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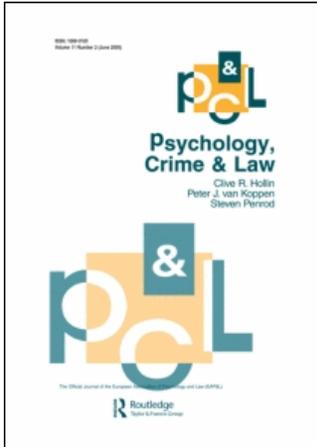
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CRIMINOGENIC NEEDS AND HUMAN NEEDS: A THEORETICAL MODEL

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Over the last two decades, empirical evidence has increasingly supported the view that it is possible to reduce reoffending rates by treating or rehabilitating offenders rather than simply punishing them. In fact, this shift from a punishment to a rehabilitation model is arguably one of the most significant events in modern correctional policy. Criminogenic needs, dynamic risk factors, have been the focus of a considerable amount of research and are viewed as primary intervention targets. Drawing from the correctional, psychological, philosophical, and social policy literature, we distinguish between instrumental and categorical needs. The latter are derived from assumptions about human nature and provide the theoretical grounds for the former, as well as for criminogenic needs. We argue that an enriched concept of needs embedded in the notion of human well being, can provide a coherent conceptual basis for rehabilitation and also avoid the problems apparent in the concept of criminogenic needs. From this perspective, criminogenic needs are usefully construed as the internal and external *obstacles* associated with need distortion. Therefore, they are directly linked to basic need distortion and the absence of the internal and external conditions necessary for a person to lead a fulfilling life. Finally, we outline a possible framework utilising categorical needs and discuss the clinical and policy implications of our perspective.

Keywords: Criminogenic needs; Rehabilitation

INTRODUCTION

Over the last two decades empirical evidence has increasingly supported the view that it is possible to reduce reoffending rates by treating or rehabilitating offenders rather than simply punishing them (Andrews and Bonta, 1998; Cullen and Gendreau, in press; Gendreau and Andrews, 1990). In fact, the shift from a punishment to a rehabilitation model is arguably one of the most significant events in modern correctional policy (Gendreau, 1996). Although it must be noted that this is only true for correctional psychology, as in the broader correctional field interest in rehabilitation has been replaced with an emphasis on offender control (Garland, 2001).

The rehabilitation perspective rests on a number of important assumptions about crime and the characteristics of offenders. First, that crime is caused by distinct patterns of social and

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psychological factors that increase the chances a given individual will break the law. Second, targeting these factors will decrease reoffending rates. Third, that individuals vary in their predisposition to commit deviant acts and this should be taken into account when planning rehabilitation programmes; treatment should be tailored to meet each offender's unique needs (Cullen and Gendreau, in press).

There appear to be two broad models of offender rehabilitation, each committed to changing the characteristics of individuals associated with criminal acts, but possessing a different orientation. These models are not typically differentiated and may even coexist to some degree. The first is concerned with *risk management*, where the primary aim of rehabilitating offenders is to avoid harm to the community rather than to improve their quality of life. From the perspective of this model, while the enhancement of offenders' functioning may be viewed as desirable, it should not be the primary objective of programme developers and policy makers. The relationship between offenders' level of functioning and recidivism rates is an instrumental one: it is a means to the end of reduced risk to the community. In contrast, the second model is concerned with the *enhancement* of offenders' capabilities in order to improve the quality of their life and by doing so, reduce their chances of committing further crimes against the community. By focusing on providing offenders with the necessary conditions (*e.g.*, skills, values, opportunities, social supports etc.) for meeting their needs in more adaptive ways, the assumption is that they will be less likely to harm themselves and others. In this model, the primary end or goal is not the reduction of crime, although it is argued that this will reliably follow from individual well being. The enhancement model is more widely accepted in clinical psychology and its presence in corrections has occurred through the incorporation of clinical psychological models into work with offenders.

We believe that the risk management model has tended to dominate correctional psychology and offender rehabilitation policy (see Andrews and Bonta, 1998; Ashford, Sales, and Reid, 2001; Garland, 2001). Even when the focus has been on offenders' needs, policy makers tend to be concerned with reducing further crimes or the incidence of disruptive behaviour within prisons rather than the enhancement of their well being and capabilities. For example, Ashford, Sales, and Reid (2001) have distinguished between the subjective needs of the offender and the objective needs of the Justice and Correctional system, and Society at large. They make the point that offender needs not linked to reduced recidivism are considered comparatively unimportant. They also argue that such decisions are at least partly normative and reflect the overarching values of the institutions in question. Another example is the notion of criminogenic needs (Andrews and Bonta, 1998), where only those offender characteristics associated with a reduction in recidivism are directly targeted in rehabilitation programmes (see below).

In this paper, we argue that the notion of need should be used to guide the construction of rehabilitation programmes and their implementation. However, we suggest that there is a sense of need that is more fundamental than that currently used to underpin rehabilitation policy in the correctional domain (that is primarily concerned with risk reduction). This understanding of need forges a link between basic needs and human nature and stipulates that effective rehabilitation ultimately requires articulating a view of human well being, albeit in a naturalistic and humanistic manner. In this sense, needs are always embedded in a model of human well being and a view of human nature; they are inherently normative (Clark, 1998; Midley, 1983). The term "normative" refers to values and value judgements concerning the desirability of situations (*e.g.*, a fair distribution of resources), activities (*e.g.*, caring behaviour), characteristics (*e.g.*, self-control, empathy), and objects (*e.g.*, a beautiful picture). A normative judgement reflects an individual's beliefs concerning what is of significance and importance in his or her life and the world and constitutes a standard against which situations and individuals can be evaluated.

We suggest that basing rehabilitation policy on this more fundamental sense of need is entirely consistent with the enhancement model outlined above. First, we will review the most influential theory of need in the correctional literature, the theory of criminogenic needs developed by Andrews and Bonta (1998). After critically examining this theory, we briefly outline the concept of need and then explore the rehabilitation implications of a model of human well being. We finish with a few suggestions about an enriched needs based approach. It is important to note that this paper is not intended to be primarily a critique of the Andrews and Bonta risk-need model of offender rehabilitation. Rather, our aim is to sketch out a theory of offender rehabilitation based on *human needs* and to clarify the relationships between criminogenic needs and human needs.

CRIMINOGENIC NEEDS

Criminogenic needs, as defined by Andrews and Bonta (1998), are dynamic attributes of offenders and their circumstances that, when changed, are associated with reduced rates of recidivism (Andrews and Bonta, 1998). For example, pro-offending attitudes and values, aspects of antisocial personality (*e.g.*, impulsiveness), poor problem solving, substance abuse, high hostility and anger, and criminal associates (Andrews and Bonta, 1998). Thus, criminogenic needs are a subset of factors predictive of recidivism. Other risk factors include static or unchanging factors such as gender, age, and offending history (Andrews and Bonta, 1998). While static factors play an important role in determining initial levels of risk, they are of lesser value in guiding treatment. The fact that they are unmodifiable means they fail to reveal whether a person has changed as a result of treatment, by how much, what has changed or inform us whether an offense is likely to occur. Therefore, the utility of static risk factors is limited once an initial risk assessment has been performed. By way of contrast, dynamic risk factors (*i.e.*, criminogenic needs) can provide clinicians with information concerning the impact of treatment on an individual's level of risk and also indicate where change has occurred. Noncriminogenic needs are dynamic attributes of offenders and their circumstances, which when changed, are not associated with reduced recidivism. For example, low self-esteem, anxiety, personal distress, or group cohesion (Andrews and Bonta, 1998). Andrews and Bonta acknowledge the importance of noncriminogenic needs but argue that priority should be given to targeting criminogenic needs because of their positive impact on recidivism rates. While they do not explicitly state this, the implication is that noncriminogenic needs are *discretionary* intervention targets.

Andrews and Bonta formulate four general principles of classification to guide effective correctional treatment. First, the *risk*-principle, which is concerned with the match between level of risk and the actual amount of treatment received. For example, according to this principle high risk individuals should receive the most treatment, typically at least 100 hours of cognitive behavioural interventions over a three to four month period (Hollin, 1999). Second, according to the *need* principle programmes should target criminogenic needs, that is, needs associated with recidivism and that can be changed. Strictly speaking, criminogenic needs should be detected for each type of crime rather than simply for crimes in general. For example, recently Hanson and Harris identified a number of criminogenic factors for sexual offending which included deviant sexual arousal, intimacy deficits and loneliness, and problems with emotional regulation (Hanson and Harris, 2000). Third, the *responsivity* principle is concerned with a programme's ability to actually reach and make sense to the participants for whom it was designed. In other words, will offenders be able to absorb the content of the programme and subsequently change their behaviour?

Examples of factors that if not taken into account may impede learning include gender, learning styles, ethnicity, and treatment motivation. Finally, the principle of *professional discretion* states that clinical judgment should override the above principles if circumstances warrant it. This principle allows for treatment flexibility and innovation under certain circumstances.

These principles prescribe how treatment should proceed and are intended to provide a coherent framework that will enable policy makers and treatment providers to design effective rehabilitation programmes. In addition to these principles, Andrews and Bonta have identified a number of features of rehabilitation programmes associated with reduced rates of recidivism. This include being: based on learning principles, focused on skill acquisition, structured and time limited, and delivered by qualified and trained staff who work from detailed treatment manuals. (Andrews and Bonta, 1998; Hollin, 1999).

Criminogenic needs are identified empirically through the careful detection of variables that covary with criminal conduct. Subsequent research and intervention programmes that seek to effect changes in these factors can provide further evidence for the utility of targeting them and their functional role in criminal offending. Thus the effectiveness of this approach to offender rehabilitation is dependent on identifying risk factors and developing measures with adequate predictive validity.

Andrews and Bonta suggest that once criminogenic needs have been identified researchers should seek to build etiological theories that aim to explain why these factors are associated with criminal actions (phenomena detection). To this end they have developed a general personality and social psychological model that attempts to integrate the major criminogenic needs within a conceptual framework. Basically, they hypothesise that the tendency to view criminal acts as advantageous is causally related to socioemotional deficits (*e.g.*, poor self-regulation), interaction with delinquent peers, and offence-supportive attitudes, values, beliefs, and feelings. These factors in turn have their origin in family dysfunction, educational failure, and cognitive deficits. Subsequent offending is hypothesised to be maintained and shaped by conditioning and reinforcement mechanisms.

CRITICAL COMMENTS

There is much to admire in the theory of criminogenic needs. It provides an empirically defensible and theoretically elegant framework to guide the design and implementation of rehabilitation programmes in the correctional domain. In addition, the use of the term “need” to direct intervention efforts promises to ground rehabilitation policy in a psychological and normative theory of criminal offending. However, while Andrews and Bonta have developed a useful theory, it does have some weaknesses. The most serious shortcoming in their account of criminogenic needs resides in its formulation. Specifically, we argue that needs can be divided into categorical and instrumental needs, and it is only the former that is capable of providing a theoretically defensible basis for correctional rehabilitation programmes. We will now comment on the problematic aspects of Andrews and Bonta’s formulation of criminogenic needs.

First, the term “criminogenic need” is itself a little odd in the sense that risk factors are not needs in the usual sense. As discussed above, to have a need indicates a lack or deficiency of some kind, a lack of a valued good. Needs are concerned with the attainment of objective goods that sustain or enhance an individuals life, their absence will harm a person in some way or else increase the chances of harm occurring in the future. However, in what sense can criminogenic needs such as impulsivity be said to involve objective goods? It is

strange to speak of a need to behave impulsively. We suggest that this may not be an insurmountable problem for the theory of criminogenic needs if they are viewed as instrumental needs. Under this interpretation impulsivity would be instrumentally related to criminal actions and therefore provides a means to the goals associated with a particular crime. Furthermore, if impulsivity is transposed to self-control or self-regulation then the substantive therapeutic need an offender requires is that of autonomous functioning. Self-regulation then becomes instrumentally related to the more basic need for autonomy and is then a condition for this need to be met, or if you like, an intermediate need related to the more basic one. Therefore, it may be perfectly legitimate and meaningful to speak of criminogenic needs if it is accepted that such talk is merely shorthand for an expanded analysis. Of course, what such an analysis indicates is that if it is meaningful to construe criminogenic needs as *needs*, then it must be possible to ground them in categorical or basic human needs. It is not clear that Andrews and Bonta's approach is capable of this, indicating a serious problem in their theory (see below for a more detailed consideration of this point).

Despite the possibility of defending the term criminogenic need in this way, it is still arguable that they are not even instrumental needs. The claim that impulsivity is instrumentally related to further offending suggests that individuals choose to act in an impulsive manner in order to achieve the further goal of offending. However, it is a confusion to view what is essentially a loss of behavioural control as an intentional object; individuals do not choose to behave impulsively, they fail to inhibit problematic impulses or desires. A more accurate way of understanding the relationship between criminogenic needs and offending behaviour is to say that they are necessary conditions for offending to occur. Thus they are not needs in an instrumental or categorical sense but rather obstacles to need fulfillment. We will return to this issue at a later point.

A final way of saving the notion of criminogenic needs is to view them as 'needs' from a third-person perspective, that is, the perspective of the criminal justice system and practitioners within it. In our view such a locution is simply a way of referring to the *interests* of society and the non offending public rather than fundamental human needs. Such interests may explain why people want to stop offenders from committing further crimes, but they can not ground or generate (on their own) a model of offender rehabilitation. They explain why individuals are *motivated* to treat or punish offenders but do not provide a framework for facilitating the change process. This requires identifying the causal dispositions that generate criminal actions and suggesting ways of altering or modifying them in some way. Therefore, such a reading of criminogenic needs is insufficient to qualify them as "needs" or treatment targets etc.

The bottom up strategy, or "dust-bowl empiricism" as Andrews and Bonta call it, for developing effective clinical theories to guide treatment is misconceived. This refers to the strategy of using statistical analysis to detect needs rather than relying on theory construction or human intuition. We argue that there are always theoretical assumptions underpinning research, even if the research is primarily concerned with phenomena detection, for example, the detection of criminogenic needs (Hooker, 1987). In the development of their theory of criminal offending Andrews and Bonta heavily depend on learning theory with the accompanying assumptions that human nature consists of general learning mechanisms plus drives and some temperamental factors. This theoretical perspective can be contrasted with other approaches such as Deci and Ryan's (2000) need theory or evolutionary psychological models (Tooby and Cosmides, 1992). Both these latter theories accept that the mind has a richer inherited architecture or basic nature that predisposes people to engage in certain activities and to seek certain types of goals. Thus there is a sense in which basic scientific observation and measurement is theory laden in that higher level ideas mediate their application

and subsequent interpretation. We hasten to add that this does not mean that science is purely subjective, or that data does not play a crucial role in forming and testing theories. Critical realism states that we know the world in terms of our best theories but assumes there is a world to know, and that we increasingly converge on true descriptions of the way it works (Hooker, 1987).

The relationship between the four principles underpinning effective treatment is unclear and not systematically outlined. Most particularly, the relationship between risk and need is not really explained. While we acknowledge that assessment of an individual's level of risk is initially determined by consideration of static and dynamic variables, once treatment has commenced criminogenic needs are the major factors of interest. Unfortunately, Andrews and Bonta's formulation of the theory underpinning their four principles of treatment is incomplete and they fail to clarify what determines an individual's range and depth of need. We suggest that offenders' level of risk is plausibly determined by the severity and/or the range of their criminogenic needs. And this indicates that criminogenic needs exist at a more fundamental level and in some sense generate (*e.g.*, by being related to the distortion of fundamental needs), offending behaviour. If this is not the case, then arguably risk and need is essentially the same thing, with the former simply denoting an overall risk category or numerical value and the latter simply the *type* of risk factor. And if they are collapsed in this way then the notion of need becomes interchangeable with that risk and the utility of Andrews and Bonta's theory is severely restricted.

Relatedly, the Andrews and Bonta model does not really provide a conceptually integrated account of the relationships *between* offenders' criminogenic needs. Essentially, each risk factor has its own (statistical) relationship to reoffending and functions somewhat in isolation from the others. There is no real attempt at integration at the level of criminogenic need; needs are simply deficiencies or characteristics, changes in which reduce reoffending. Andrews and Bonta do state via their general personality and social psychological perspective that each of the major criminogenic needs have their own causal relationship to offending behaviour or more accurately, to the positive appraisal of offending behaviour. However, the relationship of these factors to each other is not considered, just their convergence on crime supportive appraisals. We suggest that conceptual integration is an epistemic virtue and any theory lacking this attribute is weakened by this fact (Hooker, 1987). What is missing is clarification of how needs are embedded in individuals and/or related to individual lives.

In correctional rehabilitation policy there is an acknowledgement that factors such as vocational achievement and community reintegration are important components of rehabilitation of the offender, however their relationship to more "psychological" components is unclear. In fact, the tendency of rehabilitation programmes to focus almost entirely on psychological factors such as antisocial attitudes, social skill deficits, impulsivity, poor problem solving and empathy deficits, indicates that social interventions are considered by therapists to be of peripheral significance. At any rate, their relationship to the behaviour change process is not clearly delineated and therefore important aspects of the rehabilitation process are not coherently linked. While the theory of criminogenic needs is able to incorporate a wide range of social and vocational factors, most attention has been paid to psychological and behavioural variables. Thus, a criminogenic need perspective does not offer a theoretically integrated view of the rehabilitation process.

From a need perspective, there is a lack of attention to the specific conditions related to criminal actions or consideration of how such conditions might result in a criminogenic need. Why would a failure to develop autonomy and therefore effective self-regulation skills result in impulsive, criminal behaviour? In what way does a lack of interpersonal trust and intimacy skills translate into sexual offences, or any type of offences? There is simply a

lack of detail concerning the causal mechanisms hypothesised to generate criminogenic needs, and ultimately, offending behaviour. Because the conditions resulting in need distortion are not clearly articulated, the theory of criminogenic needs fails to direct therapists to plausible and specific treatment targets.

Andrews and Bonta imply that noncriminogenic needs are discretionary treatment targets and that rehabilitation efforts should concentrate primarily on criminogenic needs. However, we argue that some noncriminogenic needs like anxiety, low self-esteem, and psychological distress may impede the establishment of a therapeutic alliance with offenders. Therefore, they should be necessarily targeted in order to facilitate the learning of new skills or competencies. In other words, before persons are capable of acquiring coping skills, prosocial attitudes etc they need to be motivated to participate in the whole process of therapy (responsivity principle!). And this means that therapists should intentionally aim to increase offenders' sense of safety, esteem, and well being. In addition, negative mood states can impede the processing of information and impair learning in therapeutic contexts. Either way, we argue that some noncriminogenic needs are necessary intervention targets and in a sense, function as conduits for the delivery of effective cognitive behavioural treatment.

Another criticism concerns the relationship of criminogenic needs to values or normative issues. The presence of criminogenic needs (*i.e.*, risk factors) increases the likelihood that an offender will engage in harmful behavior in the future. Researchers detect dynamic characteristics and make normative judgments that such factors or predictors are likely to result in harmful outcomes (*i.e.*, crime). Targeting these factors in treatment is thought to result in less harm, and greater good, to society, and possibly for the offender. "Good" and "bad" are value laden terms and therefore the criminogenic need model does presuppose normative judgements concerning what is beneficial to the community and to the offender. In addition, different types of criminogenic needs are related to the frustration of distinct primary needs and therefore are instrumental in causing specific harms. For example, impulsivity may compromise a person's ability to secure the goods associated with productive employment while antisocial attitudes may reduce his or her chances of establishing deeply satisfying social relationships. In order to specify the type of harm likely to occur it is necessary to have in mind a particular type of primary good and also to be cognizant of the consequences of the impact of that good's absence or deprivation on the community and the offender. The fact that criminogenic needs are partially defined in terms of their relationship to harmful and beneficial outcomes (reduction of crime, increased security etc) indicates they are not simply factual constructs.

We argue that criminogenic needs are range riders, they tell you that there is a problem but do not tell you what to do or how to do it. For this, you require additional substantive theories about the need in question, for example, impulsiveness. Such a theory will spell out how to effect change in the relevant mechanisms that cause impulsiveness etc. It will also explain how the particular criminogenic need in question is generated and what mechanisms are currently contributing to its maintenance. A policy that simply states that criminogenic needs should be primary treatment targets without invoking additional theory and clinical models will not result in effective treatment. While Andrews and Bonta have recognized this and tried to construct a broad psychological theory of criminal conduct, their theory is essentially a framework and does not provide clear descriptions of the relevant causal mechanisms that generate criminogenic needs.

Andrews and Bonta appear to conflate (or equivocate between) two senses of need and therefore run the risk of not appreciating their important differences and possible contributions to the process of offender rehabilitation. These are instrumental needs and basic or categorical needs (Wiggins, 1991). *Instrumental needs* refer to those needs whose value depends entirely on their contribution to a further goal or end. For example, "The Melbourne

Storm need to strengthen their defense if they are to win the league” or “Peter will need to learn how to control his anger if he is to get early parole”. The requirement to act depends on the motivational force, or value, of the end for which the need is necessary. On the other hand, *categorical needs* derive their value from the needs themselves; they are not means to a further, more fundamental, end. When a categorical need exists, then in the circumstances there is no realistic alternative but to act in a certain way. For example, “Peter needs to eat now because he is starving” or “Mary needs to be loved”. To fail to meet a categorical need would result in harm to a person. The need itself provides powerful reasons for certain actions and the value of fulfilling a categorical need is overriding. Categorical needs are derived from the nature of human beings and in a sense express our basic potentialities and properties. They are essentially the kind of needs described by Deci and Ran (2000) as innate or basic needs and Doyal and Gough (1991) as universal needs.

In order to be an optimally functioning human being we need appropriate quantities of food, warmth, water, autonomy, love, and stimulation. In the absence of these basic goods human beings are not able to function well and may fail to develop into mature and effective individuals. Categorical needs in effect are *constitutive* of what it means to be a (optimally functioning or fulfilled) human being and their value rests entirely on the intrinsic value of human beings. Thus loving, acting autonomously, and mastering the world not only enable human beings to develop into their best possible form, they actually make us what we essentially are. They are ends in themselves. The value of meeting a categorical need is more fundamental than meeting instrumental needs. In fact, instrumental needs ultimately derive their value from categorical needs.

As stated earlier, criminogenic needs can be viewed as means to the commission of a crime; basically they represent the social and psychological conditions necessary for a crime to occur. For example, impulsiveness, and offense supportive cognitions and values. However, we argue that instrumental needs ultimately should be anchored in categorical needs (and human nature) otherwise they “float” above the world and make no contact with our embodied biological and social selves. Without grounding in fundamental human needs they simply collapse into risk factors and thus need talk is at best elliptical (*i.e.*, can be unpacked into means-ends relationships) or at worst vacuous. The latter alternative would mean accepting that criminogenic needs are not really human needs, but rather dynamic risk factors with no direct causal link to human nature or fundamental psychological processes.

However, Andrews and Bonta’s attempt to specify a psychology of criminal conduct indicates that they are using the concept of need in a categorical sense, at least minimally. Thus when basic needs are frustrated individuals may fail to develop the competencies necessary to live a flourishing and productive life. A careful reading of the theory underlying the notion of criminogenic needs points to this being a real possibility. Therefore, the problem is not so much a failure to (tentatively it must be acknowledged) ground criminogenic needs in basic human propensities, but more the lack of a systematic consideration of categorical or basic human needs and their relationship to offending behaviour.

THE CONCEPT OF NEED

Background

In recent times there has been a renewed interest in the concept of need in psychology and social policy. Doyal and Gough (1991) have developed a social theory of need and argue that

human beings have two universal needs, health and autonomy, which people must satisfy in order to avoid harm. Both these needs they viewed as reflecting the fact that we are living and social beings with a self-directing or potentially self-directing nature. Their theory acknowledges that particular groups have particular needs. People with disabilities, along with women and groups subject to racial discrimination, are identified as potentially being in this category (Olive, 1996). Members of such groups are commonly subjected to additional threats to their health and autonomy and as a result may require additional and specific procedures in order to address these problems. Doyal and Gough contend, however, that the basic needs of health and autonomy remain essentially the same for all people. Theories of human need that claim the existence of universal basic needs imply a threshold or standard of need satisfaction. It has been questioned whether it is plausible to maintain a universality of need position while at the same time recognising that people and cultures do differ in their beliefs about what need satisfaction entails in practice (Wetherly, 1996). Bradshaw (1994) argued that Doyal and Gough's theory does not specify the level of human development that is being aimed for and as such has limitations in being able to be the basis for social policy.

From a psychological perspective, Deci and Ryan (2000) have developed the Self-Determination theory of needs, which states that human beings are inherently active, self-directed organisms who are naturally predisposed to seek autonomy, relatedness, and competence. *Autonomy* refers to individuals' propensity to self-regulate and organise their experiences and to function as unified, integrated beings. *Relatedness* refers to individuals' propensity to establish a sense of emotional connectedness to other human beings and to seek the subsequent goals of feeling loved and cared for. *Competence* refers to the propensity to establish a sense of mastery in ones environment, to seek challenges and to increasingly master them. They define need as "innate psychological nutriments that are essential for ongoing psychological growth, integrity, and well-being" (p229). Human needs outline the conditions essential for psychological well being and fulfillment and individuals can only flourish if they are met. The failure to meet the three basic needs for autonomy, relatedness, and competence will inevitably cause psychological distress and result in the acquisition of maladaptive defences. In other words, thwarted basic needs result in stunted lives, psychological problems and social maladjustment. Under these circumstances individuals acquire substitute needs that give them *some* degree of relatedness, competence, and autonomy. However, the goals associated with these proxy needs are likely to result in a poorly integrated self, ultimately frustrating and unsatisfying relationships, self-esteem disturbances, and a sense of personal helplessness. The fulfillment of all three fundamental needs is a necessary prerequisite for living a deeply satisfying and fulfilling life. Additionally, the exercise of basic needs is constitutive of human nature and, in part, defines who we are; they are not means to some other, more fundamental end. Deci and Ryan argue that in order to experience a sense of enduring well-being all three needs have to be fulfilled; social conditions that pit one need against the other are likely to result in defensive motives and the development of substitute needs. The outcome of this forced accommodation is reduced levels of well being.

Doyal and Gough, and Deci and Ryan, argue that needs have their origins in human nature and all things being equal, arise naturally in the course of development. In other words, they are part of the natural architecture of the human mind and require certain conditions in order to be met. These conditions include a responsive environment (*i.e.*, individuals, resources, experiences etc.) and individuals' possession of certain competencies, skills, and values. If these conditions are missing then individuals may "engage in psychological withdrawal or antisocial activity as compensatory motives for unfilled needs" (p229, Deci and Ryan, 2000). Basic needs are associated with a multitude of intermediate or instrumental needs that derive their potency or value, from these more fundamental concerns.

Toward an Enriched Concept of Need

Despite the contentious nature of the concept of need, we argue that it does have utility in the rehabilitation area. We support the existence of some basic or universal needs and view it as partially a normative concept, one that does not directly denote a mental or psychological state. Rather, needs are concerned with the attainment of personal goods that sustain or enhance an individual's life (Braybrooke, 1987; McClosky, 1976; Thompson, 1987; Willard, 1987). Failure to meet needs is likely to result in harm and/or increase the chances of harm occurring in the future. Thus needs reflect values, what constitutes personal goods in the sense of valued goals, for example, relatedness, autonomy, and competence. True, genuine needs also point to the conditions necessary to achieve goods and their associated goals. We agree with Deci and Ryan that needs have their origins in human nature, but suggest that this fact is not sufficient to qualify them as *basic needs*. A further step is required that stipulates that certain propensities of human nature, for example, to establish close relationships or a sense of autonomy, are judged to be of significant value and will result in individuals living fulfilling and well-balanced lives (Braybrooke, 1987; Thomson, 1987). Alternatively, failure to meet such needs will result in harm (e.g., social isolation or poor self-esteem) or the increased likelihood of harm in the future. In fact, the tendency to view needs as drive states or motives is evident in the majority of psychological theories of needs. This is a mistake: basic or fundamental needs are normative concepts although they also refer to conditions of fact, for example, the propensity to seek intimate relationships (Thomson, 1987). We will argue below, that the concept of need should be embedded within a broader model of human well being; it has both normative and factual components.

To have a need typically indicates a lack or deficiency of some kind, a lack of a significant good, or at least indicates that such a lack would be harmful. In addition to requiring an object or response to achieve the goal of a need (e.g., food), certain conditions must also exist. These conditions may be situational (e.g. an opportunity), psychological (skills, information) or refer to material objects (e.g., food). Need claims receive their normative force from the value or desirability of the primary goal.

It is necessary to distinguish needs from wants or conscious desires. What a person wants always depends on their descriptions or beliefs while needs are not reliant on conscious understanding in this sense. For example, a person may want water but not H₂O; such an individual may lack the knowledge that the terms "water" and "H₂O" refer to the same thing. Additionally, it is possible to be misled about what you actually need, while always clear about what you want. For example, an individual may want sugar but *need* insulin. Therefore, wants reflect an individual's preferences and may or may not be related to his or her needs. The meeting of a person's needs is essential in order to avoid serious harm (physical or psychological), however a failure to satisfy wants may be of trivial consequence.

Needs are *objective* and independent of individual preferences and *universal* in sense that the conception of serious harm resulting from failure to be met is same for everyone. Although in practice needs can be met in a wide variety of ways that ultimately depends on individuals' unique constellation of abilities, circumstances, and opportunities. In addition, we suggest that there are *instrumental* and *categorical* needs (see above), with the latter motivating individuals to engage in preferred types of activities and having their basis in the shared nature of human beings.

Thus, we define psychological needs in a similar way to Deci and Ryan (2000), as propensities for engaging in certain activities that are essential for human psychological growth, fulfillment, and optimal functioning. We believe that psychological needs for relatedness, autonomy, and competence are basic or categorical needs but accept that any specific list is always conceptually related to theorists' understanding of human nature and normative

theories. For our purposes, it is not essential to arrive at a definite set of basic or categorical needs, however we acknowledge that this is a requirement that need theorists have to meet in a given substantive context. For the purposes of this paper we will follow Deci and Ryan and accept that there are at least three basic human needs: competency, autonomy, and relatedness. This decision is based on our judgement that their self-determination theory is the most comprehensive psychological theory of needs currently available, and secondly, because it is buttressed by an impressive array of empirical research. Although it must be noted that their theory has to be supplemented by normative judgments concerning the relationship between basic psychological propensities and human well being, and the avoidance of harm.

Human Well Being

As stated above, arguably basic or categorical needs can only be appealed to against a backdrop of assumptions about human nature. In this sense, needs are always embedded in a model of human well being and a view of human nature; they are inherently normative. Needs should be integrated into an overall view of what constitutes a fulfilling and/or satisfactory life (a normative ideal). A conception of human well being is a coherent vision of what constitutes the good life for individuals, although we are not committed to the idea that there is only one type of fulfilling or valuable life (De Uyl, 1991; Rasmussen, 1999). Rasmussen has developed a view of human well being (or "flourishing") that contains a number of interrelated features. First, human goods are viewed as objective and tied to certain ways of living that if pursued involve the actualisation of potentialities that are distinctively human. Second, human well being comprises a number of basic goods that contribute to it, but that are also worthwhile ends in themselves. For example, knowledge, health, and intimate relationships contribute to a happy or fulfilling life but are intrinsically valuable in themselves. In addition, when we love, seek to understand and function autonomously we are expressing our basic potentiality as human beings; they are natural ends derived from our basic nature. To illustrate this point Rasmussen uses the analogy of golf where putting is an activity within the game of golf, but when a person is putting he or she is also *playing* golf. Third, human well being is individualised and only exists in relation to a person's particular set of circumstances, abilities, and opportunities. The basic goods that comprise human well being cannot be read off human nature like some kind of recipe and combined in the same way for all individuals. Different people will require slightly different weightings of the basic goods or valued activities, although all will have the same set of basic goods. The set of generic goods will typically include such things as health, knowledge, creativity, friendship, autonomy, but the actual mix for each individual will be relative to his or her abilities, circumstances, personal history, and social supports. Thus, there is no such thing as *the ideal* life or model of human well being *per se*, there are multiple possibilities. Fourth, human well being is a self-directed activity and therefore springs from each individual's own choices and effort; it cannot be a result of factors beyond the control of the person in question. Finally, because human beings are naturally social animals any kind of flourishing life can only be achieved in a social context. In other words, individuals are mutually interdependent and can only achieve personal goods if others provide them with the necessary social, physical, and psychological nourishment.

From our perspective, the basic goods constitutive of human well being are derived from categorical or basic needs, and these needs are essentially expressions of human nature. Therefore, human well being is the normative gloss on basic human propensities to engage in certain kinds of activities. A model of human well being stipulates or recommends a certain kind of life for individuals and in its application to individual lives provides a plan

for living well that takes into account the skills, temperament, opportunities, and social context of each person.

A FRAMEWORK FOR NEEDS BASED INTERVENTIONS

We believe that the concept of need, suitably enriched, has heuristic value for researchers and clinicians. Andrews and Bonta have done a good job in articulating the role of criminogenic needs in the rehabilitation process. However, we argue that by failing to fully explore the ramifications of the need concept they are unable to conceptually ground the notion of criminogenic needs, and additionally, link the normative and factual dimensions of rehabilitation. Drawing from the work of theorists in social policy, psychology, and philosophy, we hope to demonstrate that the notion of basic or categorical need, suitably located in an understanding of human nature and human well being, can provide guidance for program developers, clinicians, and researchers.

We accept that our theory is crucially dependent on certain assumptions, namely: there is a human nature that has evolved over time; there are natural goods (objective, valued outcomes) that arise from human nature and which have their origin in basic human needs; that the concept of need is a normative one; human beings are by nature self-organising entities that seek integration and fulfilling lives; the failure to meet basic human needs will result in social maladjustment and problematic behaviour; and finally, values and facts are inextricably linked, they are two sides of the same coin. While all of these core assumptions are contestable, we believe that they are consistent with current empirical research and philosophical and psychological theory. For example, evolutionary psychologists regard the human mind as an information-processing device that evolved over millions of years to meet specific environmental challenges (Barkow, Cosmides and Tooby, 1992; Buss, 1999). Thus our minds and their information processing mechanisms are just as much products of the evolutionary process as our bodies. From a philosophical perspective, Arnhart (1998) argues that “the good is the desirable... human ethics is natural insofar as it satisfies natural human desires” (p29). He further adds that “I call these desires natural because they are so deeply rooted in human nature that they will manifest themselves in some manner across history in every human society” (p29).

We do not have the space to mount a defense of each assumption at this point but hope to demonstrate their value in the following discussion. We will now unpack our argument more carefully.

Human Well Being, and Human Needs

The major construct driving rehabilitation should be that of human well being. A conception of human well being will specify the various goods (*e.g.*, intimacy, health, autonomy, creativity, knowledge etc) naturally sought by human beings, the circumstances and conditions necessary to secure these goods, and the possible instantiations of such goods in concrete lives. At the heart of a model of human well being will be a set of basic or categorical needs, that in conjunction with a person's circumstances, abilities, and opportunities, ultimately determines the degree of satisfaction with his or her life (see Fig. 1). In our understanding of basic needs, they are core aspects of an inherited human nature that have evolved over time (Deci and Ryan, 2000). Categorical needs, once suitably clarified, explain why certain activities are sought by human beings and what happens when need fulfillment is thwarted or disrupted. We are born with propensities, along with other factors, to seek

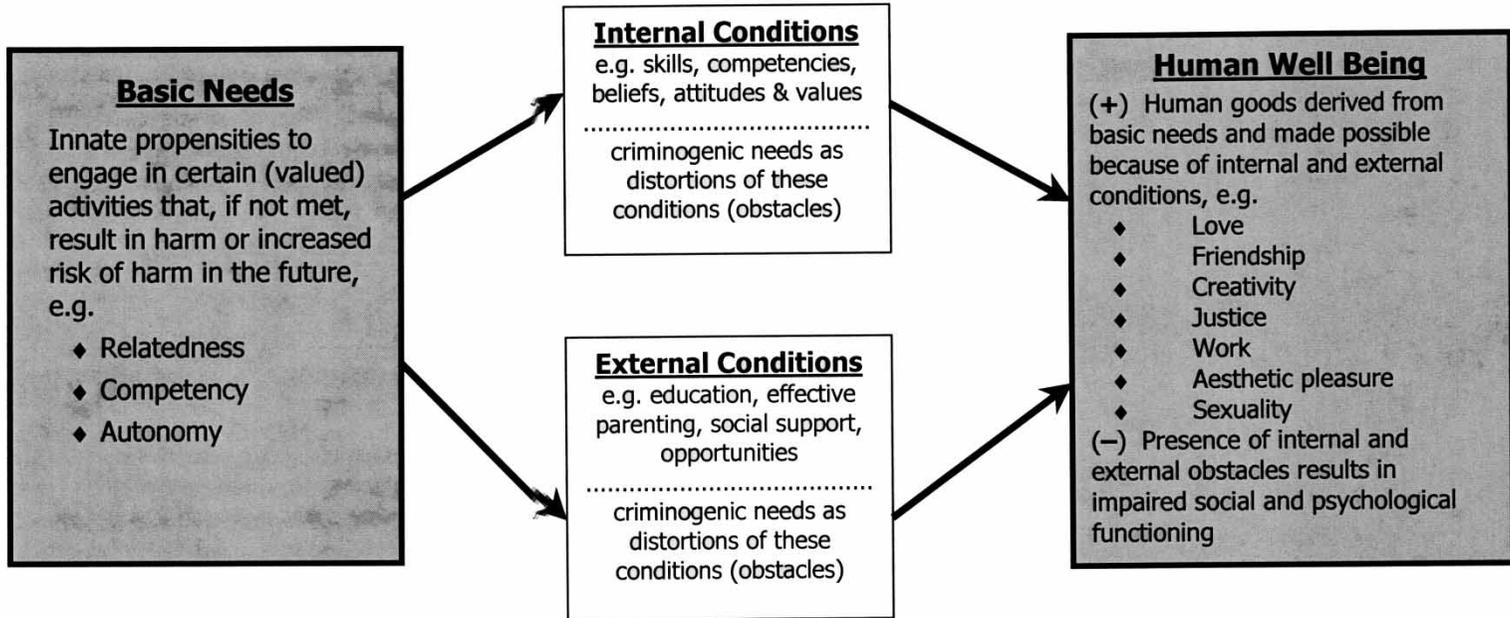


FIGURE 1 A framework for needs based interventions.

intimate relationships, establish a sense of competence and achievement, and to flourish when functioning in an autonomous and self-directed manner.

Instrumental needs provide the link between these deep-seated propensities and the everyday world. They specify what is required in different domains to meet our goals and desires, and therefore outline the steps we should take to do this. For example, the need for relatedness might be translated into distinct strategies and ultimately concrete steps for establishing and maintaining intimate relationships. There are different levels of instrumental goals, ranging from broad strategies such as always emotionally supporting a partner to actually demonstrating physical affection. Thus, instrumental needs derive their meaning and significance from the categorical needs that underpin them.

The basic needs at the center of a model of human well being require *external* and *internal* conditions for their fulfillment, for example, adequate parenting, opportunities to learn and make independent decisions, and the possession of skills necessary to establish intimate relationships. Knowledge of the internal and external conditions for need fulfillment are arrived at from what we know about basic human dispositions and the circumstances necessary for their cultivation and development. For example, the capacity to be self-directive or to establish close, supportive friendships. The various goods or valued activities that typically comprise a life (*e.g.*, health, knowledge, creativity, and friendship) are only possible if basic needs are being met. Failure to possess the necessary conditions for satisfying basic needs will result in their distortion, just as the failure of an acorn to receive adequate nutrition and growing conditions may result its failure to thrive and develop its potentialities. The growth may be distorted, incomplete or the tree may even fail to survive its early years. Similarly, if a human being lacks the conditions necessary to meet his or her basic needs for important goods such as physical health, psychological autonomy, and social intimacy, growth will be distorted and the person seriously harmed. For example, a lack of autonomy, inability to trust, or poor decision-making abilities will restrict individuals' capacity to meet their basic needs in optimal manner. They will fail to develop their potentialities and to function as a mature, "good" member of the natural category human beings (Den Uyl, 1991; Wiggins, 1991).

When confronted with such obstacles, individuals attempt to satisfy their basic needs in the best way they can, resorting to defensive strategies and the development of substitute or "proxy" needs. However, such accommodations distort development and typically result in compromised and impaired functioning (for research evidence see Decci and Ryan, 2000). For example, close interpersonal relationships might be characterised by avoidance of personal disclosure and emotional withdrawal. In these circumstances, individuals may be vulnerable to mental illness, engage in antisocial behaviour or experience some other type of harm.

Human Well Being and Criminogenic Needs

An enriched theory of needs is able to explain how criminogenic needs are interrelated and provide a theoretical grounding for the empirical work of Andrews and Bonta. Independently of the question of measurement strategy, criminogenic needs are usefully construed as the internal and external *obstacles* associated with need distortion. Therefore, they are directly linked to basic need distortion and the absence of the internal and external conditions necessary for a person to lead a fulfilling life. From this perspective, criminogenic needs are not actually needs themselves. In a sense, they resemble symptoms in the psychopathology area, they are indicators of maladaptive functioning. Thus, we suggest that criminogenic needs arise from frustrated basic human needs and involve the acquisition of proxy goals and their accompanying dysfunctional beliefs and behavioural strategies.

We will now briefly consider three criminogenic needs (impulsivity/antisocial personality, antisocial attitudes, and antisocial peers) and discuss their relationship to one of the three basic human needs of autonomy, relatedness, and competency (Deci and Ryan, 2000). While all of the basic needs are likely to play a role in the emergence of criminogenic needs, for the purposes of this discussion we will only highlight some of the hypothesised relationships.

Impulsivity is one of the core features of an antisocial personality and its presence indicates that an individual's ability to function autonomously has been seriously compromised. The psychological (*i.e.*, internal) conditions necessary for the development of autonomous functioning includes the capacity to inhibit urges and impulses, awareness of alternative sources of reward and values and goals that support the delay of gratification. Essential external or social conditions include the presence of appropriate role models during early development, opportunities to make decisions concerning preferred activities, and reinforcement for delaying desire gratification. The absence of these internal and external conditions would result in poor self-regulation skills and subsequent difficulty in adapting to the demands of adult life. Thus, one of the core components of autonomous functioning would be missing or impaired and an individual would be vulnerable to social rejection, failure and antisocial behaviour. Among other things, therapy should involve helping the offender to acquire strategies for managing impulsive behaviour.

The criminogenic need of antisocial attitudes is likely to be associated with all three basic needs, depending on the nature of the crime. For example, with sex offenders the basic need to establish supportive, intimate relationships is likely to be particularly important. The internal conditions necessary for the meeting of this need include the ability to trust other individuals, an awareness of one's own emotions and internal life, and the skills to communicate desires and needs to another person. External or social conditions necessary for this basic need to be met would include the availability of potential partners and friends (*i.e.*, other people being attracted to the offender), a secure and loving childhood and opportunities to spend time with another individual. The absence of these internal and external conditions would make a person vulnerable to experiencing emotional loneliness and to subsequently develop a maladaptive interpersonal style and distorted needs. Such an individual might confuse intimacy needs and sexual needs and acquire beliefs and attitudes that legitimise sexual offending. For example, view children as sexual beings or the world as a dangerous place, implicit theories that would arguably distort the perception of interpersonal encounters and increase the likelihood of behaving in a sexually abusive manner. Therapy would need to include helping the offender to accept responsibility for his actions, learning to interpret the behaviour of children in a less sexualised manner, and learning to trust other people.

Associating with delinquent peers could conceivably be associated with difficulty meeting needs for relatedness and competency. Concerning competency, a history of sustained academic failure might leave an offender feeling inadequate and either blaming others or himself for this state of affairs. Internal conditions necessary for the fulfillment of the need for competency would include intact basic cognitive skills (*e.g.*, attentional control, problem solving), a robust sense of self-efficacy and personal control, and the ability to effectively manage strong affective states, such as anxiety. Relevant external or social conditions include history of graduated exposure to challenging tasks, the opportunity to attend school, educational accomplishments, and supportive and caring family and peers. The absence of these conditions may result in a tendency to withdraw from cognitively demanding situations and either a profound sense of personal inadequacy or a hostile, blaming attitude toward other people. These factors may cause an offender to mix with others who are less rejecting, or at least more like him; antisocial peers. Of course, the propensity to seek interpersonal relationships is also a consequence of the basic need for relatedness. Relevant therapeutic

targets would include cognitive skills and problem solving, attitudes toward the self and others, and emotional regulation skills. It is interesting to note that from this perspective self-esteem is only indirectly related to the need for competency. Self-esteem could either be low or high depending on the particular adaptation made by the offender (*i.e.*, blaming the self versus blaming others for failure). In addition, the important issue is not so much a person's level of self-esteem, but rather the particular adaptations chosen by the offender—the degree of need distortion.

In the above analysis, we have attempted to explain why criminogenic needs are created and to outline how they can emerge from a failure to meet someone's basic needs. It is also clear, that this way of accounting for criminogenic needs can provide specific directions for therapists. A further advantage is that by taking into account all the basic needs, it is possible to infer the (distorted) conception of human well being adopted by an offender. In this model, all the basic needs function along side instrumental needs and psychological defences to offer viable ways of living to the offender. In every instance offenders, like the rest of us, are seeking to optimise the achievement of basic goods in their lives taking into account their personal circumstances, opportunities, abilities, and values (via the meeting of needs etc). It is when needs are frustrated and distorted that individuals become vulnerable to personal tragedy and social dislocation.

Rehabilitation Implications

Accepting that the concept of need is at least partially normative has important implications for rehabilitation. There are at least three important foci where values or goods are clearly evident. First, with respect to the idea that basic needs contribute to human well being, where this idea is unpacked with respect to specific needs and the kind of life that optimally expresses them. Second, the conditions necessary to facilitate need fulfillment become value laden to the extent that they are necessary components in obtaining valued outcomes. Third, the focus on rehabilitation within an enhancement model is a positive one and is concerned with constructing a picture of the best possible kind of life for an offender, taking into account his or her capacities, temperament, social supports etc. This model integrates values and facts in the sense that the aim is to remove the obstacles, and create the conditions necessary for the offender to live a better kind of life. We argue that from a need perspective, creating the most fulfilling life possible, and living a nonoffending lifestyle, amounts to the same thing (see below).

The rehabilitation process is crucially dependent on identifying the internal and external obstacles that have been thwarting an individual's ability to meet his or her fundamental needs. These may be defensive strategies, personal and vocational skill deficits, maladaptive attitudes and beliefs, and lack of social support and integration. The basic concept that should drive rehabilitation is that of human well being and its component notion of categorical needs and basic goods. As stated above, a conception of human well being should outline the basic goods to be instantiated in good lives and the range of specific forms they can take (for a lucid discussion of this issue see Kekes, 1989). The ordering or relationship between the various goods should also be described and the internal and external conditions necessary for their attainment noted. (Recall that basic goods are derived from categorical needs and the conditions necessary for their satisfaction.) The conception of a possible good life for an offender should also include a concrete understanding of the possible ways of living that are realistic for him or her. It should take note of each offender's capabilities, temperament, interests, skills, deep commitments (*i.e.*, basic value system and preferred ways of living in the world, for example, as a teacher or provider), and support networks. Thus, psychological, social, vocational, and environmental factors are all explicitly incorporated within a model of

human well being in a rehabilitation context. Once the obstacles etc (*e.g.*, skill deficits) have been identified, case managers and clinicians develop individual treatment plans addressing issue of skill deficits and environmental management etc. The emphasis is on the establishment of the capabilities and skills needed to met each offender's basic needs and therefore to increase the chances of him or her living a good life, that is, one characterized by the instantiation of basic goods or valued outcomes. These include friendships, intimate relationships, rewarding employment, leisure time, self-respect, a sense of meaning and purpose, creativity etc. This is in stark contrast to most current treatment programmes for offenders where the focus is on alleviating problems, or diminishing risk, rather than enhancing well being (Hollin, 1999). The latter goal is achieved through using a conception of possible good lives to guide treatment and to integrate the various strands of case management and rehabilitation (Hollin, 1999; Kekes, 1989). As stated above, criminogenic needs represent obstacles thwarting the everyday expression of basic needs. For example, impulsivity represents the absence of self-control and self-regulation skills, necessary conditions for meeting the need of autonomy. Again, associating with criminal associates suggests difficulties in establishing an adaptive sense of relatedness and intimacy.

In the well being model there is no real distinction between psychological and social or vocational factors, given the basic needs hypothesised to be present in each human being, such divisions are viewed as artificial and misleading. Possible good lives integrate all aspects of a person's nature, and each factor is dynamically related to all the others. The core rehabilitation construct is that of human well being or more accurately, a possible flourishing life post rehabilitation for an offender. From a conception of human well being it will be clear what conditions need to be met in order for a (particular) person to achieve the personal and social goods embodied in a fulfilling life. These will typically include the acquisition of cognitive skills, values that support prosocial behaviour, social and intimacy skills, empathy for others, vocational and educational competencies, and the motivation to live a different kind of life. In reality, it may only be possible to increase the above competencies and opportunities slightly and therefore offenders may always be faced with inherent limitations in their lives, it may not be possible to fully develop their potentialities. The possibility of human well being is always offender-relative and dependent on each individual's circumstances, histories, opportunities, talents, and skills.

An important question concerns the issue of why some internal and external obstacles result in antisocial behaviour (criminogenic needs) while others culminate in psychological problems and distress (noncriminogenic needs). We suggest that the explanation will vary according to the type of crime and the degree too which it can be explained psychologically. We accept that some offending behaviour is primarily the result of strong social or situational factors and may not be related to need frustration. However, we suspect that in some of these instances groups may possess attitudes and values that predispose them to antisocial behaviour. If this is so, then it is reasonable to assume that some degree of need distortion and accommodation has occurred. In cases where crimes appear to be partly the result of psychological factors, we argue need frustration is involved. In addition, our theory would imply that the content of (or information associated with) the internal and external obstacles would either orientate individuals towards or against others and their social environment. The particular outcome would be dependent on the specific type of accommodation adopted by the person in question and the opportunities afforded by his or her social environment. For example, if someone blamed other people for his or her misfortunes then he or she would be more likely to become chronically angry, and all things being equal, commit an offense. Or again, an inability to function autonomously could be the result of extreme unassertiveness or marked impulsivity. Both forms of need distortion or accommodation could result in crimes or psychiatric problems depending on the match between the individual

and his or her environment. Of course, whether a crime is committed is partially determined by institutions responsible for monitoring rule compliance and defining what acts are criminal, and how offences should be managed (Garland, 2001). Clearly, more work is needed to fully detail the possibilities for different types of crime, a task that we are currently working on but do not have the space to outline here. The point is that it should be possible to develop a needs based theoretical account of why some internal or external obstacles lead to offending behaviour and others to psychiatric or psychological problems.

As an aside, the needs perspective rather nicely integrates sociological criminology with correctional psychology, each subdiscipline simply focuses on different obstacles or conditions associated with need frustration. Additionally, the normative component inherent in the human well being model links both aspects of criminology with correctional social policy.

CONCLUSIONS

In this paper we have developed a needs based framework to further the understanding of the causes of crime and to guide the assessment and rehabilitation of offenders. In our theory the goals and desires of individuals are partially determined by their fundamental interests and concerns, that is, their basic needs. Basic needs are usefully construed as innate propensities to engage in certain activities that, if not met, result in harm or increased risk of harm in future. Examples of basic or categorical needs are relatedness, autonomy, and competency. Whether or not basic needs can be met in a manner that will promote an individual's well being depends crucially on the existence of specific internal and external conditions. Internal conditions refer to psychological characteristics such as skills, beliefs, attitudes and values. External conditions refer to social, cultural, and interpersonal factors that facilitate the development of the above psychological characteristics and include effective parenting, education, vocational training, social supports and the opportunity to pursue valued goals. Criminogenic needs are associated with the distortion of these conditions and can be viewed as internal or external obstacles that prevent basic needs from being met in an optimal manner. Human goods reflective of a fulfilling lifestyle are derived from, or made possible by, the meeting of basic psychological needs and the possession of the necessary internal and external conditions. These goods include friendship, enjoyable work, loving relationships, creative pursuits, sexual satisfaction, positive self-regard, and an intellectually challenging environment.

The presence of internal and external obstacles results in impaired social and psychological functioning and therefore a less fulfilling life. Rehabilitation should focus on identifying the various obstacles preventing offenders from living a balanced and fulfilling life and to then equip them with the skills, beliefs, values, and supports needed to counteract their pernicious influence.

In a sense, when offenders agree to enter a rehabilitation programme they are implicitly asking therapists: "How can I live my life differently?" This requires clinicians to offer concrete possibilities for living good or worthwhile lives that take into account each individual's abilities, circumstances, interests, and opportunities. Ethical questions involve clinicians in the consideration of what constitutes a worthwhile life and are not exhausted by issues related to their conduct. There is no discretion here, every therapeutic intervention is buttressed by assumptions about what constitutes a desirable outcome, and therefore points to vision of human well being and fulfillment. Of course, we cannot choose or live offenders' lives for them, but we should be clear about what are reasonable possibilities and help them acquire the requisite skills, and capabilities to increase their chances of living such lives. The rehabilitation of offenders should be driven by an enhancement model, not a harm avoidance one. This does not entail ignoring the needs of the community for security and safety; it simply

reminds us that all human lives should reflect the best possible outcomes rather than the least worst possibilities.

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