

# Planmatig en flexibel

Procesevaluatie gedragsinterventie CoVa+

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The Cognitive Skills Plus training (Cognitieve Vaardigheden Plus or 'CoVa+') was introduced in 2008. It is a cognitive behavioural therapy training course of 36 sessions for offenders with cognitive defects (total IQ score between 65 and 90). The training is intended for both intramural and extramural offenders with average to high recidivism risk. In addition, a number of inclusion- and exclusion criteria were formulated, which offenders must meet in order to be able to participate in the CoVa+ training.

In January 2009 the CoVa+ training was acknowledged by the Dutch judicial behavioural intervention accreditation committee (Erkenningscommissie Gedragsinterventies Justitie). A condition for this acknowledgement is that the CoVa+ training should contribute, verifiably by way of an effects study, to a decrease in participant recidivism. Before the effects evaluation can be carried out, a process evaluation is required. The current report should be considered as the process evaluation report. The research questions for the process evaluation were formulated as follows by the Ministry of Security and Justice:

## **Category 1: CoVa+ training target group**

1. Are there enough participants? What are national and local participant numbers for CoVa+?
2. Are the offenders targeted by the programme actually selected for participation?
  - a. What bottlenecks occur in screening, selecting and treating the offenders? Do unexpected selection effects occur in practice and if so, what are they?
  - b. What may be concluded in regard to the offenders that are eligible for CoVa+ training but refuse to participate?

## **Category 2: dedication and motivation**

3. What is the participants' attitude to CoVa+?
  - a. To what extent are the participants motivated to take the training?
  - b. What is the participant dropout rate, under what circumstances and for what reasons do participants drop out early?
4. How do the staff/trainers assess the methodology?

### **Category 3: link between CoVa+ and the total treatment programme**

5. Is the CoVa+ training part of a treatment plan, part of some other, larger whole, or a completely separate course? What courses and trainings take place prior to, during and after CoVa+?
6. Can any factors outside the CoVa+ training be identified that impede the implementation of the programme?

### **Category 4: CoVa+ programme integrity**

7. To what extent is the programme carried out in accordance with the manuals?
  - a. Did the trainers work according to protocol?
  - b. Do trainers and monitors/training coaches meet the educational requirements in question?
  - c. Did the offenders have one and the same trainer for the entire course?
8. Do the institutions vary in how they conduct the training and if so, in what respects?
9. Are the various target groups treated differently? Is there any programme differentiation?
10. Do the institutions have sufficient means at their disposal to carry out the intervention properly?
11. What bottlenecks are found when the methodology is applied in practice: what possible unforeseen consequences can be spotted? What underlying causes do these bottlenecks have?
12. Should adjustments be made in the set-up of and/or context for the CoVa+ training? If so, why, and what would one hope to achieve with such adjustments?

### **Category 5: towards an effects evaluation**

13. How are measuring instruments relevant to the effects evaluation implemented? Who implements them?
14. What conclusion do the results of the process evaluation warrant with regard to the feasibility of an effects evaluation at this time?
15. What criteria would be best used in monitoring the implementation of the programme at the time of the effects evaluation?

### *Set-up and execution of the study*

In this study, various research activities were used including a literature- and documentary exploration, an analysis of the CoVa+ participants in 2010, a survey among CoVa+ trainers and interviews with a few trainers, all six intervention coaches and the programme manager. In addition, 50 digitally recorded sessions were analysed. This was done for quantitative aspects (among other things, whether or not main- and subsections of the programme were actually dealt with and for what duration) and for qualitative aspects (among other things, personality and responsiveness of trainers and the use of motivational interviewing).

### *Background to and target group for CoVa+*

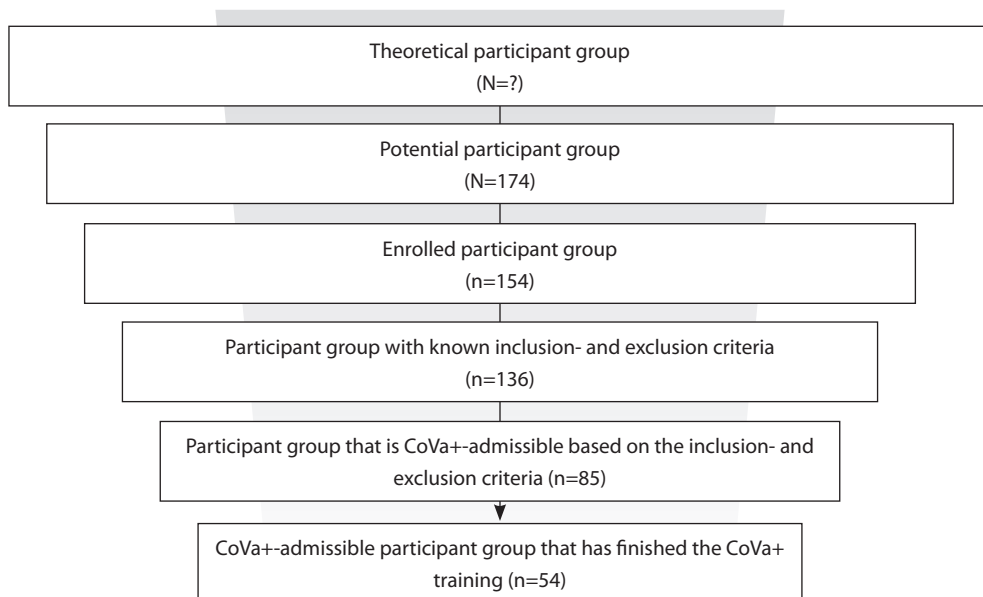
The CoVa+ training is an intervention inspired by the realisation that the Cognitive Skills Training (Cognitieve Vaardigheidstraining or “CoVa”) is too difficult for offenders with insufficient intellectual capacity. The ultimate target group for the CoVa+ training is determined based on a number of decisive criteria:

- An analysis by means of the Recidivism Assessment Scales (Recidive Inschattings Schalen or “RISc”) of the three probation- and after-care organisations;
- The probation officer’s professional opinion on the offender in question;
- An IQ-scoring test (Wechsler Adult Intelligence Scale (WAIS));
- Inclusion- and exclusion criteria;
- An assessment of motivation and suitability for the group as established in an individual intake with the offender in question.

The number of CoVa+ trainings carried out since 2009 rose from 14 to 24 in 2010, to probably 40 in 2011. The increase was seen both for intramural and extramural trainings, which went up from 11 and 3 in 2009 to 16 and 24 in 2011, respectively. Also the number of participants grew, from 82 in 2009 to 157 in 2010, to (an estimated) 250 participants in 2011. Whether the number of participants will be sufficient at that time will have to be determined prior to the effects evaluation.

To determine the target group, inclusion- and exclusion criteria are used. In 2010, these criteria were not strictly applied yet. Figure 1 shows a graphic representation of the narrowing of the participant group.

*Figure 1: The Target Group Funnel*



The Target Group Funnel warrants some elucidation. The size of the theoretical population, eligible for the CoVa+ training, is not yet known. If we look at the population for 2010, 20 of the 174 potential participants – those registered for the CoVa+ training – dropped out immediately. Subsequently, an analysis was carried out to see whether the remaining participants met the relevant criteria. Of the participants whose inclusion- and exclusion criteria were all known (n=136), 85 participants (62.5 per cent) met them. Of those 85, 54 participants concluded the CoVa+ training successfully. The latter number is not the actual number of participants that finished the CoVa+ training – 94 persons did. The difference in those two numbers shows that in 2010, the inclusion- and exclusion criteria were not being applied strictly yet. The programme manager has pointed out that this will be done for 2011.

In selecting the participants, a number of concerns arise that may affect the composition of the ultimate participant group. The inclusion- and exclusion criteria, for example, were amended in 2010 and may be amended again in the future. RISC version 3.2 will be adjusted, which may well affect the inclusion- and exclusion criteria. The same applies to future changes in versions of RISC.

The theoretical substantiation also has not been worked out in complete detail; this, too may have an effect on the inclusion- and exclusion criteria.

It cannot be ruled out that these issues may affect target group composition; this matter should be taken into account in a possible effects evaluation.

### *Dedication and motivation*

A lack of and/or waning motivation is a reason for many drop-outs prior to and in the course of the training. Of the 58 participants that dropped out during the course, three quarters did so for lack of motivation or too many missed sessions.

The trainers and intervention coaches feel positive about the training, although they do think that some parts are too abstract and, consequently, too difficult for lower IQ-scoring participants. This mainly concerns specific parts of the training such as helpful and non-helpful ideas, the Helping Hand (Helpende Hand) instrument and the underlying significance of the letters 'RELAX'. In addition, examples used are sometimes too far removed from the participants' experience.

### *Link between CoVa+ the total treatment programme*

Although the CoVa+ training is a CoVa exponent, it is a separate intervention. Prior, during and after the CoVa+ training intramural participants follow the detention process in the context of Recidivism Reduction (Terugdringen Recidive or TR) or the Institution for Repeat Offenders measure (Maatregel Inrichting Stelselmatige Dader or ISD). For extramural participants, the CoVa+ training may have been imposed as a special condition, e.g. against the background of a partly or completely suspended prison sentence.

Interviewees indicated that potential CoVa+ participants are enrolled in CoVa trainings on a regular basis. This is an issue that requires better coordination with those in charge of CoVa trainings, because the correct target group should be foremost in any effects evaluation.

The increase in the number of trainings and participants was mentioned earlier; also the number of CoVa+ trainers is still rising, however. As such, this is an important requirement for an appropriate effects assessment; the regional nature of probation- and after-care organisations makes CoVa+ trainer outsourcing difficult.

#### *CoVa+ programme integrity*

The analysis of the footage of 50 CoVa+ training sessions shows that the larger majority of sessions take place in accordance with the programme manual. Programme sections are rarely swapped. The set time for each session, 90 minutes, is not completely filled – this may also be due to limited participant numbers.

Some of the trainers take the liberty to diverge from the programme, mainly to give explanations with the help of personal examples. According to the trainers, these are mainly given where the examples in the manual fail to link in with participants' experience. In addition, from a principle of responsiveness trainers should respond adequately to matters put forward by the participant group.

An item for attention is the extent to which trainers discuss homework during sessions. Based on the footage analysis of 50 sessions it turns out that around two thirds of trainers perform poorly on the item 'the trainer pays attention to the homework'.

#### *Towards an effects evaluation*

Based on the research results in the current process evaluation, we deem an effects evaluation possible. However, a number of indicators must be defined to carry this out properly. On the one hand, these indicators are in the area of the focal points, already addressed but still in need for action, as arise from this study (indicated as +/- in table 1). On the other, there are a number of indicators that are being used already and must be retained also in the context of an effects evaluation (indicated as + in table 1).



Table 1: indicators for the proper execution of a CoVa+ effects assessment

Indicators	Research result	
	+	+/-
The selection of the participants is in conformity with the inclusion- and exclusion criteria		
The inclusion- and exclusion criteria remain unchanged during the effects evaluation		
The number of participants is sufficient for an effects evaluation <sup>1</sup>		
The programme manual is sufficiently followed; at any rate, the essential parts are carried out in accordance with the programme		
There are sufficient trainers to safeguard the deployment of preferably no more than three different trainers for each training		
Educational- and licensing requirements for the trainers are observed		
The implementing organisation ensures trainer quality assurance <sup>2</sup>		
The implementing organisation records relevant indicators in a registration system		

## Endnotes

16. To be ascertained through a power analysis.
17. A set number of coaching talks and intervision meetings are concerned here, as well as the number of sessions held per year.

