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Reducing Criminogenic Risk Factors

AVP – An Attitude Transformation Model

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The Alternatives to Violence Project [AVP] has been very effective at changing attitudes and behaviors, reducing anger, increasing empathy and reducing recidivism. Focusing on this last outcome, reducing recidivism, it is generally accepted that there are nine criminogenic risk factors that are predictors of recidivism. These factors in order of importance are: attitude, peers, personality, employment, family, substance abuse, housing and finance, personal distress and socio-economic status. The first three, and most important [attitude, peers, personality], must be addressed or success is unlikely, no matter what other criminogenic factors are addressed. More on these three factors later. The second three [employment, family, substance abuse] are somewhat important. These are usually the focus of programs because they are easier to understand and measure. Concerning employment, in the Pennsylvania Parole Outcome Study of 2005, obtaining employment was not a factor between successes and failures, but maintaining employment was. Both successes and failures were equally likely to have obtained employment, but successes kept their job while failures did not. A half-way house in Ohio reported that 98% of their clients were employed when discharged. However, only 12% were still employed in that job four months later. When they changed their focus from just gaining employment to include attitude and goals, the job retention rate at four months jumped to 90%.

The last three factors [housing and finance, personal distress, socio-economic status] are least important. In the Pennsylvania Parole Outcome Study, the important aspect of finance was having financial management skills, rather than having a good financial condition. The successes had a larger debt than the failures, but they had a plan and skills to manage it. Thus, they experienced less “personal distress” over their financial condition, and personal distress is the next factor. The last factor, socio-economic status is obviously influenced by all the other factors and less likely to be addressed directly.

AVP’s impact on reducing recidivism is the result of its directly addressing two of the three top risk factors [attitude and personality] and indirectly the third [peers]. It addresses attitude by developing attitude skills, which are self-awareness, empathy and personal responsibility. At the beginning of each workshop, an environment of safety and respect is established. As participants experience being safe, they naturally let their barriers and defenses down, both those within themselves and between them and others. As most inmates have been traumatized in one way or another [poverty in and of itself is traumatizing], they protect themselves by cutting off from others, which results in them cutting themselves off from their own feelings and their core self. The persona they portray to others is actually a defense mechanism to keep them safe. As one inmate put it, “I knew there was this good person inside, but I didn’t know how to let it out and still be a man.” With their barriers down, they can now see and connect with their true emotional selves or their core being. With increased self-

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awareness comes the ability to empathize with others, i.e., connecting with one's own emotions allows one to relate to what the other person is experiencing.

A person's attitude is actually their habits of thought, and Charles Duhigg in "The Power of Habit" [2014] describes the process of developing and changing habits. Because our neo-cortex, or rational mind cannot process all the millions of bits of information we receive every second, habits are formed in the basal ganglia, which is separate from the neo-cortex. This separation is important in the context of changing habits, because it means habits are not effectively changed by information alone. If they were, then "Just Say No" would have been successful. In order for a new behavior to be permanent, the person must believe that change is possible for them, "and most often, that belief only emerges with the help of a group." Pg. 92 "There is something really powerful about groups and shared experiences. People might be skeptical about their ability to change if they are by themselves, but a group will convince them to suspend disbelief. A community creates belief." Pg.85 Especially an emotionally safe community which promotes openness and self-awareness, which leads to developing empathy and higher self-esteem.

The third attitude skill is personal responsibility. With increased empathy and the feeling of connection [and caring] with the other participants, the sense of personal responsibility is enhanced. This personal responsibility extends not only to personal integrity, but to a sense of caring for others. An example of personal integrity is the young man who after attending an AVP workshop, returned to his sex offenders group and for the first time acknowledged that he had raped the woman and it was not consensual. In the AVP workshop, a participant's charges are never discussed, so his charge was not known by the facilitators. One inmate's comment:

"If there is such a thing as a miraculous change in an individual, I can truthfully say that it was during my involvement with AVP that I began to grow from a person filled with hate, anger, and despair, into a person who believes he too is responsible for the protection, preservation and enrichment of humanity."

The combination of attitude change and increased sense of personal responsibility results in a positive impact on the second factor – peers. After AVP, inmates will often no longer associate with inmates who retain their old attitude but will associate more strongly with those who have experienced AVP or who possess a similar positive attitude. This results in a continual reinforcing of the positive values and behaviors promoted by AVP. One inmate's experience:

"I spent most of my 11 years in prison in the hole. I am not a sensitive, caring, understanding individual, but this program has really had an impact on me. During my first basic as a trainer, there were a number of inmates there whom I had been very violent to before. I knew if I was to be a role model, to live AVP, I had to apologize to them for what I had done. It was odd to apologize to someone I had defeated and who had pleaded for his life to me. Some friends got out of maximum for having beat up some correctional officers and came to me to get some action. I explained to them that that type of activity was not me anymore. You could see the hurt in their eyes and it hurts me because I know I cannot do it and I cannot allow them to do it. It is a whole different world, it's different for me. When I was a warrior I fought with all the tools I could fight with, I learned to be the best that I could be. Now to be a warrior for nonviolence, I had to learn the tools of AVP."

This change is not **environment-dependent**, so will generalize to the outside environment when they are released. The change is internal and not dependent of external factors. It is an "inside" job. They take the change with them, because they have changed themselves. A good example of this type of change can be seen when staff were trained in the AVP model and were asked six months later if they were still using the skills learned. Although the sole focus of the training was teambuilding and working with other staff, they reported using the skills with supervisors

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[75%], inmates [74%], family and friends [87%] and co-workers [84%]. [“Experiential Conflict Resolution for Prison Staff,” Feature article in Corrections Today, December 1999.]

The third criminogenic risk factor, personality, contains three components that AVP addresses: trait anger [the tendency to get angry], interpersonal communication skills [listening, assertiveness and conflict resolution] and problem solving skills. When participants improve their attitude and communication skills, they tend to reframe external events as less threatening and open up possibilities for connection. This lowers their trait anger level, and this is not a temporary change. A two year study, published in the “International Journal of Trauma Research and Practice” [Summer 2014] shows the reduction to be large, significant and stable at two years post workshop. Interpersonal communication skills are taught using the experiential training model and problem solving skills by a combination of interpersonal communication skills and Transforming Power [prevention].

Statistics show the impact of AVP on recidivism. In Delaware, where the recidivism rate for “serious crimes” is 71%, a recent study done on AVP graduates showed at three years post release the following rates: 13.5% for felonies, 11.5% for violent offenses and 5.7% for violent felonies. Also at the same prison, inmate disciplinary write-ups decreased 60%.

The impact of AVP on the prison itself is shown in this email from Dr. Dawn Addy, Director of the Research Institute for Social and Economic Policy at Florida International University,

“I was in prison to facilitate a dialogue yesterday and on the way I met with the new Warden of Programs and the new Captain.

I mentioned to the Warden that AVP comes into ECI 5-6 weekends per year and each weekend about 90-100 men go through the training. Over time this had equated to about half the compound having gone through AVP. This kind of large numbers trained has resulted in the formation of a strong non-violent community that supports each other and helps each other out of potentially violent situations.

He was struck by this information and shared with me that he and the Warden were amazed when they reviewed the DOC “Use of Force” report that just came out. They had looked at other level 6 population facilities across the state (basically this is the same population demographics as ECI) and there was a dramatic difference in the use of force for violent incidents. They were trying to figure out what factors were different. He noticed that, “Officers at ECI talk to the inmates more instead of getting up in their face.” But he knew that would not account for such a dramatic difference.

The Captain said he loves working at ECI. “You can walk out onto the compound and an inmate may approach you to discuss an issue he is having, but that is all. At other level 6 facilities you enter the compound and must continuously be watching your back and in all directions in case of sudden attack, much more stressful.”

At ECI they average 1-3 use of force incidents per month. In other level 6 institutions they report 3 or more incidents PER DAY!”

In order to understand the process by which AVP impacts attitude, it may be helpful to explain how the brain works [as we understand it today] and how attitudes are developed. An external [or internal] event or stimulus occurs and the brain first processes it subconsciously in the amygdala, our fight-flight-freeze center which determines if there is danger. If there is danger, the amygdala initiates a very quick response. If there is no immediate danger, the amygdala then sends this emotionally coded information to the hippocampus where it is compared to other recent experiences putting the event or stimulus into context. This process takes half a second to accomplish. Now the emotionally coded information which has been compared with other more

recent experiences is sent to the neocortex where rational thought can be applied and a response is formulated.

Thus, “information processed subconsciously at enormous speed, is compared to patterns already existing in the brain derived from previous experiences. On this basis, the emotional brain decides whether what is happening now is threatening or non-threatening. Only after this filtering process has occurred is information sent ‘up’, if necessary, into consciousness . . . It is the emotions that propel the higher cortex towards deciding on appropriate reaction to a particular situation. We become conscious of a feeling of anxiety, distrust, anger or attraction, and the higher neocortex then has the choice of ratifying or questioning it. That is when thoughts come into play.” [Human Givens by Joe Griffin and Ivan Tyrrell, 2013 page 238] The process by which this all takes place is called “pattern matching,” is emotionally based, and takes less than half a second. This is how attitudes are developed, through experiential learning, not conscious thought. Conscious thought can impact attitudes when experience supports it.

When a person does not feel safe and must be constantly “on guard,” the hippocampus is less able to function properly and the communication between the amygdala and hippocampus diminishes. When this happens, the amygdala becomes the organ of response and the rational mind’s involvement is greatly reduced. This is especially true for a trauma pattern where it can literally get trapped in the amygdala and not be brought to the conscious mind at all. With complex trauma, the neuropathways to the amygdala are so over used, the amygdala increases in physical size and the hippocampus actually decreases in size making its response slower and less effective in setting context and transmitting that to the neocortex. The end result can be PTSD. To reverse this process, the neuropathways to the hippocampus must be strengthened, and this is accomplished when the person feels safe and has less need for the amygdala response.

What all this means is that in order to help people change their attitudes and behaviors, they must feel safe. Otherwise, they will not be open to new experiences and ideas which may conflict with their existing beliefs. When they don’t feel safe they will be focused on their physical environment and the threats that exist and are therefore unable to step back and observe themselves in the environment. Without the capacity to step back and observe, their self-awareness is greatly limited and everything negative that happens to them is someone else’s fault. They cannot take personal responsibility for their actions or thoughts. It is as though they are experiencing tunnel vision.

This is why all successful therapies begin with developing a relationship where the client feels safe and can trust. The National Institute of Corrections, in its publication on Cognitive Behavioral Treatment [CBT], states that in order for CBT to be effective, a positive relationship must be developed between the staff leading the program and the inmates participating in it. When a program is punitive in nature, as is the case with the “interdependent compliance” model where everyone gets penalized for one person’s unacceptable behavior, the outcomes are not good.

In “Preventing Violence,” by Dr. James Gilligan, former Chief Psychiatrist for the Massachusetts Department of Correction, wrote that there were three conditions for violent behavior: shame, which is a necessary, but insufficient condition; lack of empathy; and lack of knowledge of alternative behaviors. Shame is one of the primary characteristics of unhealed trauma. A person feels they are damaged goods and/or that they have a secret they cannot share. To protect themselves they disconnect from others and from their own emotions. They create a persona that is not their true self, but one they think they need to portray to survive. The most effective way to counter shame is to create an environment where they feel safe and can begin to look into themselves. Usually, when this occurs, they like what they see and, thus begins the transformation. They see themselves and their world in a new light, reframed with more positive

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potential. They experience connectedness, so they know it exists and is something desirable, and becomes the motivation to seek more experiences of it. Another result of this is the development of empathy, which has been previously described. Alternative behaviors are learned and they will use them because they are motivated to seek more connection with others. One inmate's comment,

“It made me take a look at how I relate to other people, that I was doing it on a threat to threat basis, and the fact that that is not necessary. We can stand with each other and experience each other without wondering what the other is going to do, what the threat is, being on the defensive. What I like about AVP is that I look at others differently and I look at myself differently. I look in the mirror and I actually like what I see. I like what I've become and what I've become inside.”

When a person who feels shame and has low self-esteem is punished, all it accomplishes is to reinforce their sense of shame. What they need, instead, is to feel a sense of competence, autonomy and relatedness. Or as William Glasser describes, the basic psychological needs of humans are to feel connected [belonging], to feel they have meaning in their lives [are respected and valued], to have control over their lives and to have fun. When all these conditions are met, they are more likely to be psychologically healthy and feel happy. AVP is designed to meet, in part, all of these conditions. One of the most powerful outcomes of experiencing AVP is the development of hope, that the future can be better than the past. For a person who experiences shame and often depression, hope can have a significant positive motivating effect. Hope is a very powerful drug.

There are many programs focusing on employment, substance use disorder treatment, family reunification, financial literacy and housing. These programs are very important and necessary, however it is also critically important to have effective programs that address attitude, peers and personality; and AVP is such a program.