Four forms of rehabilitation:
Towards an interdisciplinary perspective

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http://blogs.iriss.org.uk/discoveringdesistance/
• Evaluating rehabilitation theories
  – Evaluating RNR
• Taking a step back
  – Rehabilitation’s history
  – Critique
  – Reforming rehabilitation
• Desistance and evidence-based rehabilitation
• Four forms of rehabilitation
A good rehabilitation theory

• **Must articulate…**
  – (1) the **general principles** underlying rehabilitation (metaphysical, epistemological, ethical and normative)
  – (2) its **etiological assumptions** (which by explaining the ‘causes’ of the offending behaviour guide understanding of ‘treatment goals’);
  – (3) the **intervention implications** (the ‘how to’ element that guides effective interventions).
Risk (how much?)
- Match level of intervention to level of assessed risk of reoffending

Need (of what?)
- Target those needs (or dynamic risk factors) that are associated with offending behaviour

Responsivity (how?)
- Deliver the intervention in a manner consistent with the learning style of the offender
• Strong unifying power
• External consistency
  – Empirically validated
• Explanatory depth
  – Explains why ‘what works’ works
  – Explains why certain skills work
  – Avoids over-prediction of social-etiolo-gical theories
• Critique

– Responsivity is under-articulated, yet central to RNR’s humanity and effectiveness: Individual responsivity too often reduced to general responsivity

– Strengths-based approaches better at motivation

– The role of risk factors (and their reduction) in explaining re/offending is under-articulated; need clearer account of mechanisms
• RNR can be hard to understand (technical language) and hence to translate into practice
• Seen as focused solely on risk reduction, ignoring offenders’ aspirations – de-motivating
• Exclusive interest in criminogenic need; other needs ‘get in the way’
• Focus on capacities, neglect of motivation and opportunities
• Implementation in a hostile climate…
Taking a step back: Rehabilitation’s evolution

Rotman (1990)

• Penitentiary
  – Reforming the sinner

• Therapeutic
  – Fixing the flawed

• Social learning
  – Educating the poorly socialised

• Rights-based
  – The limits of punishment
Taking a step back: Rehabilitation’s collapse

- Bottoms (1980)
  - The problem of crime theory
  - The problem of discrimination
  - The problem of unjust judgment
  - The problem of coercion
  - The problem of in/effectiveness
Possible responses...

- **Bottoms (1980)**
  - Rehabilitation revisited
    - But with consent, resources and respect for liberty
  - The justice model
    - Focus on proportionality and elimination of arbitrary discretion
  - Radical approaches
    - Confront the problem of just deserts in an unjust society
  - Incapacitation and general deterrence
    - Embrace overt social control
  - Reparation
    - Recognise the victim
Rehabilitation reformed

1. The duty of the state to provide for rehabilitation
2. Proportional limits on the intrusions of rehabilitation
3. Maximising voluntarism
4. Prison as a measures of last resort

(Cullen and Gilbert 1982; Rotman, 1990; Lewis, 2005)
Rehabilitation co-opted

• Not Rotman’s moral or principled reformation of rehabilitation, but its technical correction and co-optation?
• Not anthropocentric but authoritarian
• Robinson’s (2008) analysis of ‘the evolution of a penal strategy’:
  – Utilitarian rehabilitation
  – Managerial rehabilitation
  – Expressive rehabilitation
The pains of risk-based rehabilitation

• Soft power (Crewe, 2009)
  – Depth, weight and tightness of penal regimes

• The pressure to ‘perform’ and ‘display’ risk reduction
  – Lacombe on SO programmes, Digard on releases SOs and recall, Cox on US juveniles, Werth on California parolees, Miller on reentry projects in Chicago, etc.
  – ‘Carceral devolution’ > Responsibilisation
Desistance

Expanded conceptions of EBP

1. Desistance is a process of personal, human development

2. That takes place in and is shaped by its social and cultural contexts; hence also a social transition

3. That involves movement away from offending (volume, frequency, severity)

4. And movement towards successful social integration, citizenship and participation
Figure 5: Constructing Desistance

![Diagram showing the relationship between Age and Levels of Maturity, Desistance Factors, Life Transitions, Social Bonds, Subjective Narratives, Attitudes, and Motivation.]
<table>
<thead>
<tr>
<th>Level</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary (Act)</td>
<td>Behaviour</td>
</tr>
<tr>
<td>Secondary (Identity)</td>
<td>Identity</td>
</tr>
<tr>
<td>Tertiary (Relational)</td>
<td>Belonging</td>
</tr>
</tbody>
</table>
Supporting Desistance

- **Realism**
  - Manage lapses and setbacks

- **Individualisation**
  - Respect subjectivity and diversity

- **Hope and agency**
  - Build self-determination

- **Relationships**
  - Social relations and social capital

- **Recognition**
  - Language and representation matter

- **Routines**
  - Practical supports
• Social positions
  – Legal rights and status
  – Moral and political standing
  – Social acceptance
• Individual dispositions
  – Motivations
  – Capacities/Capabilities
  – [Opportunities and networks]
Re-thinking outcomes?

A Conceptual Framework Defining Core Domains of Integration

- **Markers and Means**
  - Employment
  - Housing
  - Education
  - Health

- **Social Connection**
  - Social Bridges
  - Social Bonds
  - Social Links

- **Facilitators**
  - Language and Cultural Knowledge
  - Safety and Stability

- **Foundation**
  - Rights and Citizenship

From Ager and Strang (2008)
Four forms of rehabilitation

**Personal Rehabilitation**
- A matter of enhanced capacities or capabilities and motivation

**Social Rehabilitation**
- A matter of acceptance, belonging and opportunities

**Judicial Rehabilitation**
- A matter of restored rights and citizenship

**Moral Rehabilitation**
- A matter of moral standing and of mutually-recognised reciprocal obligations

**Desistance**
Four forms of rehabilitation

'Treatment' programmes
  Vocational training
  Health and wellbeing
  Education
  Personal development

Work with...
  Families and other groups
  Developing desistance supporting communities
  Civil society (e.g. employers)
  Public education and attitudes

Desistance

Formal de-labeling processes
  Certification of change
  Criminal records disclosure
  Access to public services

Victim-offender mediation
  Restorative practices and processes
  Shared values/solidarity
Four forms of rehabilitation

Psychology, Criminology and Social Work

Sociology, Criminology and Social Work

Desistance

Law, Criminology and Social Work

Philosophy, Criminology and Social Work
What do we really want from rehabilitation

- Not just risk reduction…
- Capable, contributing, thriving citizens
- Enjoying their legal rights
- In good standing with one another and the state; all recognising their mutual responsibilities
- Accepted by, belonging in and building flourishing communities characterised by tolerance and solidarity.