



COSA

CIRKELS VOOR
ONDERSTEUNING,
SAMENWERKING EN
AANSPREEKBAARHEID

COSA IN NEDERLAND

IMPLEMENTATIEONDERZOEK PILOTFASE

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(Expertisecentrum Veiligheid Avans Hogeschool
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Executive Summary

Introduction

COSA (Circles Of Support and Accountability) - a new approach in sex offender management- were first developed in Canada in 1995 and since 2002 have been adopted and further developed in the UK. In 2009 a two year pilot started in the Netherlands with financial support of the Dutch Ministry of Justice.

The primary goal of COSA is to prevent new victims of sexual abuse. COSA offers a unique combination of intensive support and monitoring of a sex offender who is re entering society after detention –delivered by a small circle of volunteers: the inner circle. The sex offender for whom a circle is installed is called core member. Around this inner circle an outer circle is formed by professionals who are involved in the supervision, treatment or after care of the core member. The volunteers are trained, supported and supervised by a circle coordinator, who is also a professional. The circle coordinator takes also care of the exchange of information within and between inner and outer circle.

The Dutch Probation Organisation (Reclassering Nederland; RN) and the Centre for Public Safety and Criminal Justice of Avans University of Applied Sciences have introduced the English COSA model in the Netherlands by forming a partnership in 2009 (Circles NL) and preparing and starting the first two circles. The process of this implementation has been researched and the results are described in this summary. The main aim of the implementation study is to advise Circles NL with regard to the further implementation of COSA.

The main research question was comprised of three parts: is it possible to successfully implement Circles in the Netherlands, what conditions have to be fulfilled and how can this process further been supported? Three underlying questions were studied.

- How did the process of implementation develop and what adaptations to the original concept appeared to be necessary?
- To what extent were the preconditions for a successful implementation met?
- Do circles function as intended and what elements or factors contribute to this process?

Information has been collected through interviews with all involved parties (core members, volunteers, professionals, project staff), both at the beginning and at the end of the pilot. Throughout the pilot, data about the proceedings were collected in a project diary, to which all project members individually contributed.

Can COSA successfully be implemented in the Dutch context?

This first question can be answered affirmative. It appears to be possible to recruit and select sufficient volunteers and core members, and to build a national and regional project organisation, that supports the effective functioning of circles. However, on many aspects improvements can still be made.

Implementation and adaptation of COSA in the Dutch context

Organisation development

In the Netherlands, COSA is introduced and implemented by Circles NL, the national program bureau, in which Avans University of Applied Sciences and Reclassering Nederland participate. Circles NL initiates, supports and monitors regional circle projects and generates support for Circles by informing professionals, policymakers and the general public about the method. Circles NL initiates and coordinates research on circles and maintains relationships with institutes for professional education.

Circles are operated by regional circle projects, who generate support for circles within the network of local organisations, recruit circle volunteers and core members, and initiate, support and monitor circles. As to this moment two regional circle projects have been established, Circles Brabant and Circles Rotterdam/Dordrecht. There is a clear division of roles and responsibilities between the program bureau and regional circles projects, however it has been unclear who is responsible for the monitoring of the program and model integrity of circles and circle coordinators and the monitoring of the financial resources. The monitoring role of regional projects has been developed further in reaction to concept versions of this implementation study.

Both regional projects are run by RN, the Dutch probation organisation. Stakeholders in the region expressed a clear preference to position regional circle projects within the 'Safety house', a local network that is dealing with the follow up of delinquents re-entering society and the management of risk. Since this is in line with the intentions of the program bureau, the operational consequences need to be further investigated.

In the UK, regional circle projects are operated by partnerships in different constellations per county. Therefore, at the start of a new project, a local steering committee is installed, that aids to the preparation and later monitoring of the regional project, within the guidelines of Circles UK. In the Netherlands, regional circle projects are also assisted by regional steering committees, in which the organisations of the local safety house are represented.

Recruitment, selection and training of circle volunteers

The recruitment of circle volunteers had been anticipated through establishing working alliances with volunteer organizations. These organizations however, could not provide volunteers for different reasons, mainly organizational constraints. Acquisition then took place through personal networks of the project members, institutes for professional education, church communities and an association for former probation officers. At the end of 2009 enough volunteers were recruited to form two circles, but afterwards no volunteers could be found for some months. In mid 2010 a national media campaign was launched to overcome this stagnation. Advertorials in local newspapers and interviews with volunteers in national newspapers and on television proved to be effective: in the weeks following the media campaign more than 100 new volunteers applied for Circles. Also, professionals and volunteers already participating in circles thought that this media campaign contributed to a more realistic and humanitarian view on sex offender management in society.

The selection process of volunteers starts with the applicant filling in a registration form. After that, a first informative interview with the circle coordinator takes place and the judicial antecedents of the volunteer are checked. After the first interview, both the circle coordinator

and volunteer decide whether to continue the selection process and let the volunteer enter the two day training.

The training is followed by a second selection interview in order to evaluate the training and the competences of the volunteer. In the next phase of the selection process, the regional circles team evaluates in cooperation with the volunteer the outcome of the selection. Volunteers then have to deliver a certificate of good conduct and after that can be involved in a circle project.

The selection procedures described above have been executed differently in both circle projects. In one project the first vis à vis informative interview was replaced by an information meeting for all new applicants. The big difference in drop out in both projects (64% versus 25%), leads to the conclusion that one on one personal contact in the beginning of the selection procedure is possibly a more effective strategy to start the selection procedure. An alternative explanation for the difference in efficiency may be a difference in how the selection criteria were applied in both projects. In the future, it is important to monitor the program integrity of the selection procedure and the application of selection criteria. A format for standardized reports about the selection interviews has been developed.

The volunteers are trained in a two-day training program. The training generally meets the expectations of the volunteers, but when dealing with more complex problems of the sex offender in a circle, more and detailed information about sex offender treatment and problem behavior is required. This is in line with the quantitative evaluation of the training by a short questionnaire, that also revealed knowledge deficits on these items. In the follow up training program for volunteers these specific training needs should be met.

Selection of core members

The selection of core members for circles appeared to be quite unproblematic. Presentations about COSA were held in all units of the probation organization in the pilot region and more than enough sex offenders were referred to the Circle project. Not all referred sex offenders meet the selection criteria. Several standardized risk-assessment tools are available, but probably the use of these tools differs, as does the way in which level of risk is used as a selection criterion. Also in this respect, the monitoring of program integrity needs proper attention.

Professionals

Professionals in organizations that are involved in the outer circle in the pilot (RN, forensic psychiatric treatment centre, police) support COSA, but they need to be well informed about their role and responsibility, in order to prevent false expectations. In this respect, written information is not sufficient, investing in personal contact is necessary. Additional efforts need to be made with the police, since the support for COSA is less established here.

Monitoring and evaluation

Circle activities are monitored by the circle coordinator. Circle minutes, telephone calls and vis a vis contact are the most important tools. Information about the circle proceedings are reported to the professionals in the outer circle on a monthly basis. In the pilot circles there has been frequent contact between circle coordinators and volunteers by telephone, especially in one of the circles, since the deliverance of circle minutes was problematic. In the near future, when more circles will be operated and monitored by the circle coordinator (up to 5 circles per 0.5 fte) this intensive way of monitoring will exceed the formally allocated time.

As circle minutes will become more important, timely deliverance and sufficient detail will be necessary. The training of volunteers should address this aspect of being a circle volunteer.

Monthly reports to the program bureau about the circle process, the core members process and the cooperation between inner and outer circle are being written by the circle coordinators. This report is an instrument in the monitoring of the program integrity and the model integrity (the extent to which the three basis circle functions – support, monitoring and accountability - are being effectuated). The research emphasizes, that responsibility for the monitoring of these reports needs to be clarified between supervisor and regional circles coordinator.

The core members' changes in risk and protective factors are evaluated quarterly with the Dynamic Risk Review (DRR), a standardized evaluation tool, developed by Circles UK. Circle coordinators follow a one - day training to work with the DRR. It is scored by the volunteers and circle coordinator together, in absence of the core member.

The instrument is appreciated as being a useful instrument that reveals blind spots in the circles perception of the core member, but is not easy to apply.

Implementation in organisations and organisational network

At first sight, the implementation of COSA in the organisations involved appears to meet little to no difficulties. On the management level professionals appeared to be barely involved in the implementation process and no specific policies appeared necessary. On one hand this may indicate a good 'fit' between the Circles model and the organisations, on the other hand COSA is possibly not yet adopted by higher ranks in the organisation and the implementation is not secured by policies. This may lead to ad hoc solutions to bottlenecks that in fact need to be dealt with in advance by management decision-making.

For instance, therapists in forensic mental health care indicate that privacy rules and regulations regarding patient information may interfere with the exchange of information between inner and outer circle. Probation officers experience that their involvement with Circles may blur their own monitoring role. Professionals within regional circles projects face workload problems due to the fact that they combine their works for circles with their work for RN.

Research and dissemination

The implementation of COSA is followed up by research. The regional projects need to keep clear insight into goals and activities of the different studies and the instruments employed. Therefore a monitoring and evaluation guide is developed. Its usefulness will have to be evaluated in the future.

The dissemination of the method to the education of future professionals is set out in activities within Avans University of Applied sciences and a national Minor "Mandated Social Work". In the future workshops and presentations in other Institutions can be offered, if additional funding can be secured.

At the end of 2009 a European Project has started, aimed at the support of further dissemination and implementation of COSA to other European countries. A European partnership has been established and a European Handbook will be developed. This European project is funded for two years by the Eu Daphne III programme and will also enable the start of a longitudinal research into the changes in dynamic risk and protective factors in core

members. For a future recidivism study with a longer follow up period and more core members additional finances will have to be acquired.

Conditions for successful implementation

According to the implementation theory of Greenhalgh et al. (2004), the success of an implementation process is influenced by characteristics of the innovation itself, by the adoption process of the workers involved and by certain characteristics of the organisations that innovate. In this study we assume that characteristics of the network of organisations are also influencing the implementation process, since COSA is based on co-operation of professionals from all organisations involved.

Starting point

Most conditions for a successful implementation of COSA were met at the start of the implementation process. Project members, volunteers and professionals were highly motivated and perceptions of congruency of the COSA model with own beliefs were high. Circles' humanistic and inclusive view on rehabilitation of sex offenders was shared by all involved at forehand. The COSA model was very positively evaluated and volunteers expressed high expectations towards its effectiveness. The volunteers' adoption of COSA was less advanced than the adoption of COSA by professionals, which could be related to the fact that they had fewer positive role models and support from their own network than did professionals. The organisations and the local network involved appeared to be ready for Circles – as far as could be judged on the limited amount of information.

Status Quo

After nine month of circles, some shifts in conditions become apparent. Most obvious are shifts in volunteers' perceptions. The humanistic view on sex offender rehabilitation is still a shared belief, but the motives for participating in a circle have changed through the experiences so far. Practical issues like time and travelling distance become concerns. Also, for some volunteers, the group dynamics within a circle and doubts about the motivation of the core member appear as negative influences on their motivation.

The high expectations concerning the impact of one's own efforts at the outset are met in only one of the two circles. In the other, volunteers become disappointed and less motivated as the core member doesn't seem to be able to benefit as much as they expected. Nevertheless, most volunteers are motivated enough to guarantee the continuity of this circle. Also, the perception of the COSA model doesn't seem to be affected by this perceived lack of success. In general, COSA is evaluated even more positive than at the start of the pilot and there is unanimous enthusiasm amongst volunteers about the support given by the circle coordinators.

Volunteers express hardly any negative effects of their work in the circle, the positive effects are more often mentioned, e.g.: enhanced self-esteem as a consequence of the contribution one is able to make and increased assertiveness as a consequence of working in a group.

The adoption process has advanced in almost all who are involved, but there is an almost unanimous perception that role models have a minor impact on the adoption process since the intrinsic motivation is already very high. Probation officers, however, are less

enthusiastic. Their role in the outer circle is perceived as unclear and they experience too little support from the project organisation.

Despite the presence of supportive preconditions, the implementation of COSA in the organisation is not much improved compared to the situation at the start of the pilot. Management policies to assure the implementation of COSA are rare and in almost every case, only those professionals who are involved in an outer circle are aware of the pilot. Also, COSA appears to be not yet very well embedded in the network of organisations and the role safety house has yet to be clarified.

The Circles

Program integrity

The Circles have mainly been executed the way they were intended to. Diversions from the guidelines have taken place on following issues:

- Professionals in the outer circle are supposed to meet the inner circle at an early phase (the first eight meetings). This has not been realised, due to unclear roles of the professionals in the outer circle and the privacy policies the therapists have to observe.
- The frequency of circle meetings is meant to be evaluated together with the quarterly evaluations of the core members process. There is no evidence from the available information that the frequency of circle meetings has been taken into consideration.

Model integrity

Both circles differ in the extent to which the intended circle dynamics and (probably) effective circle functions have been realised. Determinants to these processes appear to be: the building of a trusting relationship among circle members, the motivation and responsiveness of the core member and the supervision and support of the circle by the circle coordinator.

Both circles have gone through different stages, starting with a predominant focus on monitoring, evolving into a more supportive approach. The predominantly monitoring stage in one circle lasted about two months, and after a corrective intervention of the circle coordinator has transformed into a more supportive approach. In the other circle this focus on monitoring lasted at least seven months. The building of trust here was hindered by several factors. There was a substantial difference between the expectations of the volunteers and the expectations of the core member, in fact there was growing distrust due to doubts about the motives of core member (doubted by volunteers) and some of the volunteers (doubted by the core member). The Core member and the volunteers both felt incapacitated and helpless. Only after a corrective intervention of the coordinator (a meeting to discuss the conditions of continuation of the circle) a turning point seemed to be reached.

In both circles however, the monitoring function has been effective. Volunteers signalled and reported risk factors that professionals were not aware of. In one circle, the core member appeared to be not yet enough prepared to talk about his risk factors and relapse prevention plan. The therapist then worked on this in treatment.

The supportive function showed marked results in one circle, since the core member could successfully integrate tips and advice from the volunteers into his daily life. In the other circle there is not yet a clear effect. The volunteers experience more problems in finding ways to tune in on the more severe problems and social deficits of this core member.

In one circle the core member was held accountable and treatment goals were maintained in a way that social skills and self regulation skills of the core member clearly improved. In the other circle the core member was held accountable in a more radical way. Here he was given the choice: either to put more effort into the circle or to stop the circle altogether. After this decisive moment the core member changed his behaviour and was less reluctant to contribute to the circle. It is not yet clear if this represents a lasting behaviour change.

Other factors contributing to Circles' effectiveness

In general, the circle coordinators' coaching and guiding role appears to be crucial for the way the circle functions. The interventions of the circle coordinator usually have the intended effect and positively contribute to model-integrity. Good timing is essential, since dysfunctional circle processes can last for a long time if they are not dealt with.

The cooperation between inner and outer circle in general takes place as intended. Signals of changing risk are being communicated to the outer circle without delay and are being followed up by interventions of the professional involved. The district police officer however is rather absent in both outer circles. He supports the approach, but only wants to be informed if his intervention is needed.

In both circles critical incidents contributed to the process of change of the core member. In both cases the volunteers played a vital role in this, by pressing the core member to deal adequately with the situation. This 'demand' to act was appreciated by the core members as being justified and had a positive effect. This, therefore, appears to be a legitimate strategy of the volunteers, and is based on the reciprocity in the relationship that is felt by both volunteers and core member.

During the first nine months (the evaluation period) in both circles one volunteer stopped his activities for the circle. Both core members evaluated this as negative, because the continuity of the circle meetings was threatened. In both circles however only a few circle meetings were cancelled. Meanwhile two other volunteers have resigned after a circle evaluation. They have been replaced by two new volunteers.

Discussion

During the pilot period we have observed a constant cross-over between (further) development of the approach in the national program bureau and implementation in regional circle projects, which is according to the implementation theory a characteristic of a successful implementation process. Doing research in such a dynamic context implies to be always one step behind the latest developments. This evaluation in fact reports an interim status quo as it was in November/December 2010. The bottlenecks and problems described in this report are already partly been solved by the program bureau after reading recommendations made in the concept version. Therefore this report sheds light on crucial points that need attention in future implementation of COSA rather than giving a correct pin point evaluation of the pilot project. The conclusions about strengths and weaknesses in the implementation process are based on information from different sources and are reasonably reliable. Conclusions about program and model integrity of circles in the Netherlands and its determinants however are tentative at this stage, since only two pilot circles have been evaluated. Effect studies in Canada show promising results, but need to be repeated in the Dutch context. Operating a circle project is a matter of long term investment, and so is financing them and doing research.