Cognitive Behavioral Therapy (CBT): An Effective Approach for Reducing Recidivism and Preventing Drug Related Crimes

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Abstract

Empirical research has cataloged cognitive behavioral therapy (CBT) as one of the most effective evidence-based rehabilitative interventions in targeting mental conflicts, beliefs, and maladaptive behaviors (Edelman, 2007). This paper examines the effectiveness of CBT for reducing recidivism and preventing drug-related crimes. Research has found promising results in the utilization of CBT for modifying and preventing distorted cognitions and antisocial behaviors of offenders. Although more research is needed to better understand the effectiveness of CBT in correctional settings, the existing studies suggest this is a promising approach.

Introduction

- Previous research suggests that drug offenders exhibit difficulties in self-control of emotions and behaviors including impulsivity, distorted thinking, and self-justification (Clark, 2010).
- Drug offenders also show deficits in recognizing the effects of substances on their behaviors and attitudes (Clark, 2010). E.g., drug offenders are often unable to see how their urge for substances hinders their ability to avoid criminal behavior.
- Past research also suggests there is a connection between criminal actions and acquisition of substances (Blevins, Kuhns & Lee, 2012). A significant number of drug offenders exhibit signs of substance use disorder, which suggests that the integration of substance-related CBT in correctional settings would have promising results.
- About half of prisoners in the U.S. are drug offenders (Taxy, Samuel & Adams, 2015). Methamphetamine and cocaine users are estimated to form about 54% of the prison population (Taxy et al., 2015).
- Drug offenders experience higher levels of stress than substance users in the general population, mostly because they have to adjust to a restrictive setting with decreased access to substances while also dealing with their legal situation (Cesaroni & Peterson-Badali, 2010).
- Although the nature of drug-related crimes varies by type of offense the focus here is on convictions involving drug use.

Scholarly Argument

If drug offenders were allowed to receive CBT, it would (1) improve rehabilitation of offenders, (2) help prevent reoffending for drug-related problems, and (3) promote sentencing policies that contribute to public safety while reducing the unsustainable growth of prison populations.

Why Cognitive Behavioral Therapy?

- Research indicates that CBT promises significant effectiveness for drug offenders, as it involves learning coping and interpersonal skills as well as cognitive restructuring, which would help offenders overcome vulnerabilities for substance use.
- Cognitive behavioral therapy utilizes strategies that are adapted to the needs of the individual (Easton, Mandel, Hunkele, Nich, Rounsaville & Carroll, 2007).
- Another important component of CBT is the clear identification of goals and straightforward objectives designed to help the individual replace cognitive distortions fostering antisocial behaviors and use of mood altering substances (Bahr, Masters & Taylor, 2012).
- Clinicians from all over the world have shown significant support for the utilization of these strategies with inmates and with those in less controlled settings.
- CBT puts emphasis on the relationship between thinking errors and/or negative cognitions and behaviors, which in drug offenders appear as a persistent pattern affecting their abilities to challenge biased interpretations of life or situations.
- CBT also attempts to enhance motivation for the change by making the individual know what is best, yet is unable to make the best choices (Roes, 2011).

Goals of Treatment

The goals of CBT for reducing recidivism and preventing drug-related prosecutions are:

- Acquire the necessary skills to improve quality of personal life and maintain long term sobriety.
- Identify and replace cognitions that foster negative emotions and behaviors contributing to use of substances or illegal behaviors.
- Increase insight about consistent ways to meet emotional needs through positive outlets (e.g., mental health programs, rehabilitation programs, family support, community programs).
- Reduce and gradually eliminate self-defeating feelings and behaviors (e.g., shame, guilt, poor medication management).

Conclusions

- CBT seems more effective when participants are motivated and therapy sessions are not mandated.
- In some cases, cognitive strategies have been found to exacerbate symptoms, especially if the individual knows what is best, yet is unable to make the best choices (Roes, 2011).
- Roes (2011) also indicated that CBT has not been demonstrated to be effective with those with low self-efficacy as the person’s capabilities to motivate or produce effective cognitions is limited.

Limitations

- CBT seems more effective when participants are motivated and therapy sessions are not mandated.
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References