Although it is the arm of the correctional system that is most directly responsible for public safety, community supervision is just beginning to be recognized as a valued component of the criminal justice system. More than 6 million adults and 530,000 youth are supervised in the community, many on probation, but often these people have a short period of incarceration in jail or detention facilities; more than 700,000 are incarcerated in prison and then released. Parole supervision generally refers to people who are released from prison, but it can also refer to those released from jail (in some communities because of legislation to abolish parole, this is called supervised release).

Little attention has been given over the last several decades to community supervision. Although intensive supervision, boot camps, drug courts, and a few other innovations have occurred over the last two decades, the core function of supervision was not changed as part of this effort. Yet research over the same period of time has identified key structural components that, if used, would improve community supervision as a crime reduction strategy (Taxman, 2008; Taxman, Shepardson, & Byrne, 2004). This research is slowly being translated into new models for handling more than 6 million offenders under supervision. The transformation of supervision from a slap on the wrist to crime reduction strategy will evolve with the use of a principled, focused strategy to address criminogenic risk factors of the individual and related communities to make gains in reducing crime. Success will place supervision in the forefront of our criminal justice policy.
This chapter traces changes in the supervision model, with a focus on adopting evidence-based practices and incorporating treatment into the fold of supervision. The new models of supervision evolve from the “what works” research that grew out of Canada’s experience (now called evidence-based practices) (Andrews & Bonta, 1998). Recent attention has been given to applying such evidence-based practices to reentry, which has renewed attention to community supervision. New models of community supervision are being piloted that change the focus of the supervision process from enforcing conditions to managing risky behaviors and from holding the offender accountable to facilitating offender change and holding the system accountable. This chapter reviews some of these models and outlines a new generation of probation and parole supervision programming that redefines the nuts and bolts of the core business function of supervision: face-to-face contacts and supervision levels. The challenge before us is whether supervision can be at the forefront of public policy.

MAJOR TRANSITIONS OF PAROLE

The First Generation: Parole Supervision

The Urban Institute paper “Does Parole Work?” raised a number of questions about the efficacy of parole supervision (Solomon, Kachnowski, & Bhati, 2005). (Although the discussion is focused on parole, it pertains to all community supervision.) Regardless of the data used in the study, which has been the subject of much discussion (e.g., the data reflected supervision in the early 1990s, they pertained to only 14 states, and they included California, which has unique patterns), the report illustrates that parole supervision based on monitoring and face-to-face contacts has little saliency. In other words, parole does not reduce the recycling of offenders through the criminal justice system and may even contribute to it. And the use of antiquated supervision technologies has little effect on offending behavior, specifically on recidivism.

The findings of this study come as no surprise. Parole supervision in the 14 states under study involved face-to-face contacts that were intensified to monitor the conditions of the offender. Few agencies used risk instruments to determine the supervision level or even to identify the criminogenic needs that affect criminal behavior. Conditions were assigned to hold the offender accountable. The numerous intensive supervision experiments in the 1990s basically found that the number of contacts did not reduce recidivism or technical violations and often did not increase access to services (MacKenzie, 2000; Taxman, 2002). In this type of monitoring or contact, offenders are given a number of conditions, the parole agent monitors the conditions, and the offender often
fails to meet the expectations. These failures increase the number of revocations, resulting in increasing incarceration rates.

In an analysis of the caseload size and intensive supervision literature, it was observed that the monitoring and face-to-face contact supervision model is atheoretical (Taxman, 2002). Stated simply, the monitoring function focuses on compliance or external controls by formal institutions that place demands on offenders. Because negative behavior is likely to draw the attention of the criminal justice system, supervision agencies are responsible for responding to the negative behavior. In many ways, monitoring is an unforgiving process in which attention is drawn to what has not been done instead of any small gains that the offender makes.

The burden of the monitoring protocol is on the offender as the sole party responsible for meeting the assigned conditions. The offender is responsible for paying supervision fees (even if the offender is unemployed or underemployed or cannot afford basic life essentials such as rent and food), finding treatment (even if services are not readily available in the community), becoming sober immediately after a long period of alcohol or drug use, and finding a sober, crime-free place to live (even if other members are under community supervision or have substance abuse problems). All these scenarios illustrate how the supervision system can be unforgiving toward the offender and the communities that many offenders reside in. That is, monitoring generally provides the offender with little assistance in learning how to be responsible or accountable.

Adding conditions to the standard parole and probation orders in the late 1980s–1990s has had a number of unintended consequences. The first and most obvious is the increased potential for technical violations that might result in incarceration. With added conditions of drug testing, electronic monitoring, house arrest, curfews, or other new tools, offenders have more chances for not being compliant or failing to meet expectations. Most parole agencies recognize that the effectiveness of these new tools is likely to be tied to the ability for offenders to learn to change their ways. Unfortunately, funds are available for the monitoring tools but seldom for the accompanying behavioral interventions that would help offenders learn to change their ways.

Second, monitoring has translated into more parole agencies adopting an enforcer model, coupled with law enforcement technologies. Many parole and probation agencies assumed a law enforcement perspective that included arming their staff, with 41 states allowing parole officers to be armed (Fuller, 2002). For some organizations this raised the profile of the probation and parole staff, including access to benefits afforded law enforcement (e.g., retirement systems, which are usually better than those of other state employees, and salary enhancements for clothing). It also forced the organizations to participate in law enforcement-type training, particularly certification for gun use. And it reinforced the commitment to rigorous enforcement of conditions as a
form of accountability for the offender. The graduated sanction movement in the early 1990s reinforced this mentality, with a focus on responding to violations and the importance of accountability.

Some parole officers subscribed to the law enforcement perspective, whereas others continued to straddle the gap between law enforcement and social work. Some rigorously enforced the conditions, whereas others did not. And some officers suggest that they become frustrated with offenders and their actions, contributing to an acrimonious climate for supervision. Parole officers and offenders often get into verbal tugs of war that generally have negative results. Sanction guidelines (Burke, 2001) were developed to assist the parole staff in working productively with offenders to sanction behavior before pursuing revocation. But, like other guidelines in the criminal justice system, these are difficult to implement because the staff resist the structure that the guidelines impose (e.g., it affects their professionalism, they want to individualize responses, they believe that the guidelines give the offender too many chances, and they do not agree with the premise of the guidelines).

A punitive tone, emphasizing individual accountability and responsibility, appears to be characteristic of parole agencies. Taxman and Thanner (2003) note that messages of accountability and the actions of the parole and probation systems can create scenarios in which some offenders are treated differently from others. That is, procedural justice cannot occur in parole settings because some parole officers respond vigorously to violations of conditions, whereas others ignore the conditions unless the offender is arrested, and others will reinforce some conditions but ignore others. Studies in law enforcement and psychology suggest that such an environment of unjust punishment that is doled out under varying conditions is likely to lead to more disobedience than compliance (Skogan & Frydl, 2004; Taxman & Thanner, 2003; Tyler, 2004).

Second-Generation Programming:
Accountability Within the Framework of Treatment

The intermediate sanction experiments have generally found that increasing the intensity of supervision through a variety of external controls has not improved offender outcomes (Mackenzie, 2000; Taxman, 2002). In fact, similar results are likely to occur for enhanced technical violations because of the detection that results from increased visibility of the offender. In the early 1990s new programs were developed that included drug courts, “breaking the cycle” and other seamless efforts, diversion to treatment (both front-end and back-end), and enhanced programs that built on traditional community
supervision. Most of these programs emphasized treatment, drug testing, and sanctions. Overall, research has found that the provision of high-quality treatment services reduces recidivism. The key programmatic components that have been tied to effective interventions are as follows:

- Participation in treatment programs, particularly those that involve multiple levels of care (more intensive followed by less intensive services) such as in-prison treatment services followed by aftercare, intensive outpatient services followed by less intensive services
- Appropriate placement of higher-risk offenders into treatment services
- Engagement in clinical treatment services for at least 90 days
- Participation in clinical treatment services that involve certain types of therapeutic interventions, such as cognitive–behavioral therapy, contingency management systems (reward systems), social learning–based therapies, and therapeutic communities
- Programs that use positive reinforcers, which are more likely to shape behaviors than sanctions (Festinger, personal communication, 2005)
- Programs that are well implemented and maintain some integrity

Most programs are constrained by the failure to assign offenders to appropriate programs based on their needs (Lowenkamp & Latessa, 2005; Lowenkamp, Latessa, & Hoslinger, 2006; Taxman & Marlowe, 2006), to implement programs that use more effective clinical strategies, or to manage compliance by offenders.

During this era, the focus of the criminal justice system was on finding the best avenue to facilitate offender participation in treatment programs. Drug courts, intensive supervision programs, “breaking the cycle,” boot camps, and other criminal justice programs that incorporated some types of treatment services developed different techniques to link offenders with services:

- **Brokerage:** The parole officer refers the offender to another agency for assessment or services without having input into the assessment process or the services delivered.
- **Case management:** The parole officer monitors participation in the assessment and service participation of the offender. The emphasis is on compliance with the order.
- **Dedicated services:** The parole office offers services on site; assessment and services are provided at the same location. Sometimes these services are paid by the parole office, while at other times they are offered by community and other organizations.
Although few high-quality studies have assessed the merits of the different linkage approaches, a review of the literature suggests that dedicated staff using behavioral management techniques (e.g., assessment tools and clinical, client-centered interviewing techniques) are likely to yield greater participation in treatment services. It is unclear whether treatment services have an impact on overall outcomes. The major issue regarding treatment services is retention because 60% of the addicts who participate in treatment services do not complete their programs (McLellan, 2003).

The drawback to this era of programming is that the role of the supervision staff in acquiring treatment services and promoting retention has not been advanced. For the most part, the style of supervision was similar to those used in intensive supervision projects, where the emphasis was on more face-to-face contacts to fulfill requirements. The actual nature of the contact was focused on compliance, making sure that the offender meets the conditions of release. That is, the offender was primarily responsible for ensuring that conditions were fulfilled, regardless of the actions taken by the supervision staff. The research did not examine the role of the supervision staff in achieving public safety goals.

**Third-Generation Advances in Supervision: A Behavioral Management Strategy**

Although the research over the last three decades has many limitations, it provides guidance to improve criminal justice public policy and supervision practice. Much of the relevant research derives from studies in substance abuse treatment, education, and vocational training outside traditional correctional and criminal justice settings. The research identifies themes that should be incorporated into current policies and practices: The supervision period should be short, with clearly defined goals and objectives that speak to punishment and reparation of harms (for low-risk offenders) and habilitation (for moderate- to high-risk offenders); informal social controls (e.g., families, friends) are more effective in controlling behavior than formal government agencies; many external control tools (e.g., curfews, drug testing) merely fuel the churning process and have limited efficacy in improving offender outcomes (which suggests that it might be advisable to limit the use of such tools for most offenders); treatment-based interventions should be reserved for moderate- to high-risk offenders who have clearly addressable criminogenic needs for which clinical or pharmacological programming would be appropriate; and clarifying expectations to the offender, limiting the use of discretion, and developing rapport with offenders are key program components that can improve offender outcomes. All of this can be translated into a behavioral management approach.
that supervision staff can use with offenders, particularly for moderate- to high-risk offenders who are susceptible to the churning wheel.

Overall, the research suggests that efforts should be devoted to reducing the overarching umbrella of the correctional system for the clear purpose of focusing supervision resources on offenders and communities in the greatest need. Stated simply, core resources should be devoted to moderate- to high-risk offenders, particularly those who reside in highly disadvantaged geographic areas (e.g., high concentrations of poverty, higher levels of instability), as a means to improve public safety and community well-being. Such a policy would require the criminal justice system to diversify responses in a manner that concentrates efforts on offenders who are likely to return to the community (as are most) and who are likely to have problem behaviors. Other offenders would be handled in ways that benefit the community and that entail less intensive restrictions and interventions. This is particularly true of the low-risk offenders, for whom punishment and reparation goals might be more appropriate.

The core component is a behavioral contract that includes the conditions of release and short-term goals for the offender. The supervision plan should be included in the behavioral contract to create one guiding document for the offender and the parole officer. The behavioral contract is a negotiated agreement in which conditions are designed to ameliorate criminogenic risk and need factors. The process of developing and monitoring the contract should involve establishing agreed-upon milestones, providing feedback to the offender about progress on the contract, revisiting situations in which the offender struggles with a particular issue, using incentives and sanctions to shape offender behaviors, communicating with the offender to review progress on the case plan and achievement of supervision goals, and developing natural supports to provide the offender with a support system that offers assistance upon completion of supervision.

The role of the supervision agent in this model shifts significantly away from mere enforcement to a partnership. The officer can model prosocial behavior. There are four main goals of contacts:

- **Engagement**: Engagement helps offenders take ownership of their supervision contract and behavioral plan. Ownership derives from the offender’s understanding of the rules of supervision (e.g., the criteria for being successful, the rewards for meeting expectations, the behaviors that will end in revocation), the offender’s criminogenic drivers that affect the likelihood of involvement with the criminal justice system, the dynamic criminogenic factors that can be altered to affect the chance that the offender will be likely to change, and the prosocial behaviors that will be rewarded by the community and the criminal justice system.
• *Early change:* Early change helps the offender address dynamic criminogenic factors in a manner meaningful to both the offender and the criminal justice system. As part of the change process, all people have interests and needs that can motivate them to commit to a change process. The change process begins by allowing the offender to act on these interests and address one dynamic criminogenic driver (which will eventually lead to addressing other criminogenic traits). The trade-off in achieving this goal is that the offender’s interests in being a parent or provider or addressing specific needs (e.g., religious, health) should be acted upon simultaneously with the needs identified in the standardized risk and needs tool as a means to help the offender take ownership of his or her own change process.

• *Sustained change:* The goal of supervision is to transfer external controls from the formal government institutions to informal social controls (e.g., parents, peers, community supports, employers). This is best achieved by assisting the offender as gains are made in the change process to stabilize in the community and to use informal social controls to maintain the changes. The supervision process should include identifying the offender’s natural support systems or developing these natural support systems.

• *Reinforcers:* As part of each contact, the goal is to reinforce the change process. Formal contingency management systems assist with this goal by providing supervision staff with tools to reward positive behavior and address problems. The formal process of swift and certain responses supports the offender by showing that the supervision staff recognizes small incremental steps that facilitate change and sustain change.

**SEAMLESS SYSTEMS OF CARE**

Evaluations of drug treatment programs have consistently found that participation in such treatment reduces substance abuse and recidivism (Anglin & Hser, 1990; Hubbard et al., 1989). In various individual program evaluations and meta-analyses, therapeutic communities and cognitive–behavioral models have consistently shown more positive results than other approaches, such as counseling, reality therapy, or other services (Taxman, 1999). However, control-oriented interventions (e.g., electronic monitoring, house arrest) generally create short-term results in reducing recidivism (Petersilia, 1999). The two key variables of successful interventions are the type of intervention and the length of time in treatment. Both have been shown repeatedly to be critical factors affecting recidivism reduction potential.
Although drug treatment programs for offenders have been shown to be effective, such programs are generally threatened by system factors that dilute the impact of a single treatment program, and supervision can expect results that are more likely to occur over time. In community supervision, most often the supervision agency is a bridge to the treatment community through referrals to treatment programs or funding of treatment programs for offenders. In either case, it is recognized that community supervision agencies and public health agencies usually work together to achieve the best outcome from the offender’s involvement in treatment programs. In fact, certain actions by the supervision agency can increase offenders’ access to and retention in treatment programs (Taxman, Shepardson, & Byrne, 2004; Thanner & Taxman, 2003). The linkages support the need to develop boundaryless systems of care that engage public health and criminal justice agencies in efforts to reduce recidivism. For example, client selection is a common problem for correctional programs because it is important to identify offenders who will benefit from the services. Another typical problem is that the offender spends too little time in prison or jail to benefit from the full duration of a treatment program. Another important selection issue is the fact that program eligibility criteria are often ambiguous, making it difficult to identify the characteristics of offenders who are likely to benefit from the treatment program. Treatment programs need special correctional staff, which often places excessive demands on a correctional institution. Aftercare is often desired but seldom materializes because it entails crossing organizational boundaries to link offenders to treatment services in the community. Most of the issues raised by Farabee and his colleagues (1999) were also uncovered in the present process evaluation.

The concept of a boundaryless organization evolves from system theory, where the focus is on creating processes that contribute to desired outcomes instead of examining subsystem performance. As noted by Hammer (1996),

The problems that afflict modern organizations are not task problems. They are process problems. The reason we are slow to deliver results is not that personnel are performing individual tasks slowly and efficiently; fifty years of time-and-motion studies and automation have seen to that. We are slow because some of our personnel are performing tasks that need not be done at all to achieve the desired result and because we encounter agonizing delays in getting the work from the person who does one task to the person who does the next one. . . . We are inflexible not because individuals are locked into fixed ways of operating, but because no one has an understanding of how individual tasks combine to create a result, an understanding absolutely necessary for changing how the results are created. (pp. 5–6)
Figure 12.1 illustrates how these boundaryless processes must occur in order to allow the criminal justice and treatment systems to work together on key decision points. The implementation of both treatment and correctional services will be streamlined by the coordination of the treatment and criminal justice systems in regard to these key decision points. In their work with private sector companies, Ashkenas, Ulrich, Jick, and Kerr (1995) have shown that the creation of boundaryless (i.e., seamless) organizations requires a new focus that allows processes to function far better as a whole than their separate parts. Under this framework, the role and responsibilities for the processes are congruent with those of the employing organization. In fact,

There are still leaders who have authority and accountability, there are still people with special functional skills, there are still distinctions between customers and suppliers, and work continues to be done in different places. (Ashkenas et al., 1995, p. 4)

If each organization is focused on the overall process and not simply on its own goals and responsibilities, services can be implemented in a manner that maximizes their efficiency and effectiveness.

**Figure 12.1** Conceptual Framework for Boundaryless Organizations (Policies and Practices)

<table>
<thead>
<tr>
<th>Criminal Justice System</th>
<th>Treatment System</th>
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<tbody>
<tr>
<td>Assessment</td>
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<tr>
<td>Treatment Progress &amp; Continuum of Care</td>
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<tr>
<td>Treatment Placement</td>
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<tr>
<td>Supervision &amp; Monitoring</td>
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<tr>
<td>Drug Testing</td>
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<tr>
<td>Discharge &amp; Completion</td>
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</table>
The integrated system of service delivery is characterized by several distinct core components, including client-focused policies, delivery systems based on a continuum of care, and the use of coerced treatment, behavioral contracts, and graduated sanctions with clients, as well as the prioritization of system resources. Each of these core components is implemented with the cooperation of both criminal justice and relevant public health agencies.

The systemic approach to service delivery is designed to combine the roles and functions of different social systems, such as public health, criminal justice, social services, mental health, and other relevant agencies. In so doing, the seamless system approach expands the organizational boundaries of these participating agencies. For the criminal justice client, this involves treatment and criminal justice agencies functioning as a single agency rather than two separate units. In the traditional service delivery model these two entities would probably try to coordinate fragmented services, typically struggling over which agency ultimately controls decision making about the client. In a systemic or seamless organizational approach, the participating agencies would initially agree on certain guiding principles of care and then determine the appropriate roles and functions for each player in delivering that level of care. From this organizational perspective the emphasis is then on the system itself and its complementary parts rather than on the role of any one agency.

In his discussion of integrated services, Moore (1992) suggests that each agency would participate in key decisions about the client, including placement in appropriate services, modification of treatment plans based on client progress, the transition to other services when deemed appropriate, and eventual discharge from the system. Rather than mere coordination of services and efforts around these issues, there would be an integration and synthesis of both agency policies and operational practices. In the system approach to service delivery the initial focus must be on building the infrastructure needed to support the functions of each agency. In order to accomplish this, policy development must focus on such issues as client assessment, referral, placement, tracking, and monitoring; service planning; transition through services; and eventual discharge. In terms of the criminal justice and treatment system, such boundary-spanning activities, especially as related to the initial development of integrated policies, appear to be an essential next step in the evolution of effective treatment delivery systems.

Boundary spanning and organizational approaches are needed to ensure that offenders receive appropriate treatment and supervision services focused on long-term changes in behavior. The following is a list of the operational
practices that are important for developing and implementing a seamless system of care:

*Joint assessment and placement:* Treatment and criminal justice (jail, probation or parole, and prison) staff should jointly determine the type of offenders eligible for the treatment services. Involvement in jail treatment should be premised on the expected length of stay and willingness to continue treatment in the community.

*Information sharing between agencies:* Agencies should share criminal history and substance abuse information to ensure that appropriate offenders are placed in treatment. Substance abuse staff can use the information to become better acquainted with their clients, particularly their criminal histories.

*Specialized probation and parole agents:* Probation and parole staff members are often passive players in relation to treatment programs. They are not active in providing case management, securing treatment slots for the offender after release, or addressing compliance problems. Specialized parole officers would allow the agents to develop discharge plans and establish a behavioral contract before release from jail, but they are usually not available. The behavioral management approach discussed in the next section includes new roles for the officer. The supervision plan must reinforce the understanding that treatment is a critical part of supervision.

*Designated community treatment slots:* To avoid gaps in services, designated slots are advisable. Often offenders have to be reassessed, and jail or prison records are not provided to community treatment providers. Often the programs are not selected to provide continuity of care between treatment in prison or jail and community programs.

*Motivation for change:* Recent research has found that treatment approaches focusing on contemplation (e.g., preparing to change one's behavior) or motivation to change behavior are uncommon in treatment programs (Roman & Johnson, 2002). Readiness-to-change curricula are especially useful as the first stage of treatment or for treatment programs of short duration (less than 60 days).

*Structured curricula and closed groups:* Most correctional programs do not have a curriculum underlying the treatment program. This often leads to inconsistent goals for the treatment sessions. Program phases are useful tools to structure the treatment program along a continuum consistent with the
different stages of recovery. Phases are useful in a correctional setting because they can be geared to the expected length of time of the program. Closed groups of clients who progress through treatment together help build a sense of community and peer support.

In addition to changes in various agencies’ operational practices, a focus on building and monitoring specific interagency policies would be useful to ensure that these implementation and policy issues are addressed adequately. A coordinated effort is needed between the state treatment agency and correctional agencies to ensure the long-term success of these treatment programs outcomes. A full commitment is needed from state agencies to ensure that the continuum of care is seamless (e.g., treatment behind the walls, treatment in the community, supervision and sanctions, and drug testing), supported by an integrated approach to major policy decision making. This would help to eliminate some of the difficulties that occur during the implementation of continuum-of-care models, such as prisons transferring offenders before they have completed jail-based programs or a lack of involvement by supervision agencies in transitional planning. Although they are labor intensive in the short term, in the long run this type of integrated treatment approach is likely to improve the quality of services delivered, which in turn will improve client retention and outcomes.

**THE BEHAVIORAL MANAGEMENT APPROACH**

Many supervision agencies recognize that putting behavioral management systems in place entails other organizational changes and enhancements. Change strategies are needed to facilitate behavioral management goals and to develop new resources in the criminal justice system to achieve these goals. And as part of efforts to improve reentry programs and change the nature of supervision, a need exists to ensure that the supervision system addresses behavioral management goals. For example, useful goals are to ensure that offender accountability includes officer responsibility to obtain recommended services, to use assessment tools to define supervision tools, and to ensure that officers and offenders are provided incentives to reduce recidivism.

An important part of the behavioral management model is to recognize that the key element in offender change is the alliance with the supervision officer. Offenders’ attitudes and behavioral outcomes can be influenced by their interactions with supervision officers and treatment providers. Interpersonal
communication styles are often dismissed as factors that affect the correctional milieu. Palmer (1995) and Bonta and Gendreau (1990) state that nonprogram elements, such as agent decorum and interaction style with offenders, are critical to positive offender outcomes. Andrews and Kiessling (1980) determined that after receiving intensive training on strategies of interpersonal communication and anticriminal modeling and reinforcement, parole and probation officers were more effective in reducing recidivism than officers who did not use these techniques. In a recent review of audiotaped interviews of officers and offenders, researchers found poor adherence to some of the basic principles of using assessment tools to guide supervision conditions (Bonta, Rugge, Scott, Bourgon, & Yessine, 2008). Officers spent much of the time on enforcement issues such as complying with the conditions of probation; insufficient attention was given to the offender’s progress in obtaining services and the offender’s attitudes, including antisocial attitudes, and peer and social supports for crime. The officers did not use their face-to-face interactions with offenders to impart prosocial modeling, provide differential reinforcement, or attend to criminal thinking (Bonta et al., 2008). Many correctional agencies are moving toward adopting motivational interviewing as a tool to open communication lines and to assist officers in developing motivation-enhancing strategies in working with offenders (see Taxman et al., 2004; Walters, Clark, Gingerich, & Meltzer, 2007).

The importance of the relationship to outcomes is reported in a recent study by Skeem, Eno Louden, Polaschek, and Camp (2007). They used instruments to measure relationship components for probationers with mental health disorders on three dimensions: caring–fairness, trust (indicative of a behavioral management approach), and toughness–authoritarianism (law enforcement approach) and therapeutic alliance, and they found that treatment alliance was unrelated to offender outcomes. Behavioral management techniques predicted success and law enforcement approaches predicted failure, where every 1-point increase in an officer’s toughness score increased the odds of revocation by 94%. Skeem and Manchak (2008, p. 228) comment:

In surveillance-oriented relationships, officers used control in an indifferent or even belittling manner that often compromised probationers’ functioning and engendered reactance to officers’ directives. In synthetic relationships, officers used control in the “right way,” that is, in a manner perceived as fair, respectful, and motivated by caring. Probationers were allowed to express their opinions, explain themselves, and participate actively in the problem solving process (see Cullen, Eck, & Lowenkamp, 2002; Skeem & Petrila, 2004; Taxman, 2002).
This “right way” is an interpersonal form of procedural justice (see MacCoun, 2005), which leaves individuals feeling less coerced, even if they do not agree with the ultimate decision reached by an authority figure (Lidz et al., 1995).

The working relationship between officers and offenders is often the unstated component of evidence-based corrections. Researchers have recognized that organizational attention must be given to addressing this milieu to facilitate the implementation of sound practices and to achieve gains in offender outcomes. These relationships are important in creating an environment where offenders feel they can trust the officer and to have some desire to comply with the conditions of release. Turning decades of enforcement-style supervision into a working hybrid that can change offender behavior cannot be ignored in this evolution of probation and parole.

Some examples of new approaches are as follows:

- Advancing the use of motivational interviewing and other strategies to help the staff communicate constructively with the offender. Many agencies are training their staff in motivational interviewing techniques and other strategies for the purpose of providing a technique to focus on client-centered approaches that build trust and rapport. Communication becomes the key strategy for the behavioral management approach because parole officers must provide consistent feedback to the offender and community to assist the offender in the change process. For the approach to be effective in shaping behavior, the offender needs to have timely and consistent information about performance under the case plan.
- Using supervision plans that incorporate behavioral contracts, targeted goals to address criminogenic needs, conditions of supervision, and incremental steps to achieve goals. The supervision plan is more than a piece of paper; it is a document that is subject to revision based on the progress of the offender and changing goals of supervision (e.g., engagement, change, sustained progress). The plan also incorporates contingency management agreements, which hold both the offender and the system actors accountable.
- Integrating natural supports as part of the reentry and supervision process. More agencies are developing programs and services that include the community in the supervision process. As part of some of the reentry efforts, community guardians (e.g., civic activists, community volunteers) are being assigned to offenders to assist them in the transition from prison to community; to assist offenders in retention efforts as part of employment, schooling, or treatment services; and to assist offenders in developing a network that does not involve criminal peers or associates.
These efforts are designed to address retention issues and lay the groundwork for building those natural support systems.

- Expanding the service options to accommodate both the offender’s interests and a broader array of services that can be used to address criminogenic needs. Many parole agencies have expanded the range of service providers to include more natural supports in the community such as faith-based organizations, civic associations, educational institutions, employers, or local businesses. Opening the doors of the correctional system can assist the offender in the change and maintenance process.

- Using place-based strategies to adopt new innovations and affect the community in which the offender resides and in which the parole office is located. Place-based strategies allow the parole office to achieve key benchmarks that affect the whole office, and the integration of community-based services is more likely to occur if the parole office draws on the community to be part of the supervision process. Place-based strategies can have collateral impact by improving community well-being, thereby helping supervision agencies become a more valued component of the community.

- Using performance management systems to provide weekly feedback on progress. The old saying, “What gets measured gets done” is being translated into strategic management sessions where supervision staff are held accountable for the gains in meeting supervision goals. In some offices these meetings are held weekly, in others monthly. But the goal is to use the performance management system to monitor outcomes (e.g., assessments and case plans completed, employment retention, treatment sessions attended, negative drug test results, rearrests, warrants for violations) and then to build the organization to achieve these outcomes.

**POLICY DIRECTIONS TO ADVANCE PAROLE**

Improving community supervision should be at the forefront of crime control policy. If community supervision were more effective, states could reduce their new prison intakes by 30% to 40% simply by reducing technical violations on parole. New models suggest that this can best be accomplished through seamless systems of care in which parolees are provided needed services, and the role of the supervision officer is to facilitate behavioral change. That is, the supervision officer should be required to be a partner with the offender in the change process, instead of the law enforcement model, which provides oversight to orchestrate change.
The following provides a prescription for moving toward this new generation of supervision that is focused on offender outcomes. It should be noted that this prescription provides the framework to achieve public safety goals within current resource constraints.

- Systems should have validated risk tools that help officers make decisions about the likelihood that an offender will present a public safety risk. Risk tools are critical in helping agencies sort offenders into categories that will determine the appropriate level of service. Low-risk offenders should be placed in more punishment- or reparation-oriented programming. The risk tool should be used to identify medium- to high-risk offenders who need assistance in managing their behaviors to increase public safety. These risk tools are vital to provide systematic decision making and will clarify how different offenders should be handled. They will also preserve the most expensive community-based options for offenders who are more likely to benefit. Studies document the importance of using risk level in determining appropriate placement in services and show that better outcomes can be achieved if offenders are assigned to appropriate levels of services (Lowencamp & Latessa, 2005; Lowencamp et al., 2006).

- Systems need to adopt policy-based contingency management systems to guide decisions about reinforcing positive behaviors and pursuing revocation. Discretionary decisions by parole officers contribute to problems in the supervision system by allowing some offenders with similar behavior to be treated differently from other offenders. This situation does not bode well for compliance to general conditions of supervision (Taxman & Thanner, 2003). Contingency management systems provide for swift and certain rewards (positive reinforcers) to facilitate prosocial behavior. They change the focus of the criminal justice system from acknowledging failures to recognizing gains. As part of the process, negative behaviors can be similarly handled in a swift and certain manner. Policy-based guidelines should include both incentives to shape positive behavior and sanctions for negative behaviors. Modeled after parole guidelines (Burke, 2001), contingency management systems can be delivered that provide a formula for focusing attention on improvements. (For a discussion of contingency management, see Petry et al., 2004; Taxman, Shepardson, & Byrne, 2004). Offenders should not be reincarcerated for failure to comply with violations that are not criminal behaviors, which should reduce reincarceration rates.
Supervision should not be longer than 18 months for moderate- to high-risk offenders. Any longer period of supervision requires too many resources that are not likely to yield public benefits. Reducing the length of supervision will reduce the workload of supervision staff and focus their efforts on achievable goals. During the tenure of supervision, the goal should be to transfer the control from formal institutions to natural support systems.

Pharmacological interventions (e.g., medications for drug use, alcohol use, and mental health) should become more common in habilitation efforts for moderate- to high-risk offenders. Advances in medications have made these tools useful in helping people learn to control their behavior and to become more productive citizens. Medications should be perceived not as a crutch but as a mechanism to improve the offender’s cognitive capabilities. Some medications also can be used to treat addictions, and along with behavioral therapies, they have been shown to be effective in changing offender behavior.

Parole staff should be certified in different skills as they advance through the organization. The development of staff should be toward client-centered skills such as interviewing and communication techniques, behavioral contracting, and problem solving. On the social work–law enforcement continuum of goals, these skills do not shift the officer in one direction or another but rather emphasize the tools that have been shown to be most effective in helping the offender move toward changing his or her own behavior.

Low-risk offenders should be given swift and certain punishments that have reparative principles. For the most part, these offenders should not be under any form of supervision for more than a month. The goal should be to handle these punishments expeditiously and to have the offenders focus their efforts on reparation to communities. The model can replicate the fine experiments in the early 1990s or the community service (e.g., weekend service) concept, which minimizes the period of correctional control but is focused on clear outcomes. This could be part of the strategy of supervision agencies addressing some of the needs of communities or neighborhoods that are highly disadvantaged (e.g., high poverty levels, high degree of instability). Reinvesting in these communities, where many offenders happen to reside, would increase stability in the neighborhoods and contribute to healthier communities.

Moderate- to high-risk offenders should be placed in supervision that is designed to facilitate offender change. The risk tool should guide the identification of the types of behaviors that contribute to criminal conduct such as violence and power or control issues, substance abuse or
dependency, predatory sexual behavior, and detached or dissociated supervision. The core component is a behavioral contract that includes the conditions for release and short-term goals for the offender. The supervision plan should be encompassed in the behavioral contract to allow for one guiding document for the offender and the parole officer. The behavioral contract is a negotiated agreement in which the conditions are designed to ameliorate criminogenic risk and need factors.

As we focus our attention on behavioral management strategies for moderate- to high-risk offenders, the role of the supervision agent in this model shifts significantly. The supervision officer does not merely have enforcement responsibilities but also has responsibilities to instruct and model prosocial behavior. This changes the basic function of the supervision business to goal-directive face-to-face contacts. Goal-directive face-to-face contacts recognize that in each interaction (e.g., interviews, collateral contacts, phone contacts), the purpose of the contact must be clear.

CONCLUSION

Supervision and community corrections are the backbone of the correctional system, with more than 6 million adults under the control of these agencies. Although researchers, scholars, and policymakers focus on the need to change current policies to reduce the use of incarceration, this is not possible until the public has confidence that supervision and community corrections can be effective in protecting them. Prior efforts to improve correctional programs neglected one of the core functions: the role of parole or supervision officer. Research shows that the type of treatment programming is important, as is the type of offender who is placed in these programs, yet many prior efforts have not developed the role of the parole officer in achieving these goals.

This chapter highlights some of the core components that are necessary to move in the direction of a behavioral management approach. Efforts are under way to implement many components of a behavioral management approach in Maryland (the proactive community supervision model); the National Institute of Corrections’ evidence-based practice cooperative agreement work in Maine and Illinois; Oklahoma; Virginia; New Jersey’s parole system; Maricopa County, Arizona; Multnomah County, Oregon; and other jurisdictions. Findings from evaluation studies are also available on the Maryland proactive community supervision model, which demonstrates reductions in rearrests and requests for violation of parole or probation warrants.
Tools of the Trade: A Guide to Incorporating Science Into Practice (Taxman et al., 2004) describes the core components and can guide practitioners in the development of their own behavioral management approach. In her foreword to the manual, Judith Sachwald, director of Maryland’s Division of Parole and Probation, reiterates that movement into this third generation of supervision programming requires a commitment of the organization. Her model consists of preparing the organization, clarifying the vision, establishing key benchmarks and meeting these benchmarks, building community supports, and implementing core components of the model in an incremental process (organizational change similar to individual change). Sachwald writes, “Without ongoing thoughtful professional development, supervision based on science and offender outcomes will become a fad and quickly extinguish the recent spark of interest in community supervision” (Taxman et al., 2004, p. viii).

The time has come for community supervision to step up and become the most critical component of the correctional and criminal justice system. Changing the role of the supervision officer and benefiting from the core function of contacts cannot be done without a commitment to a revised policy, vision, and program components. Supervision agencies must also make a commitment to use the key tools of the trade: communication, assessment tools, supervision plans, contingency management systems, effective treatment and service programs, and policies that focus efforts on moderate- to high-risk offenders and disadvantaged communities. This is where the most gains will occur, and this is how public safety goals will be achieved.

**DISCUSSION QUESTIONS**

1. Under a behavioral management approach, what are the main ways in which parole supervision differs from a control model?

2. Explain how an interagency approach can help offenders get into treatment services.


**SUGGESTED READING**

REFERENCES


