

Treating Post-Incarcerated Offenders With Moral Reconciliation Therapy®: A One-Year Recidivism Study

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Editor's Note: This is a highly abbreviated abstract of a master's thesis from the University of Phoenix.

The primary purpose of this research project was to determine if the systematic steps of MRT completed by a sample of the state of Washington's population of post-incarcerated (PI) offenders affected their behavior, as evidenced by a reduction in their recidivism rate. The rearrests and reincarceration records of a randomly selected group of PI offenders who participated in MRT over a seven month period were examined; similar data of a matched group of PI offenders who did not participate in MRT were examined; and the results of the two groups were compared. The treatment group was comprised of 30 randomly selected male and female PI offenders who participated in MRT at Department of Correction (DOC) field offices in three Washington state counties between February-September 1994. The control group was comprised of 30 matched male/female offenders selected from the same field offices during the same time period. Controls were matched with the treated group for age, gender, ethnicity, and length of sentence. Rearrests and reincarceration data was collected from September 1994 to October 1995.

Average age of the treated

group was 33.2 years as compared to 30.8 years for the controls. The treated subjects attended an average of 22.52 MRT groups and completed a mean of 8.57 steps. Half of the treated group completed all 12 MRT steps. Rearrests and reincarcerations were evaluated separately. Criminal reports on each subject were supplied by the Washington DOC.

Results showed that 90% of the treated group showed no rearrests after MRT participation as compared to 80% of controls. None (0%) of the MRT-treated group were reincarcerated within one year of treatment as compared to 10% of the controls.

Statistical test results supported the project's two main research hypotheses which claimed completion and/or participation in MRT would effect PI offender behavior evidenced by lower recidivism rate. This result collaborated a number of research studies of the positive effects of MRT and/or other cognitive behavior therapies reducing recidivism. A subsequent cost-benefit analysis indicates that the savings of the MRT project to the Washington DOC is considerable.