Moral reconation therapy (MRT)

Behavioural treatment to influence how offenders think about moral issues and make moral judgements.

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	Quality of evidence				
Effect scale	Effect Impact on crime	Mechanism How it works	Moderator Where it works	Implementation How to do it	Economic cost
Overall reduction	Strong	■ ■ □ □ Moderate	■■□□ Moderate	Low	

Focus of the intervention

Moral reconation therapy (MRT) is a behavioural treatment for offenders either in custody or in the community, while on bail or on probation.

MRT takes a cognitive-behavioural approach, believing that changes in cognition can lead to changes in behaviour.

The programme is designed to influence how offenders think about moral issues and make moral judgements, specifically about committing offences.

This narrative is based on a systematic review of 33 studies, using reoffending as the outcome.

While the review lacked detail about the offence type from the primary studies, it did state that MRT has helped driving offenders, substance abusers and domestic violence offenders.

Effect – how effective is it?

Overall, the evidence suggests that the intervention has reduced crime.

The effect size within the review showed that the level of reoffending amongst offenders who received MRT was 28% compared to 44% in control groups. This difference was statistically significant, and represents a drop of one third in future criminal offending.

A significant drop in the rate of reoffending was found in the eight studies of large and 20 studies of small sample size. The randomised control trials showed a smaller effect than studies with other research designs, but the effect was still statistically significant.

When assessing the outcome type, it was discovered that MRT is more effective when the outcome was rearrests rather than convictions.

A larger effect size was found when the follow-up was six months to two years rather than longer.

However, it is important to note that the effect size for studies that had a five-year follow up was only slightly lower, showing the effect was maintained over time.

How strong is the evidence?

The review was sufficiently systematic that many forms of bias that could influence the study conclusions can be ruled out.

The search strategy for the review was well-designed and transparent. The authors took care to use the correct statistical analyses within the meta-analysis to control for the effects of publication bias and differences in outcome between the studies.

However, the risk of bias was not fully explored in the review through quality assurance procedures or through the influence of outliers, nor were unanticipated outcomes examined.

Some biases were identified within the primary studies. These did not always provide enough information about their research design, or about the socio-demographics of their participants.

Some studies did not address the issue of drop-out rates, meaning that their effect size may be artificially inflated.

Subcomponents of treatment were not analysed, meaning that it is not possible to know which parts of the treatment are causing the effect.

Finally, only 15% of the impact evaluations were randomised control trials, meaning the rest were variable in methodological quality.

Mechanism – how does it work?

The review suggested a number of mechanisms by which MRT might have an effect on crime.

MRT draws upon the theory of moral development, suggesting that breaking the law seems more acceptable to those in earlier, more self-centred stages of moral development.

Therefore MRT tries to move offenders from this lower stage of moral reasoning to a higher level where social rules and other people become important.

In influencing how offenders think about moral issues and make moral judgements, MRT affects how a person makes decisions about how to act in any given situation, including whether or not to commit a crime.

It is claimed that MRT can reduce stress and help control anger.

The review goes on to suggest that this may be useful for domestic abuse offenders and those with alcohol abuse issues. It may also assist offenders to find jobs, and help to fill a spiritual void. None of these mechanisms were tested in the review however.

Moderators – in which contexts does it work best?

The review identified a number of potential moderators, including offender characteristics such as age and gender, and the setting in which the intervention was delivered.

The analysis found that MRT is more effective in institutional settings than when carried out in the community.

It is also more effective for adults than youths. This may be due to the treatment being too advanced for adolescents who are not yet sufficiently equipped – either cognitively or emotionally –

to understand the nuances of a more sophisticated form of human relations required by the programme.

The findings from the review suggest that MRT is possibly more effective for females, although this was based on only two studies as all the rest were male-dominated.

Implementation – what can be said about implementing this initiative?

MRT is a structured programme based on a manual describing exercises and lessons, directed at groups of 10 to 15 offenders.

The therapy involves 12 to 16 sessions, typically delivered at a rate of two per week, with each session lasting one to two hours.

Each participant is given a workbook that contains the exercises and lessons that constitute the program.

These lessons include:

- confrontation of beliefs, attitudes and behaviours
- assessment of current relationships
- reinforcement of positive behaviour and habits
- positive identity formation
- development of frustration tolerance
- development of higher stages of moral reasoning

However, the extent to which its delivery is modified to accommodate the individual characteristics of offenders – such as cognitive ability, learning style, ethnicity and gender – is unclear.

Economic considerations – how much might it cost?

The review does not calculate the costs of implementing the programme and does not conduct a cost-benefit analysis.

It mentions that the benefits of MRT come from reducing the costs associated with processing arrests, paying for incarceration and associated crime expenditures, all of which are greatly reduced.

One primary study by Aos and others (2011) reported that MRT provides a cost benefit of \$5,134 US dollars per offender.

This study is based on an analysis of eight studies of MRT and assumed 62 sessions at two hours per session (plus 30 minutes of preparation time per person) valued at the hourly cost of a community corrections officer in Washington State, USA.

General considerations

MRT is criticised for focusing solely on the individual and not on the environmental factors, which may be linked to their offending.

Summary

Overall, the evidence suggests that MRT has reduced crime.

Offenders who receive the treatment have reoffending rates one third lower than the control group.

A decrease in reoffending was stronger when the therapy was conducted within correctional institutions rather than in the community.

The effects were long-lasting, with studies showing reasonable results after five years.

Reviews

Review one

Reference

Ferguson, L. M. and Wormith, J. S. (2012) 'A Meta-Analysis of Moral Reconation Therapy',
International Journal of Offender Therapy and Comparative Criminology, 57:9, 1076-1106

Additional resources

Aos, S., Phipps, P., Barnoski, R., & Lieb, R. (2001) The comparative costs and benefits of programs to reduce crime (Version 4.0) (Number 01-05-1201, May). Olympia: Washington State Institute for Public Policy.

Summary prepared by

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