



wetenschappelijk bureau voor  
onderzoek, expertise en advies  
op het gebied van leefwijzen,  
verslaving en daaraan gerelateerde  
maatschappelijke ontwikkelingen

## De Leefstijltraining in woord en daad

Programma-integriteit van de uitvoering van de Leefstijltraining voor  
verslaafde justitiabelen

**SUMMARY**

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## Summary

The Lifestyle Training for addicted offenders is a cognitive behavioural intervention that was accredited in 2009 by the Dutch Accreditation Committee for Behavioural Interventions of the Ministry of Security and Justice (WODC). Offenders for whom it is known that the committed offense is related to substance use and/or gambling, and who have problems with substance use (abuse or dependence), are eligible for this behavioural intervention. Before the behavioural intervention is subjected to an effectiveness study, an assessment should be made of the program-integrity of the implementation. In 2013 the WODC invited the IVO to perform a process evaluation to determine whether the Lifestyle Training is carried out as described in the training manual. The underlying causes for any problems related to implementation are examined.

The following issues are discussed:

1. Selection and dropout;
2. Program integrity of implementation;
3. Motivation of those involved;
4. Contextual factors.

### *Methods*

Data collection took place between 1 October 2013 and 21 March 2014. During that period, the 12 Lifestyle trainings given by the probation departments of six different organizations for addiction were studied. Seven of the trainings were intramural and five were extramural. Various data sources and research methods were used to investigate the research questions. Semi-structured interviews with the participants, trainers and other involved professionals were the main source of the data. In addition, data from IRIS (the Integral Registration and Information System) were used, video recordings of trainings were studied, data from the observed trainings were collected by the use of training files, and an online survey among trainers was conducted. This combination of different sources and methods yielded a complete and reliable insight into the course of the investigated Lifestyle Training.

### *Design of the Lifestyle Training*

Both detainees (intramural) and offenders under probation supervision (extramural) can participate in the training. The Lifestyle Training is indicated for:

- Users at risk with complaints – addicted and with a medium or high risk of recidivism.
- (Seriously) chronic addicts and with a medium or high risk of recidivism if embedded in broader care.

The training is based on four principles (3RO, 2009): 1) the assumption that the risk of criminal recidivism decreases if substance use decreases, 2) the cognitive-behavioural approach, 3) the relapse prevention Model of Marlatt (1995; 2002), and 4) the trans-theoretical Model of Prochaska and DiClemente (1996). The Motivational Interviewing technique (Miller & Rollnick, 1991) is regarded as an important methodological tool in the manual. The Lifestyle Training consists of 16 sessions of 2.5 hours each, followed by five so-called 'booster sessions' of 1 hour each. The training is conducted throughout the country by certified trainers of organizations for addiction rehabilitation. The

implementation is supervised by the Foundation of Addiction Probation Services (Stichting Verslavingsreclassering GGZ, SVG).

#### *Demographic characteristics of the participants*

In the 12 Lifestyle Trainings, all registered participants (n=107) are male (mean age 34 years); the extramural participants are slightly younger on average. In both intramural and extramural settings, more than half of the participants is of Dutch origin and nearly one-third of the applications is formed by immigrants from a non-Western origin. Almost half of the registered participants have completed primary education only; more than one third has completed lower secondary education.

#### *Selection and dropout of the participants*

Of the 107 registered participants, 91 started the training and 64 completed the training (i.e. 60% of the applications and 70% of the entrants). There were no major differences in participation and dropout between the intramural and extramural training. The available data provide no systematic information about whether dropout is due to the decision of the participant (dropout) or the trainer (push out): both scenarios occur.

The main selection tool for the Lifestyle Training is the Recidivism Assessment Scale (RISc). This instrument assesses various criminogenic factors and provides an indication of the risk of recidivism based on scores on the sub-scales. The RISc automatically advises the Lifestyle Training when the combination of drug use and risk of recidivism meet the inclusion criteria for the Lifestyle Training. Thereafter, the counsellor may decide to accept or decline this advice. The most important exclusion criteria are: cognitive disabilities (IQ <80), mental disorders, dominant behaviour, negative attitude to the sanction, and when the offense involves a sex offense. These aspects are reflected in the RISc. The MATE (CRIMI) is an instrument that helps determine the relationship between the offense and substance use. The manual of the Lifestyle Training does not specify when the MATE (CRIMI) is required; this instrument is seldom used. The 107 applications for the 12 trainings under study were almost always directly based on the outcome of the RISc. The RISc is stored in the web based client monitoring system IRIS, although the IRIS does not always show the RISc itself; however, the advice reports of the probation services demonstrate that the RISc has been conducted.

As described in the Lifestyle Training manual, some exclusion criteria offer the possibility to admit an offender who scored positively on one of the criteria. Of the 32 participants who scored positively on one of the exclusion criteria (dominant behaviour, attitude towards sanction and psychological problems), 20 completed the Lifestyle Training. Also, three of the four participants with an IQ  $\leq$  80 completed the training. When trainers and the regional coordinator screen the list of registered participants, they consider whether or not to admit potentially disruptive participants. Exclusion of participants may have resulted in postponing the training due to the lack of suitable candidates. The inclusion of potentially disruptive participants may have resulted in continuing the training, but with the risk that the participants may not be suitable.

Only during the training does it become apparent whether a participant is cognitively adequately equipped and sufficiently motivated to finish the Lifestyle Training. Trainers are used to dealing with

some resistance; however, if (serious) resistance does not appear to be manageable, participation is stopped. Participants who dropped out, usually did so at the beginning of the training. The information given to participants prior to start of the training is limited, implying that it is unclear whether participants are really motivated (or not) and that there is an increased possibility of having unmotivated participants.

The distinction between the Short Lifestyle Training and the regular Lifestyle Training is not always clear to the probation officers. The regular Lifestyle Training differs from the Short Lifestyle Training in that it is more intensive (more sessions) and is therefore more suitable for individuals with a higher risk of recidivism (medium, high) and for individuals who have to deal with more serious substance problems (risky use with complaints, addicted). The probation officers have a tendency to recommend the Short Lifestyle Training in case of 'extramural' offenders sentence, and the regular Lifestyle Training in case of 'intramural' offenders.

Intramural, the Lifestyle Training is part of the Detention and Re-integration plan. Prisoners who adhere to this plan are eligible for detention phasing. Of the participants who follow the intramural Lifestyle Training, more than 80% stayed longer than six months in the penitentiary before they started the training. In the extramural situation, there are almost always other special conditions, such as drugs and/or alcohol prohibition, and (forensic) treatment. The behavioural intervention CoVa (Cognitive Skills), which is recommended in the Lifestyle Training manual, is followed by about one fifth of the participants.

#### *Program integrity*

All substantive parts, the methods and the duration of each program component are described in the manual for the trainers. All substantive parts of the training are taught by the trainers; however, concerning the way in which they teach, they follow the program instructions less strictly. In reality, the frequency of the training sessions (2 times a week) is higher than that is prescribed in the manual (once a week). All the trainers endorse the importance of this higher frequency of the meetings. Therefore, on the one hand the training will receive the desired intensity and, on the other, there are less problems in planning (especially in the penitentiaries) when the length of time of the intervention is shorter. The two returning program parts ("Rondje Ruis" and "Kijk op de Week" at the beginning of each meeting) are often difficult to distinguish. The length of each programme component can differ greatly: for smaller or more passive groups, the time spent on each component is often shorter. Participants sometimes find that trainers "extend time". In most trainings, the 'buddy' system is not addressed and is not faithfully applied in any organization; however, the trainers and intervention coaches agree that this deviation is not problematic. Treatment of homework varies per training. In some trainings, homework is dealt with only orally whereas in other trainings participants completed the homework and it was also checked. In some trainings, the role playing is replaced by other methods. In some courses implementation of the role playing is not well done, whereas in other trainings the role playing is properly implemented.

### *Essential elements*

Trainers are not always clear about appointing the essential elements of the Lifestyle Training. However, they are unanimously convinced that the power of the Lifestyle Training lies in the relationship between the components. In addition, they found the Motivational Interviewing technique to be an essential method for the Lifestyle Training. Participants also differ regarding which parts they see as "essential".

### *Supervision*

All trainers are licensed and each training course they are accompanied by supervision of SVG intervention coaches. The intervention coaches assess the trainers using a standard monitoring form. The quality of the trainers, as measured by the coaching part "responsiveness while maintaining program integrity", is properly conducted. However, there is room for improvement.

The Lifestyle Training requires keeping training records, which are held in the training file. Almost all training records are complete. In one training course, the "lists of participants' understanding and commitment" were lacking; in some other training courses these data were incomplete.

### *Motivation of those involved*

The Lifestyle Training is a coercive measure. As a result, participation has positive consequences for those involved, or refusal has negative consequences (or both). Due to this fact, the design of the Lifestyle Training takes into account the ambivalent or low motivation level of the participants. The Motivational Interviewing technique is a basic training technique used to keep the participants from conflict; on the other hand (and at the same time) the technique helps to involve the participants by the training and the training goals. The nondirective approach of the Motivational Interviewing technique emphasizes the responsibility and the freedom of choice of the participants. In an intramural setting, trainers experience more resistance from participants than in an extramural setting. Participants show different kinds of motivation, ranging from persistent resistance (active or passive) to intrinsic involvement in the training goals. In general, the trainers are enthusiastic about the content of the training. There has been some criticism regarding the limited space the manual provides to trainers to vary in the methods used.

### *Contextual factors*

The Lifestyle Training takes place in a judicial context. Participants are aware of this context and are selective in what they do and do not say during the training, or in what they write in the workbook. They fear possible negative consequences of their candor. about their substance use and/or criminal behaviour. Trainers are aware of operating within this context and tell the participants that they will not experience disadvantages in this context. Although the coercive context does not contribute to an optimal learning environment, it does seem necessary in order to generate a sufficient number of participants.

The probation departments of addiction care generally are satisfied with the conditions under which the Lifestyle Trainings are given. Those who are involved in trainings in penitentiaries may have to deal with a lack of cooperation from the participants. In the penitentiaries, the training facilities are

not always optimal. Trainers sometimes have to travel far to get to the training venues. However, the time they spend on traveling cannot be funded from the budget of the Lifestyle Training. This also applies to the information and recruitment activities that the institutions undertake to bring the Lifestyle Training to the attention of probation officers and counselors. None of these activities are funded.

#### *Conclusion*

The Lifestyle Training for addicted offenders largely meets criteria of program integrity. Concerning deviation from the manual regarding the frequency of the meetings and application of the buddy system, there is unspoken consensus among the trainers and intervention coaches; therefore, these deviations are not seen as problematic. Trainers need some alternative methods to optimally respond to the dynamics of the group. Trainings differ in the treatment of the homework assignments and implementation of the role playing component. Before an effectiveness or impact study is conducted, the trainings need to become more consistent.

There are no major problems with the registration and selection of participants. Drop-out is usually considered to be 'collateral damage', i.e. "it's part of the game". Lack of motivation of the participants is an ongoing focus of attention. Improvement in the provision of information (regarding content and time) to participants about the Lifestyle Training may have a beneficial impact.





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