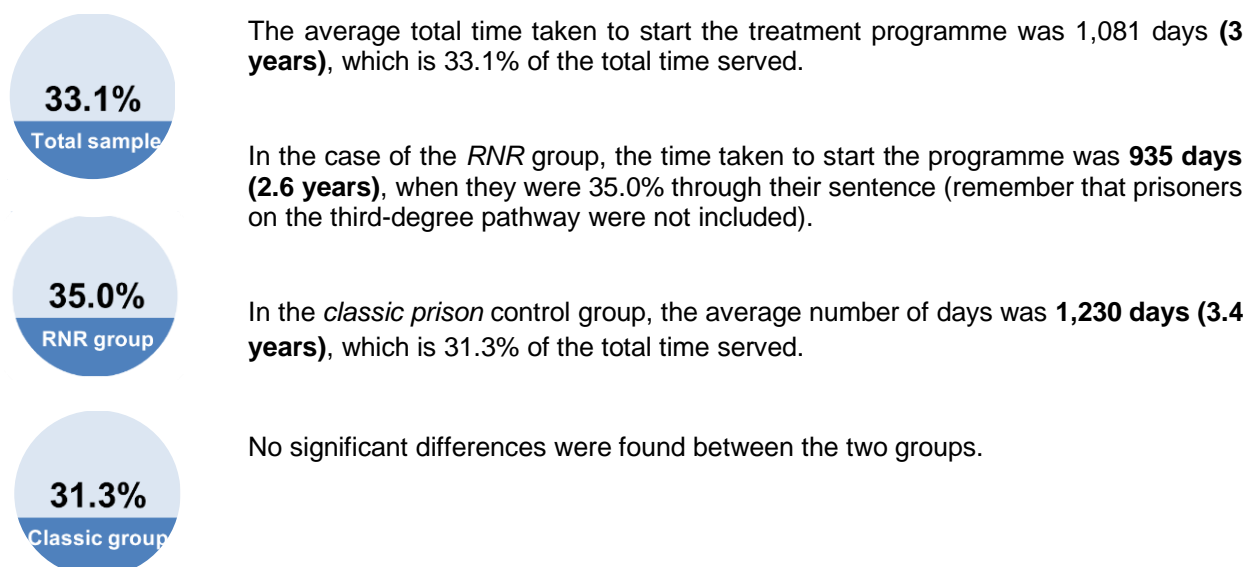
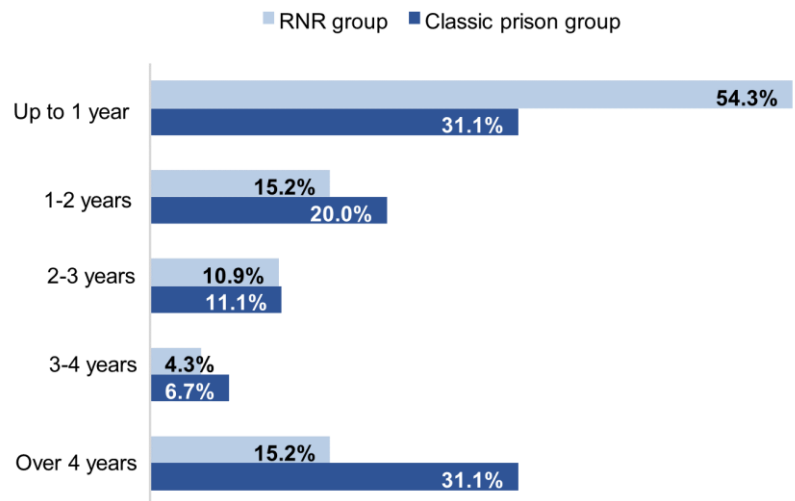


Chart 1. Aggregate time taken to start the treatment programme

If you aggregate the time taken to start the treatment programme in years, you can see that half the *RNR* group started during the first year of their sentence, while one third of the *classic prison* group spent over four years without any specific treatment programme. However, these results can be partially explained by the difference in average sentence time between the two groups mentioned above.



Conclusion: Although the new model resulted in significantly more offenders undergoing treatment in the first year of their sentence (half of all inmates), the remaining cases still took longer than recommended by the *RNR* model: they started one third through their sentence, as opposed to at the recommended time (of one quarter through it).

Proposal: It is advisable to start the treatment programme before offenders have served a quarter of their sentence so that, whenever possible and permitted by law, they can be put forward to start on the temporary release scheme.

6. Start of the Temporary Release Scheme

At moment 1 (M1), just before the start of the programme, **one** out of every **ten** inmates in the *RNR* group had already been granted their first ROTL for resettlement purposes, whereas **no** inmates in the *classic prison* group had started the temporary release scheme. A possible short-term direct effect of the change in model is that, at M2, six months after the end of the programme, 17.6% of the *RNR* group had been granted at least one ROTL. The difference of around 10 points compared to the *classic prison* group still applied at M3, one year after the programme. This suggests that the proposed new model not only results in earlier release but also increases the number of inmates who start to leave the prison on ROTL after the end of the programme.

Figure 6. Evolution of the first ROTL for resettlement purposes over time

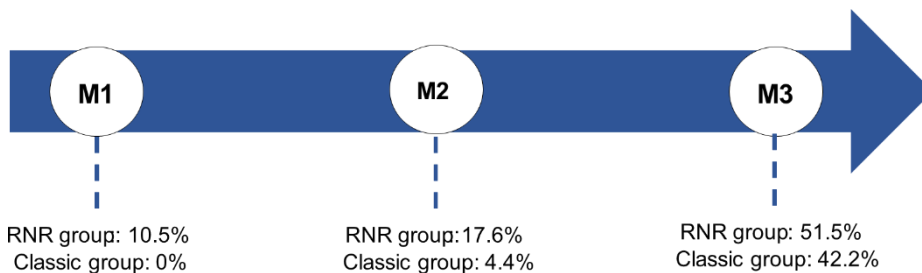


Table 4. Average number of days and percentage of the sentence served at the time of grant of the first ROTL for resettlement purposes

<i>Classic prison group</i>	<i>RNR group</i>
2,135.0 days (5.8 years)	1,044.7 days (2.9 years)
54.4% of the sentence	54.6% of the sentence

In absolute terms, the *classic prison group* took twice as long to be given ROTL for the first time as the *RNR group*.

Although the differences were significant, they were heavily influenced by the difference in sentence length.

The percentage of time served at the time of grant of the first ROTL, on the other hand, was the same, around halfway through their sentence.

However, the two groups are comparable in that, on average, their members were granted their first ROTL halfway through their sentence (although this could also be much earlier). The number of offenders who were granted their first ROTL one quarter of the way through their sentence was insignificant: 4.9% in the *classic prison* control group and 5.1% in the *RNR* programme group.

Table 5. Number of cases granted their first ROTL at each moment in their sentence

Group	Moment in the sentence when the temporary release scheme begins		
	1/4	1/2	3/4
<i>Classic prison control group</i>	4.9%	46.3%	9.8%
<i>RNR programme group</i>	5.1%	50.8%	22.0%

Unfortunately, this shows that the QC Prison team's attempts to bring proposals for release forward met with resistance from the Prosecutor's Office (primarily) and the Prison Supervision Court (JVP). Due to the low number of cases included in the analysis, we were unable to establish whether the time of grant of an inmate's first ROTL had any impact on recidivism. However, the question can be asked for the entire sample: did the grant of ROTLs have any subsequent effects on the rate of recidivism?

The answer is no. As shown in Table 6, there was no significant difference. This means that granting more ROTLs and doing so earlier did not lead to an increase in recidivism. But neither did it lead to a decrease.

Table 6. Relationship between ROTLs for resettlement purposes and subsequent recidivism

Group	ROTLs	Recidivism						Significance
		Yes		No		Total		
		N	%	N	%	N	%	
<i>Classic prison</i>	No	3	15.8	16	84.2	19	100	0.881
	Yes	3	17.6	14	82.4	17	100	
<i>RNR</i>	No	3	18.8	13	81.3	16	100	0.964
	Yes	4	18.2	18	81.8	22	100	

Conclusion: The new *RNR*-based management model is still not sufficiently effective to bring forward the time at which the temporary release scheme begins, and halfway through the sentence is still the most common moment for an offender's first ROTL. The results show that applying the *RNR* principle to the grant of ROTLs by granting more of them and doing so earlier did NOT result in increased recidivism.

Proposal: To work with all legal operators (the Prison Treatment Board, the Classification Service, the Prosecutor's Office and the Prison Supervision Court) to achieve a true reduction in the proportion of the sentence served at the start of the temporary release scheme to a quarter of the time through the sentence, whenever permitted by law, for offenders following the standard pathway. For those undergoing the treatment programme for violent offenders, this should be subject to participation in the specific programme.

How long does it take to be granted the first ROTL from the end of the specific programme for violent offenders or standard pathway in the RNR programme group (remembering that all members of the *classic prison* group had to participate in the programme, whether they needed it or not)?

Table 7. Time taken to be granted the first ROTL for resettlement purposes from the end of the treatment programme

<i>Classic prison group</i>	<i>RNR group</i>
-57.8 days (-2 months)	103.1 days (3 months)

In general, members of the *classic prison group* were granted their first ROTL for resettlement purposes before the end of the treatment programme, while members of the *RNR group* were granted it, on average, three months after the end of the programme.

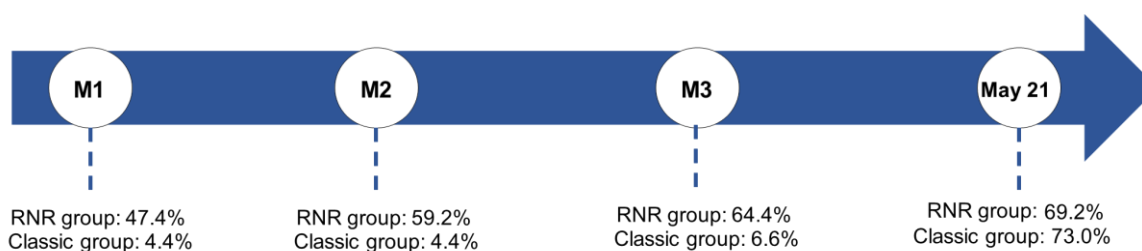
A possible explanation for this is that the *classic prison group* took much longer than the *RNR group* (almost a year longer) to start the treatment programme and, during this waiting time, its members were already starting the temporary release scheme and being granted their first ROTL for resettlement purposes without it being tied to participation in the treatment programme. Bringing the treatment programme forward and tying its results to the start of the temporary release scheme is good practice and is proving to be effective.

7. Transfer to the Third Degree

The *classic prison group* took much longer to be upgraded to an open regime. In fact, six months after completing the specific treatment programme, only 6.6% of offenders in this group were in the third degree, compared to 64.4% of the *RNR group* at the same point.

However, at the time of closing the fieldwork (30/05/2021), seven out of every ten inmates in both groups had been upgraded and were enjoying ROTLs in the third degree. We can thus conclude from these figures, which are set out in Figure 7, that the new model enables them to reach the third degree earlier without, as discussed below, any increase in recidivism. The new RNR model is therefore more efficient although, as shown by the work carried out at QC Prison, it is no more effective (similar rate of recidivism).

Figure 7. Aggregate percentage of offenders upgraded to the third degree at each control point



These figures on ROTLs for offenders classified in the third degree at QC Prison must be understood in the context of the overall figures for all prisons, because they are very different and noteworthy.

As shown in Table 8, regarding *reincarceration rates for all prisons in 2014* (the date of the most recently published study with general data), the percentage of classified people who were in the third degree when they were released at the end of their sentence was 52.0%. Under the new RNR model, the percentage for QC Prison was 17 points higher. And, as shown in Table 9, this had no effect on recidivism for offenders in the third degree. On the contrary: the percentage of desistance was higher and significant compared to the general rate for all prisons, which was not the case internally between the *classic* and *RNR* models.

Table 8. Comparison between QC Prison and other prisons in the release of prisoners in the third degree

QC Prison	Other prisons
69.2% (<i>RNR</i>)	52.0%

Table 9. Comparison between the desistance rate (no recidivism) of inmates released when in the third degree from QC Prison compared to the general rate in all prisons in 2014

QC Prison	General rate for prisoners in the third degree
93.3% (<i>RNR</i>)	81.9%

Going back to the comparison between the two groups at QC Prison, how long did those who reached the third degree take to reach it from the start of their baseline sentence?

Table 10. Time taken to reach the third degree from the start of the baseline sentence

<i>Classic prison group</i>	<i>RNR group</i>
2,219.2 days (6.1 years)	1,024.0 days (2.8 years)
60.8% of the sentence	55.0% of the sentence

In absolute terms, the *classic prison group* took more than twice as long to reach the third degree as the *RNR group*. Once again, the differences were significant but influenced by sentence length.

However, a small improvement in the percentage of the sentence served at the time of reaching the third degree was observed in the *RNR group*.

Does reaching the third degree have any subsequent effects on the rate of recidivism? The answer to this question can be found in Tables 11 and 12.

Table 11. Relationship between release in the second or third degree and subsequent recidivism, by group

Group	Category on release	Recidivism						Significance
		Yes		No		Total		
		N	%	N	%	N	%	
Classic control	2nd degree	4	44.4**	5	55.6	9	100	0.000
	3rd degree	0	0.0	27	100.0**	28	100	
RNR programme	2nd degree	5	25.0*	15	75.0	20	100	0.038
	3rd degree	3	6.7	42	93.3*	45	100	

The answer is yes, for both groups. People who reached the third degree were much less likely to reoffend than those who were in the second degree on release. Under the *classic* model, QC Prison was more cautious when it came to placing inmates in the third degree and took longer to do so. This caution ensured that only those inmates that were considered very unlikely to reoffend were granted the third degree, but this was not offered to those who were in the second degree on release and were not going to reoffend. These margins are better under the new *RNR* model, although without significant differences, as shown in Table 12, very likely due to the same argument made in relation to starting the temporary release scheme: the fact that, in order to be carried out, QC Prison's proposal still needs the other legal operators' collaboration.

Table 12. Relationship between *RNR* or *classic* group membership and recidivism, for each category on release

Group	Category on release	Recidivism						Significance
		Yes		No		Total		
		N	%	N	%	N	%	
2nd degree	<i>RNR group</i>	5	25.0	15	75.0	20	100	0.295
	<i>Classic group</i>	4	44.4	5	55.6	9	100	
3rd degree	<i>RNR group</i>	3	6.7	42	93.3	45	100	0.171
	<i>Classic group</i>	0	0.0	27	100.0	28	100	

This conclusion brings us back to the point we have already made: increasing the number of people who reach the third degree earlier in the *RNR* group does not increase subsequent recidivism, although neither does it decrease it.

How can the intervention's failure to decrease recidivism in the *RNR* group be explained?

Based on the other results contained in the report provided with these figures, we are inclined to believe that the most likely reason is that the *RNR* model was not applied fully and uniformly across the board. Non-evidence-based restrictions on access to prison benefits continued to be applied. As discussed in the second part, *RisCanvi* does not enjoy all the credibility it deserves, and some factors are being assessed twice, with too much statistical weight on its management: motivation, sentence length, incidents, disciplinary proceedings and conflicts, history of violence, and increased criminal activity. Some of these factors, mainly the static ones, are given disproportionate weight when making decisions on pathways and access to social contact measures.

Conclusion: The new *RNR* management model resulted in inmates reaching the third degree earlier, leading to greater efficiency and the same degree of effectiveness. This did not lead to increased recidivism. Traditionally, under the classic model, QC Prison was already committed to upgrading inmates in a clearer manner than at other prisons. This may explain the fact that there were no major differences at the end of the sentence.

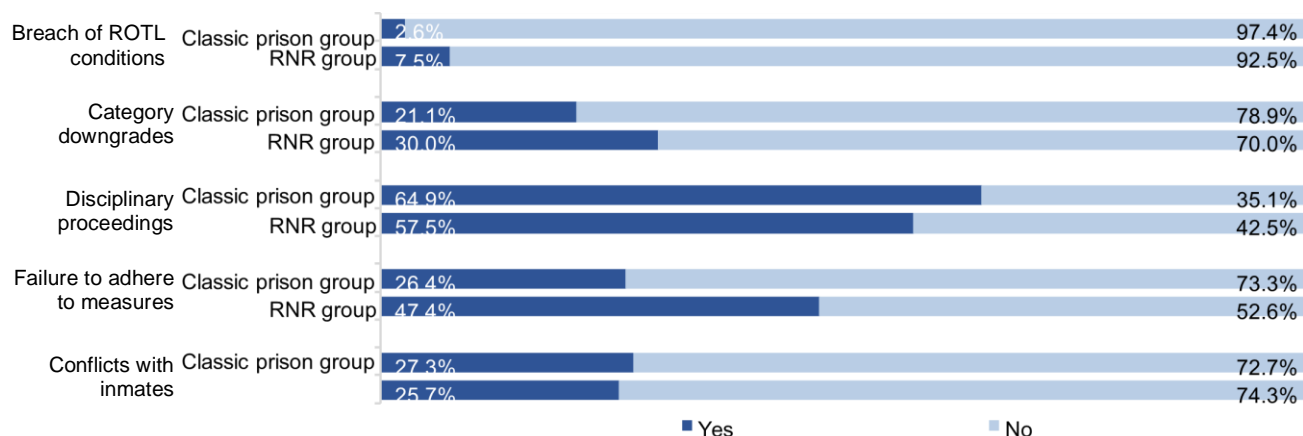
Proposal: To encourage upgrades and release in the third degree more firmly in all cases in which: a) the inmate is participating in the prison treatment programmes and pathways; and b) the conclusion of the six-monthly risk assessments is that the inmate is at low risk of recidivism.

According to the international scientific literature on this subject: 1) supporting these people in the process of release (re-entry) for as long as possible facilitates mentoring and helps redirect risky behaviours at the times of crisis that can arise during any time of change; 2) the processes of desistance support the conclusion that better recidivism results are obtained if the intervention continues over time and is supplemented by measures in the community.

8. Incidents, Breaches, Disciplinary Proceedings and Category Downgrades

What were the long-term differences (from M1 to M3) between the two groups regarding the in-prison behaviour assessment variables?

Chart 2. Percentage of in-prison incidents between M1 and M3



No differences in the variables relating to in-prison disciplinary behaviour were found between the two groups' results. The two groups had similar percentages with no statistical significance.

Conclusion: Under the new *RNR* management model, interventions focus on the highest-risk people (intervening less in lower-risk cases), without this increasing the number of conflicts between inmates or of disciplinary proceedings or leading to failure to adhere to measures or to breaches of ROTL conditions in the group as a whole.

Proposal: To apply the *RNR* model in all other prisons as a useful tool for risk management and a more peaceful prison life.

9. Recidivism

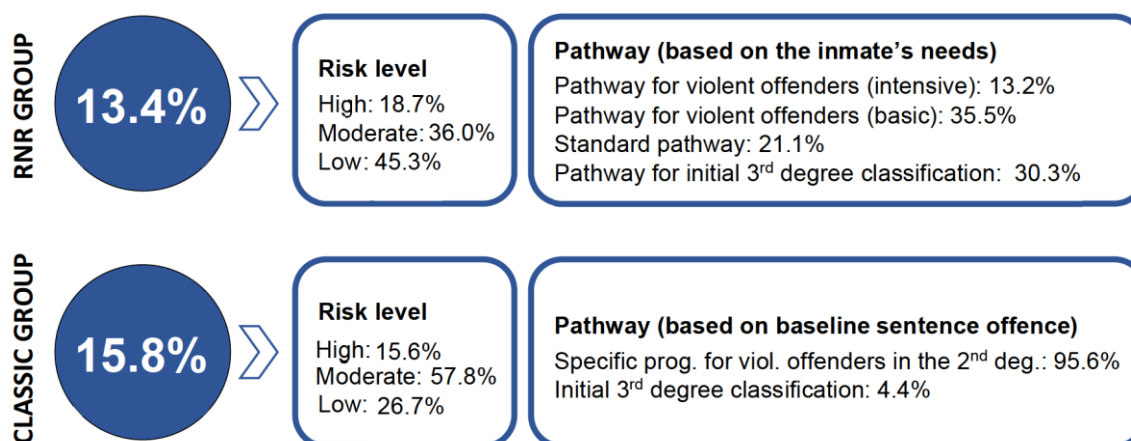
What is the general incarceration rate? And the rate of violent recidivism?

Table 13. General and violent recidivism rates by study group

	<i>Classic prison group</i>	<i>RNR group</i>
General	15.8%	13.4%
Violent	10.5%	7.5%
Average monitoring period: 871 days (2.4 years)		Average monitoring period: 1,029 days (2.8 years)
Time taken to reoffend: 906 days (2.5 years)		Time taken to reoffend: 616 days (1.7 years)
General recidivism rate at 5 years of monitoring (“what if?” inference)		
	18.1%	14.7%

No significant differences were found between the two groups or in any of the monitoring variables studied.

Figure 8. Recidivism rates by group and proportion of risk level and pathway followed



Conclusion: It was found that applying the *RNR* principle led to a significant number of offenders who had committed violent crimes but had been rated as having a *low* risk of recidivism not doing the specific programme for violent offenders (51.4% if you include the standard pathway and the pathway for inmates initially classified in the third degree). However, the rate of recidivism was slightly lower than that of the *classic prison group*, although the differences were not statistically significant.

Andrews and Bonta's (2007) *RNR* model applied to QC Prison was shown to be more effective in reducing the amount of time spent under the ordinary regime without leading to an increase in recidivism than the *classic* system followed in Catalan prisons until now.

Proposal: To implement the model fully and firmly in all prisons.

PART 2: Other Characteristics Introduced by the QC Prison Team

This study has also generated other data that adds value to the main results presented above. As mentioned, QC Prison has made some changes to the *RNR* model. Their impact on risk management and, above all, their relationship with recidivism, are discussed below. This will be done in this second set of results:

- a. The complexity of the case based on the discretionary assessment as *high*, *moderate* or *low* carried out by the specific Violence Evaluation Team (VET). The assessment was made by the VET based on their perceived *unawareness of the problem*, *lack of empathy* and/or *pro-criminal values* by participating inmates. Motivation to change according to Prochaska and DiClemente's Stages of Change Model (1982) was also assessed. These were grouped together into two branching categories (out of the model's six): *pre-contemplation and contemplation* (people who had not reached the phase of taking action for change) on the one hand; and *preparation, action and maintenance* (people who had already taken concrete steps and actions to change) on the other.
- b. Sentence length.
- c. Percentage of compensation paid pursuant to civil liability *ex delicto* (hereinafter, "compensation").

10. The Concept of *Complexity* Applied to QC Prison and *Motivation to Change*

The characteristics of the concept of "*complexity*" introduced by the Violence Evaluation Team at QC Prison in the risk assessment and the selection of needs and pathways have already been discussed above (Section 2(c) and Figure 1). As mentioned earlier, the concept is based on the expertise of professionals who review the algorithmic risk prediction made by *RisCarvi*. Until now, this concept had never been subjected to an evidence-based assessment.

What was the relationship between this pathway stipulated for an inmate based on risk level (*RisCarvi*) and the degree of *complexity* as assessed by the VET?

Table 14. Relationship between risk level, diagnosed complexity and actual pathway followed

Pathway according to risk and complexity		High risk, high complexity		Medium risk, high complexity		Medium risk, moder. complex. (long sentence)		Medium risk, moder. complex. (short sentence)		Medium risk, low complexity		Low risk, moderate complex.		Low risk, low complex.		Total	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
2nd degree	Violent offenders – intensive	3	21.4	1	50.0	3	37.5	0	0.0	0	0.0	3	17.6	0	0.0	10	13.7
	Violent offenders – basic	8	57.1	0	0.0	5	62.5	4	66.7	0	0.0	11	64.7	0	0.0	28	38.4
	Standard pathway	2	14.3	1	50.0	0	0.0	1	16.7	5	71.4	2	11.8	1	5.3	12	16.4
Initially classified in the 3rd degree		1	7.1	0	0.0	0	0.0	1	16.7	2	28.6	1	5.9	18	94.7	23	31.5
Total		14	100.0	2	100.0	8	100.0	6	100.0	7	100.0	17	100.0	19	100.0	73	100.0

Beyond the statistical significances and the scarce information they provide due to the small numbers involved, we have highlighted by means of shading the pathways followed by most offenders based on both variables: *risk* as identified by *RisCarvi* and *complexity* as assessed by the VET.

The majority of *high*- and *medium*-risk inmates follow pathways for violent offenders unless they are considered to be *medium* risk and *low complexity*, in which case they mostly follow the standard pathway (71.4%).

The majority of *low-risk, low-complexity* inmates follow the pathway for offenders initially classified in the third degree (94.7%).

The main difference was observed with *low-risk, moderate-complexity* inmates. It is worth noting that, when it came to making a decision about an offender's initial classification, the professionals' discretionary opinion prevailed over the algorithmic assessment carried out by *RisCanvi* (*low risk*) and differed greatly from it (Table 15). As shown in Table 16, this decision had no effect on reincarceration rates.

Table 15. Differences between complexity and initial classification in low-risk cases

Initial classification	Low risk, moderate complex.		Low risk, low complex.	
	N	%	N	%
2nd degree	16	94.1**	2	10.0
3rd degree	1	5.9	18	90.0**

**Statistical significance $p=0.000$

Table 16. Recidivism based on moderate or low complexity in low-risk cases (*RisCanvi*)

Recidivism	Low risk, moderate complex.		Low risk, low complex.		Total	
	N	%	N	%	N	%
Yes	2	13.3	1	5.0	3	8.6
No	13	86.7	19	95.0	32	91.4
Total	15	100.0	20	100.0	35	100.0

No statistical significance $p=0.383$

Despite having the same risk rating (*low*), it was the degree of *complexity* that determined the initial classification, much more than the *RisCanvi* assessment: *moderate-complexity* cases were placed in the second degree (94.1%), and *low-complexity* cases were classified in the third degree (90.0%).

Complexity is so relevant at QC Prison that, as shown in Table 14, it determines the pathway to be taken next by inmates: the majority of *moderate-complexity* inmates follow pathways for *violent offenders*, with only 11.8% of them taking the *standard* pathway.

This is very much the opposite of what happens with *low-complexity* cases, 94.7% of whom follow the third-degree pathway (see Table 14).

Thus, as shown in Table 16, there was no effect on final recidivism rates. The two complexity levels had similar recidivism rates, without significant differences. Out of all the *moderate-complexity* offenders, 86.7% did not reoffend. We will never know whether this was thanks to being placed in the second degree or if the result would have been the same if they had followed the third-degree pathway. As you can see, the criminal desistance rate for *low-complexity* inmates was 95.0%.

What variables can make the VET consider the need for more intensive therapeutic intervention in the moderate-complexity group as compared to the low-complexity group, despite both of them having been rated as low risk by *RisCanvi*?

Table 17 sets out only the differences observed in the full set of prison variables studied.

Although *RisCanvi* Factor 34 (limited response to treatment) already envisages motivation as a core aspect (according to the explanation of this factor: "it is also important to establish whether the individual has sought help and whether they have accepted it or categorically dismissed it or accepted it for the sole purpose of making a good impression on a judge, review board or other authority but without true motivation to change"), **motivation to change** (whether assessed by an expert team such as the VET or under Prochaska and DiClemente's Stages of Change Model (1982)) is perceived by professional experts as having very high treatment value, to the point that *low-complexity* inmates are labelled as *moderate-complexity* cases and those who appear more willing to change are labelled as *low-complexity* cases. As just seen in Table 14, this *complexity* labelling determines the pathway to be followed. However, we should reflect on whether lack of motivation to change should be a **prerequisite** to precluding access to the third-degree pathway or whether it should constitute the **initial aim** of the intervention itself, particularly in cases rated by *RisCanvi* as being low

risk, as repeatedly mentioned above. **Table 17. Variables with significant differences for low risk, according to whether they were of moderate or low complexity**

Moderate complexity	Higher proportion of...	Low complexity
81.3%	VET's assessment of motivation to change (low or medium)*	35.0%
53.3%	Pre-contemplation/contemplation Stage of Change*	15.0%
58.8%	Foreign	25.0%
23.5%	Short sentences (up to 3 years)*	80.0%
52.9%	Preventive	5.0%
64.7%	Had had incidents at M1*	5.0%
31.3%	Had had incidents by May 2021*	0.0%
35.3%	Had had disciplinary proceedings at M1*	5.0%
50.0%	Uninterrupted imprisonment for under 1 year	100.0%
62.5%	History of violence*	30.0%
73.3%	Increase in crime severity*	31.6%
25.0%	Conflicts with inmates*	0.0%

Note: Variables with an asterisk (*) had already been given a risk rating by *RisCanvi*. The assessors therefore gave excessive weight to these variables, because they were used twice in the assessment.

We have provided two pieces of evidence related to *motivation to change* (in these cases rated as *low risk* by *RisCanvi*) to support the argument that *complexity* should not be part of the equation: the rate of recidivism (Tables 18 and 19) and initial classification in the second degree and difficulty being upgraded (Chart 6).

Table 18. Recidivism according to motivation to change as assessed by the VET (only in low-risk cases with moderate or low complexity)

Recidivism	Low/medium motivation		High motivation		Total	
	N	%	N	%	N	%
Yes	1	5.3	1	6.7	2	5.9
No	18	94.7	14	93.3	32	94.1
Total	19	100.0	15	100.0	34	100.0

No statistical significance $p=0.863$

Table 19. Recidivism according to motivation to change as assessed by Prochaska and DiClemente's tool (only in low-risk cases with moderate or low complexity)

Recidivism	Pre-contemplation /contemplation		Preparation/ action		Total	
	N	%	N	%	N	%
Yes	2	20.0	1	4.3	3	9.1
No	8	80.0	22	95.7	30	90.9
Total	10	100.0	23	100.0	34	100.0

No statistical significance $p=0.151$

Neither the VET's assessment (based on specialised professionals' perception) nor Prochaska and DiClemente's structured tool suggest that having little initial motivation for change results in higher subsequent recidivism.

Conclusions: Contrary to many professionals' opinion, *motivation to change* an offender's own violent behaviour did not appear to affect subsequent recidivism in any of the groups under study. It should not be a prerequisite to accessing treatment programmes or a reason for discrimination regarding the pathway to be followed.

Motivation and awareness of the problem (which are closely related to the concept of *admission of the crime*) are dynamic processes that must be addressed **before** and **during** the intervention. They cannot be a requirement for receiving treatment or, in *low-risk* cases, for accessing an open regime.

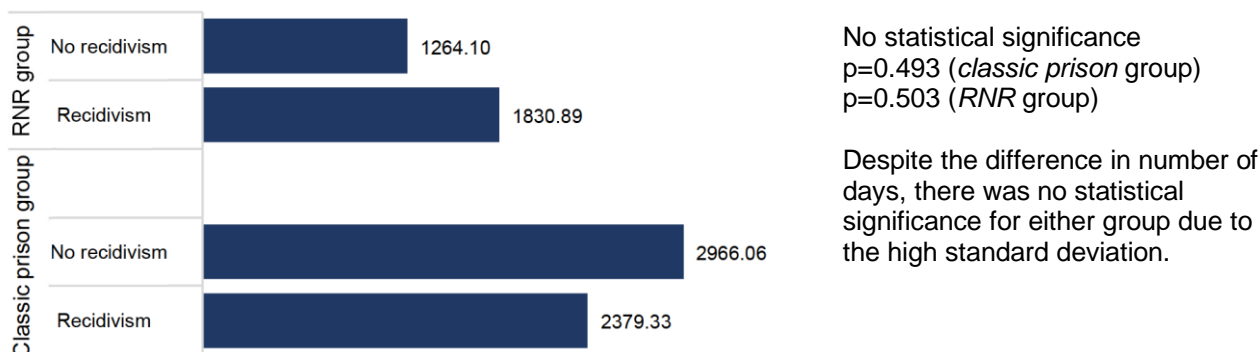
Proposal: *Motivation to change* must be the initial working goal for each pathway: the stage of the offender's motivation to change must be included in their individual initial work as a very important internal aspect of the programme to be worked on (it can be extended or cut back depending on the degree of motivation identified).

11. Sentence Length and its Weight in Assessments at QC Prison

Although this had already been taken into account by *RisCarvi* (under *RisCarvi* Factor 5), the team at QC Prison considered that sentence length must be given added weight when making decisions on the pathway to be applied.

The first piece of data, which has already been mentioned above and been replicated in all our studies, is that **longer incarceration has no effect on reoffending**. Longer sentences do not lead to lower recidivism rates.

Chart 3. Sentence length (in days) and recidivism, by study group



Focusing only on the *RNR* group, the second interesting fact to be noted is that sentence length **did** have an impact on the risk and complexity assessment, which directly affects the pathway chosen.

Table 20. Relationship between risk and complexity assessment, sentence length and pathway

Risk and complexity assessment	N	Average sentence length (in days)	SD (in days)	Main pathway chosen
High risk, high complexity	14	3,434.5 (9.4 years)**	3,158.9	Violent – intensive/basic
Medium risk, high complexity	2	407.0 (1.1 year)*	63.6	Violent – basic
Medium risk, moderate complexity, long sentence	8	2,263.6 (6.2 years)**	1,491.3	Violent – basic/intensive
Medium risk, moderate complexity, short sentence	6	808.3 (2.2 years)*	430.3	Violent – basic
Medium risk, low complexity	7	1,356.1 (3.7 years)	848.7	Standard
Low risk, moderate complexity	17	1,636.4 (4.5 years)	971.2	Violent – basic/intensive
Low risk, low complexity	20	666.9 (1.8 years)*	532.5	3rd degree
Total	74	1,655.5 (4.5 years)	1,835.3	

**above average

*below average

Statistical significance $p=0.000$

A short sentence (under 3 years) with a *low* risk was more likely to result in a third-degree pathway from the outset.

A short sentence with a *medium* risk was linked to a pathway for violent offenders with participation in a basic programme for violent offenders (mainly in cases of gender violence).

Long sentences (3-6 years) also led to a basic programme for violent offenders, except in cases rated as *low* complexity, where a *standard* pathway was followed.

Very long sentences (> 6 years) tended to result in a pathway for violent offenders with an *intensive* or *basic* programme for violent offenders.

Charts 4 and 5 clearly show a close relationship between sentence length and risk, as well as with the rehabilitation pathway to be followed.

Chart 4. Relationship between risk level as predicted by *RisCanvi* and sentence length (grouped in years)

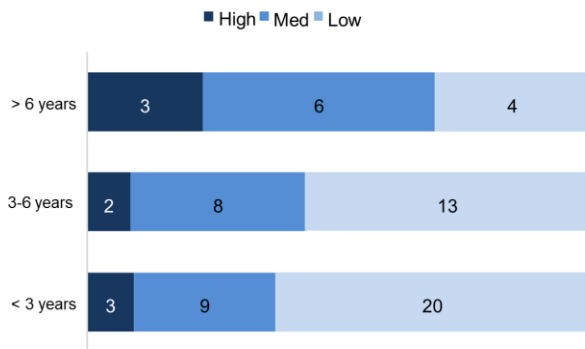
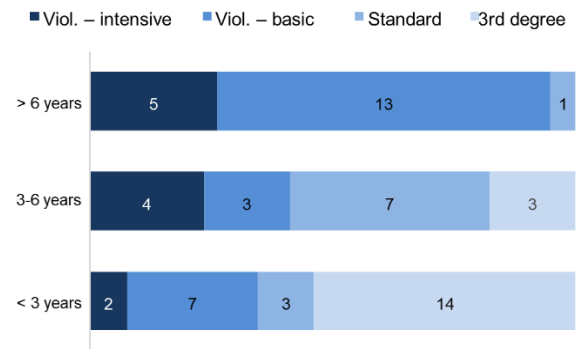


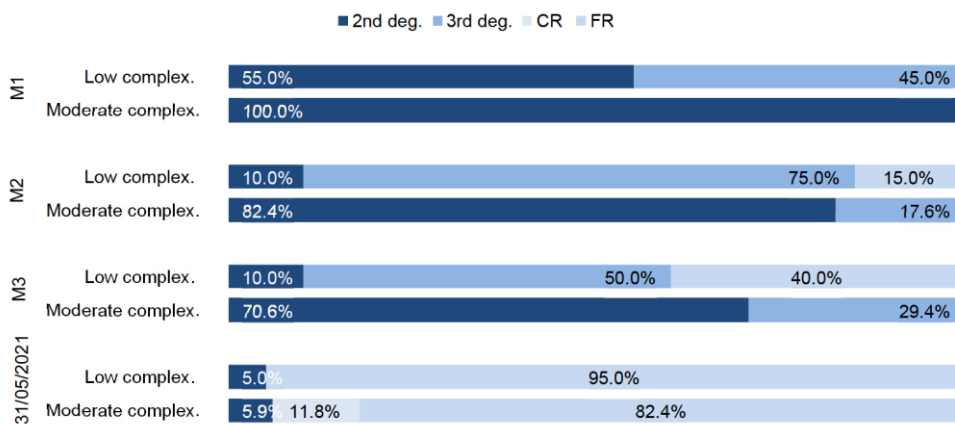
Chart 5. Relationship between pathway and sentence length (grouped in years)



Conclusion: In its assessment of the risk of reoffending, *RisCanvi* already took **sentence length** into account, and the result was consistent with the rehabilitation pathways and programmes subsequently applied at QC Prison. Using *complexity* as an assessment criterion thus only made the process more complicated and resulted in inconclusive efficiency and effectiveness results and in an overestimation of the risk variables already used to measure it.

On the other hand, Chart 6 shows that offenders with a *moderate-complexity* rating were less likely to be upgraded to an open regime (0% at M1, 17.6% at M2, and 29.4% at M3). In contrast, of those rated as *low-complexity* cases, 45% were already in the third degree at M1 and 75% at M2 (plus 15% who had been fully released); and, at M3, 50% of cases were already in the third degree and 40% had been fully released. And, as seen in Table 16 above, this did not lead to increased recidivism.

Chart 6. Prisoner category in *low-risk, moderate-complexity* cases compared to *low-risk, low-complexity* cases at various times in the study



Conclusion: The concept of *complexity* is an intuitive idea based on unstructured clinical judgement (first generation) to rationalise the mismatch between professionals' perception and the assessments provided by *RisCanvi*. We believe that this lack of trust in the assessment provided by *RisCanvi* is due to an inefficient use of its factors, which are not being properly assessed in the evidence, leading to a parallel construction of indicators, particularly in some *low-risk* cases in which the professionals involved do not consider the inmates to be ready for the third-degree pathway and the *complexity* assessment is given greater weight when making decisions. In such cases, we found no specific additional evidence to support their hypotheses (HCR-20, SVR-20, Static-99, SARA, PCL-R, etc.).

CEJFE's latest studies have reiterated that some of the *RisCanvi* risk factors assessed by professionals are not sufficiently specific and can lead to lower algorithmic results than those really applicable to the offender. And this is not due to poor weighting by the tool but to an erratic assessment of the evidence.

Proposal: To better clarify the *RisCanvi* risk factors when collecting evidence and translate this into narrower specific training in the use of *RisCanvi* for treatment staff and, more importantly, for those in charge of approving their decisions. The professional judgement model should be guided by recidivism results to reach fourth-generation assessment.

12. Payment of Compensation

The *reparative effort* is the percentage of money already paid by the offender out of the total amount ordered to pay as compensation at M1, just before starting the programme.

As shown in Charts 7 and 8, there were clearly significant differences in the amount of compensation paid depending on the risk of violent recidivism as predicted by *RisCanvi* and the pathway followed.

Chart 7. Percentage of compensation paid according to risk level (calculated at M1)

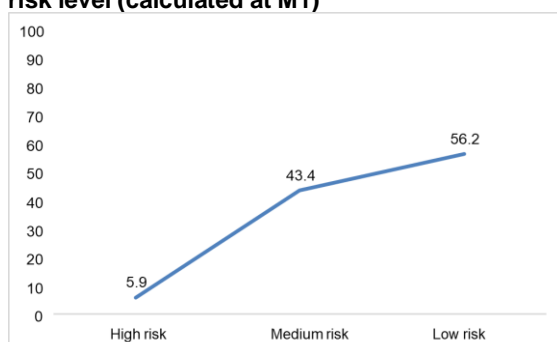
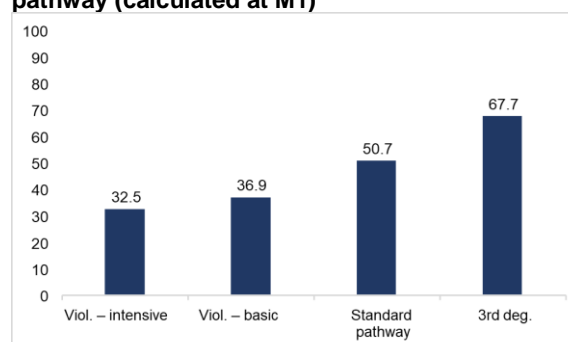


Chart 8. Percentage of compensation paid according to pathway (calculated at M1)



The percentage of compensation paid at M1 increased as risk decreased and the pathway focused more on open measures. Significant differences were found between the *standard* and third-degree pathways on the one hand and the pathways for violent offenders on the other, as well as between *medium/low-risk* cases and *high-risk* cases. No differences were found between offenders in the *standard* and third-degree pathways or between *medium-* and *low-risk* cases.

We have not ruled out the possibility that there may be other variables at play distorting the results, such as offenders rated as *low risk* taking the third-degree pathway and being more likely to be able to pay compensation as a result of being able to work.

What *has* been ruled out, however, as can be seen in Table 21, is any link between the amount payable or already paid and the offender's risk. Despite the differences in amounts, these differences were not significant. The low number of cases and very high standard deviation are almost certainly partly responsible for this lack of definition.

Table 21. Relationship between amount of compensation and risk of recidivism (*RisCanvi*)

		N	Average (€)	Standard deviation	Significance
Total amount	High risk	6	3,137.8	2,080.3	0.662
	Medium risk	13	11,039.8	14,898.4	
	Low risk	23	21,564.5	64,634.8	
	Total	42	15,674.5	48,543.1	
Amount paid	High risk	4	350.0	530.0	0.696
	Medium risk	10	1,769.2	2,370.3	
	Low risk	22	5,712.7	18,907.8	
	Total	36	4,021.4	14,858.0	

Other variables that we believe may have affected the payment of compensation relate to the daily practices mentioned by prison workers:

- When an inmate is unable to pay the full amount, there is no scale or clear indication of who should decide what monthly payment percentage constitutes a sufficient reparative effort.
- There is great disparity of approaches between different prisons and courts. It seems that each case is a world unto itself.
- Although being upgraded to the third degree increases their likelihood of paying compensation and of payment being enforced, this is not understood by, mainly, the Prosecutor's Office, which opposes many proposals to upgrade an inmate on the basis that they have not paid this compensation. In many cases, compensation is paid by family members, which means that they are the ones being indirectly penalised and which paradoxically goes against the aim of the measure and the goal of making offenders want to make reparation.

Conclusion: Although payment of compensation may appear to be a necessary condition for inmates to access prison benefits, experience has shown that, just like with motivation to change, it should be considered a working goal rather than a prerequisite for accessing a pathway.

Proposal: There is very little information and scientific literature on whether this financial liability has any effect on offenders taking on a new civic identity that leads to them desisting from criminal activities and accepting their role as citizens with civic duties. Specific research on this question is needed.

This intervention approach (payment of compensation as a goal rather than a prerequisite) should be applied as part of therapy in every prison. It would also be a good idea to educate the other legal operators involved (stakeholders – classification service, enforcement judges, prison supervision judges, prosecutors, etc.) in this approach.

In the previous study, the workers and inmates at QC Prison were asked about the new prisoner classification and intervention method applied by the Violence Evaluation Team. The main conclusions from the survey can be found in Sections 13 and 14.

13. QC Prison Treatment Staff's Satisfaction with the VET's Work

- When asked about their perception of the VET, the other prison staff members reported feeling most supported when dealing with **high-risk** cases, and they considered this support to have been very useful.

- Their assessment was less positive for **moderate-complexity** cases, however. In these cases, the VET and the treatment team were less likely to agree on the right pathway for these inmates, particularly as regards whether or not they should be following a pathway for violent offenders or whether they could access the third degree.
- They reported being most unsatisfied with the amount of information received, particularly feedback on these cases.
- In cases of inmates with sufficient motivation to change, they rated this coordination and feedback by the VET more positively.

Note: For more information and further details, readers are advised to consult the statistical newsletter Justidata 70, details of which can be found at the end of this report.

14. QC Prison Inmates' Satisfaction with the New Working Model

- The same trend was confirmed among the prison's inmates: high- and low-risk offenders were satisfied.
- Moderate-complexity inmates, on the other hand, expressed the least satisfaction. This was the case particularly in relation to three of the questions asked: 1) Was the content of the programme as expected? 2) Were their requests responded to? 3) Did they achieve the aims of the programme? Finally, it is worth mentioning that inmates' agreement or disagreement with their own Individual Treatment Programme (ITP) had **no** impact or statistical significance of any kind on any of the assessment variables (prisoner category, downgrades and upgrades, incidents and disciplinary proceedings, ROTLs for resettlement purposes, current inmate status, recidivism or the four risk indices of *RisCanvi*). Even if an inmate did not fully agree with their ITP to start with, this did not mean that their treatment programme and transition to freedom could not be successfully and proactively worked on in order to achieve the ultimate goals of social reintegration and desistance.

PART 3: Changes Since the Previous Report

This last part of the report sets out the changes that have taken place since the previous report, up to May 2021, to (briefly) address some of the questions that were left open and unanswered in the previous report, which was issued in 2017 and is available at <http://cejfe.gencat.cat/ca/recerca/catalog/crono/2018/conducta-violenta-QC/>.

The information provided below is structured as follows: the question is set out first, followed by the result obtained (column 1) and the data supporting the argument (column 2). We should stress once again that the results are based on the data collected from M3 until May 2021 and that a comparison between the RNR and classic prison groups is included whenever possible.

1. Did more inmates reach the third degree? Did they remain incident-free?

The RNR group reached the third degree earlier.	➔	Inmates in the third degree at the start of the sentence RNR: 30.3% Classic prison: 4.4%
At the end of the monitoring period, the proportion of inmates in the third degree was the same for both groups.	➔	Inmates in the third degree at the end of the monitoring period RNR: 72.4% Classic prison: 75.6%
The same proportion of inmates remained incident-free in both groups.	➔	Inmates that remained incident-free at the end of the monitoring period RNR: 81.5% Classic prison: 77.1%
Those who had not reached the open regime (OR) had more incidents over their time in prison, with a higher proportion in the classic prison group.	➔	Presence of incidents according to whether inmates had reached the open regime RNR: Classic prison: OR reached: 20.4% OR reached: 23.5% OR not reached: 50.0% OR not reached: 63.6%

2. Did the RNR group have fewer disciplinary proceedings?

As in the case of incidents, the two groups remained free from disciplinary proceedings in the same proportion.	➔	Inmates without disciplinary proceedings at the end of the monitoring period RNR: 70.3% Classic prison: 77.1%
Those inmates who had not reached the open regime (OR) during their time in prison (in both groups) <i>did</i> have more disciplinary proceedings, with a higher proportion in the case of the classic prison group.	➔	Presence of incidents according to whether inmates had reached the open regime RNR: RNR: OR reached: 24.1% OR reached: 24.1% OR not reached: 50.0% OR not reached: 50.0%

3. Did inmates' *motivation to change* affect the pathway allocated to them (RNR group only)?

Yes, the pathway was clearly greatly affected by inmates' Stage of Change (Prochaska and DiClemente).	➔	Inmates in the preparation/action phase, by pathway Viol. – intensive: 22.2% Standard: 56.3% Violent – basic: 40.7% Third degree: 88.5%
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4. Did inmates' *motivation to change* have an impact on personal variables? Did it affect their evolution?

Few improvements were observed in personal dynamic variables in <i>RisCanvi</i> .		Pre-contemplation/contemplation phase (PC) vs. preparation/action phase (PA)
Depending on the stage of motivation, differences were only seen in the impulsivity and hostility traits at M1.	➔	Impulsivity trait at M1 (<i>RisCanvi</i> Factor 41) PC: 61.5% PA: 33.3% Statistical significance: p=0.035
The improvement was not significant in either group.		Hostility trait at M1 (<i>RisCanvi</i> Factor 42) PC: 66.7% PA: 38.5% Statistical significance: p=0.046
		Improvement in the impulsivity trait during the time spent in prison

RNR: 12.5% *Classic prison*: 9.1
No statistical significance: p=0.306

Improvement in the hostility trait during the time spent in prison

RNR: 18.5% *Classic prison*: 15%
No statistical significance: p=0.887

5. Did inmates' motivation to change have an impact on the evolution of their in-prison behaviour? Did their behaviour improve in line with their increase in motivation (RNR group only)?

No differences were found for the prison variables between the two groups in either *planned ROTLs* or *category downgrades*.

Differences were found, on the other hand, in *ROTLs for resettlement purposes*, *incidents* and *disciplinary proceedings*.

ROTLs for resettlement purposes at M1:

PC: 39.4% PA: 61.1%

ROTLs for resettlement purposes from M3:

PC: 24.2% PA: 33.3%

Statistical significance: p=0.006

No incidents at M3

PC: 63.6% PA: 86.1%

Statistical significance: p=0.030

No disciplinary proceedings at M3

PC: 57.6% PA: 80.6%

Statistical significance: p=0.038

6. Which treatment model was more effective in improving the *RisCanvi* dynamic variables and the in-prison behaviour variables?

No conclusive results on the variables under study could be obtained. The differences were not significant for most variables, and where percentages suggesting a trend were observed, the number of cases was too small to make any inferences. Everything suggests that there were no significant detectable changes while serving the sentence.

7. Did sentence length affect subsequent recidivism? What about in-prison behaviour?

Sentence length had no impact whatsoever on the rate of recidivism.

No significant differences were found between the *RNR* and *classic prison* groups.

Rate of recidivism

Sentence of > 6 years: 10.8%

Sentence of 3-6 years: 18.5%

Sentence of < 3 years: 14.6%

No statistical significance: p=0.682

People serving sentences of more than six years had a worse history of disciplinary proceedings between M3 and the end of the monitoring period, with significant differences.

Worsening of disciplinary proceedings between M3 and 31/05/2021 (both groups)

Sentence of > 6 years: 31.3%*

Sentence of 3-6 years: 16.7%

Sentence of < 3 years: 17.1%

Statistical significance: p=0.029

This worsening was observed in both the *RNR* and *classic prison* groups.

Worsening of disciplinary proceedings between M3 and 31/05/2021, by group

Sentence of > 6 years

RNR: 27.8% *Classic prison*: 33.3%

Sentence of 3-6 years

RNR: 13% *Classic prison*: 28.6%

Sentence of < 3 years

RNR: 15.2% *Classic prison*: 25%

8. Was the change in model accompanied by an increase in the time taken to... a) do the treatment programme; b) start the temporary release scheme; c) access the third degree; or d) reoffend?

Previously, the offence committed significantly affected how an inmate served the sentence. In absolute terms, the time taken to do the specific treatment programme or pathway was reduced.

Time taken to do the programme

RNR group:

Access to OR: 2.4 years No access to OR: 2.7 years

Classic prison group:

Furthermore, it was no longer tied to sentence length.	Access to OR: 4.1 years	No access to OR: 3.1 years
Those who successfully completed the programme or pathway now start the temporary release scheme earlier than before.	Time taken to start the temporary release scheme from successful completion of the specific programme <i>RNR</i> group: Access to OR: 0.5 years No access to OR: 0.5 years <i>Classic prison</i> group: Access to OR: 0.5 years No access to OR: 1.7 years	
All this shows that accessing the open regime was subject to sentence length (the offence committed and the resulting sentence in years determined an inmate's progress in prison). In the classic prison group, inmates who had not reached the open regime had shorter sentences on average than those who <i>had</i> reached it. This is no longer the case in the <i>RNR</i> group, where it is the inmate's own needs that determine the move to the third degree. As a result, there were no differences in the time taken to get there.		
And, as shown above, this did not result in increased recidivism. Furthermore, among repeat offenders, those who had been in the open regime took longer to reoffend than those who had not (<i>RNR</i> group). However, the numbers are too small to draw conclusions.	Time taken to reoffend (from among the reoffenders) <i>RNR</i> group (composed of 4 people) Access to OR: 763 days No access to OR: 175 days	

Conclusion: The new *RNR* programme applied to QC Prison brought greater peace to prison life due to: a) bringing forward the start of the specialised treatment programme or of the standard or third-degree pathway; b) linking successful completion of the programme or pathway to the start of the temporary release scheme; and c) granting the open regime to those who had not been initially upgraded.

In addition to producing a more peaceful prison life, these measures did not result in increased recidivism.

Proposal: To implement the *RNR* model effectively in all other prisons. To assess, separately from the results of this study, whether there should be a specialist initial assessment team for violent offenders or whether this initial assessment can be carried out generally by other prison staff.

The evidence *does* lead us to categorically propose abandoning the use of specialised treatment programmes for violent offenders unless it is specifically indicated by *RisCanvi* based on their risk profile. This practice is counterproductive for the operation of the prison and increases subsequent recidivism in some cases.

Conclusion: The new *RNR* programme applied to QC Prison still suffers from some shortcomings. These include, among others:

1) Partial application: Although it is clearly applied at the start of the sentence and in new cases, the amount of time taking by inmates to be upgraded in category shows that it is not clearly applied later on. There are still unwritten rules that bear little relation to the evidence, such as: a) waiting for the offender to have served half their sentence before granting them their first ROTL for resettlement purposes, despite there being no link between this and the risk of recidivism; b) delaying an inmate's category upgrade to the six-monthly review by the Prison Treatment Board, without any incidents to justify it; c) considering variables that are clearly related to therapeutic treatment as necessary prerequisites to be met by inmates of their own accord in order to access the programmes or pathways rather than as an initial goal of the programme (this is the case, for example, of motivation to change, admission of the crime or payment of compensation).

2) Unclear application of a concept referred to by the VET as the *complexity* of the case, as its use has not been backed by the evidence on recidivism and it overestimates some variables already taken into account by *RisCanvi* or makes some of these variables mentioned above (motivation to change or sentence length) relevant to the decision to increase the risk assessment (particularly when it was rated as low by *RisCanvi*).

15. Conclusions (Summary)

1. A team from QC Prison changed from an offence-focused rehabilitation model to one focused on inmates' risks and criminogenic needs by implementing the *RNR* model, which is based on the principles of *risk*, *need* and *responsivity*. In accordance with these principles, and based on the assessment carried out by *RisCanvi*, inmates were allocated one of four possible pathways: intensive and basic pathways for violent offenders, standard pathway, and pathway for inmates initially classified in the third degree.
2. By applying the *RNR* principle, you can focus interventions on those with the highest risk and carry out less intensive interventions on those presenting a low risk, without thereby increasing the number of in-prison incidents (conflicts between inmates, disciplinary proceedings, failure to adhere to measures and breach of ROTL conditions).
3. The new model reduced the time spent in prison without specialised treatment: although half of all inmates in the *RNR* group currently start the treatment programme in their first year, the average time taken to start treatment is 2.6 years, which is 35% through the sentence.
4. The new model brings forward access to ROTLs for resettlement purposes, linked to participation in the treatment programme, and more inmates are granted ROTLs. This had no negative effects on either in-prison behaviour or subsequent recidivism.
5. Although in the long term both the members of the *RNR* group and those of the *classic prison* group reached the third degree in the same proportion, the *RNR* model resulted in inmates reaching this stage sooner (in half the time) and more efficiently.
6. Applying the *RNR* model did not result in higher rates of recidivism – which were slightly lower in the *RNR* group than in the *classic prison* group – even though over half the inmates did not do the specific programme for violent offenders (as required under the offence-focused *classic prison* model), as most of them presented a *low* risk of recidivism according to *RisCanvi* (as required under the *RNR* model, which focuses on inmates' criminogenic needs).
7. The team at Quatre Camins created the concept of *complexity* to explain the disagreements between prison treatment staff and the *RisCanvi* assessment tool. This construct overestimates certain variables, increases interventions on inmates without any data to support the need for them and delays inmates' access to an open regime, without any improvement to results.
8. The team at Quatre Camins created the Violence Evaluation Team (VET) as a specific and specialised team to carry out the initial pathway and mentoring assessment for other teams. The benefits of this model can be summarised as follows: a) the VET centralises the applicable criteria, which are based on the *RNR* model, and can ensure their proper application; b) the planning of prisons' intervention groups is also based on these criteria and provides consistency among the many professionals involved; c) it helps to monitor and support cases of violent offenders who are not making good progress and ensures that they do not fall through the cracks; d) experience has shown that an initial classification by the VET ensures a more efficient application of these criteria and a better-timed intervention or outsourcing for each case.
9. The QC Prison treatment staff rated the VET's support and coordination more highly in extreme cases (both in very clear high-risk cases and in low-risk cases). The lowest levels of satisfaction were reported in relation to uncertain cases rated as being of *moderate* complexity. Inmates had similar opinions: high- and low-risk inmates reported the highest satisfaction with the VET's work.
10. Inmates' agreement or disagreement with their Individual Treatment Programme (ITP) had no effect on the assessment variables (recidivism, ROTLs, incidents, disciplinary proceedings, or category upgrades or downgrades).
11. Despite the promising results, there are still shortcomings in the implementation of the model: partial application (the model is being used at the start of the sentence but the previous model is still being applied the rest of the time and in other cases); unclear application (with the introduction of the *complexity* concept); and continued application of unwritten rules that are both inefficient and have no effect on recidivism, such as delaying the start of the temporary release scheme to halfway through an inmate's sentence without any treatment-related reasons to support this, delaying access to the third

degree until after the sentence halfway point, failing to put inmates forward for other types of lower-supervision open regimes (such as the one under Art. 86.4 of the Spanish Prison Regulations (*Reglamento Penitenciario*) or transfer to secondary facilities), or making more proposals for conditional release.

16. Proposals

Relating to the QC Prison study

1. Since the RNR model results in fewer cases to be dealt with in prison and in fewer cases with incidents or disciplinary proceedings (compared to the *classic prison* control group), it should be implemented in all prisons as a useful tool for risk management and a more peaceful prison life.
2. The recidivism results confirm that it does not lead to increased recidivism either, in spite of reducing intervention with half the inmates. This confirms that the model is an effective management tool that should be extended to every prison.
3. We must stop referring inmates to specialised treatment programmes for violent offenders when this is not recommended by *RisCanvi*, as it is counterproductive. Specifically, *low-risk* inmates should follow the standard and third-degree pathways; and the recommendation to complete their sentence under an open regime and in the most staggered way possible (gradually introducing lower-supervision forms of monitoring that encourage independence and identity-change decisions in accordance with the theories of desistance) should also be followed whenever possible.
4. Although the start of the treatment programme was brought forward, it should start before inmates have served a quarter of the sentence in all cases. This will in turn enable them to start the temporary release scheme earlier whenever possible.
5. After successfully completing the treatment programme, inmates should be transferred to the third degree to help them gradually return to the community in order to put into practice what they have learned, all this with appropriate support.
6. The concept of *complexity* should be abandoned, and staff should be trained in the scientific evidence supporting the use of the *RisCanvi* assessment tool. The use of additional assessment tests and access to the open regime should also be encouraged.
7. Motivation to change and payment of compensation should be the working goals of the Individual Treatment Programme rather than variables to decide on the type of pathway to be followed.
8. Finally, the RNR model should be fully and firmly extended to the entire prison and in all cases, abandoning the concept of *complexity* for good.

Relating to the general model for prison services in Catalonia

9. To disseminate these results as much as possible among the various legal operators involved (stakeholders) with decision-making power and/or influence in relation to the adoption of the RNR model (e.g. treatment boards, classification service, in-prison services, sentencing and prison supervision judges, prosecutors, lawyers and criminal system experts). Although the model is efficient in terms of its results, it is difficult to implement due to the mistrust still felt by those involved because of its innovative nature and obscure proposals. The model could be made more effective, leading to a significant reduction in recidivism, if the commitment to implement it was clear, well defined and widely undertaken.
10. To encourage RNR model implementation studies that compare the results of those variables that are yet to be fully accepted by treatment staff.
11. The risk assessment in prisons should determine the pathway chosen at the time of the initial assessment. The open-regime pathway should be given priority as a general rule in low-risk cases, and in high-risk cases specific programmes should be started as early as possible in the sentence, linking the start of the temporary release scheme to successful participation.

12. Specialised treatment can be provided to inmates in an ordinary or open regime. In high-risk cases, it should be started when they are in the ordinary regime and continued following transfer to the open regime.
13. To promote specific training highly tailored to *RisCarvi* based on the study of archetypical cases. Such training should aim to address the current mismatch between the unstructured clinical assessment made by some treatment staff and the algorithmic results produced by *RisCarvi*. Our latest studies confirm that *RisCarvi* is sufficiently accurate to make a good prediction and that the assessment of cases improves when staff have more specific training.

For more information and details of the information summarised in this executive report, see the statistical newsletter Justidata 70, which is available on the CEJFE website: <http://cejfe.gencat.cat/ca/publicacions/destacats-reserca/justidata/>.

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