Breaking the Cycle

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May 2014

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Editorial Comment

The first three articles in this edition of *Prison Service Journal* are drawn from presentations delivered at a seminar held in HMP Grendon in July 2013 on the theme of 'Breaking the Cycle'. Many readers will be aware that HMP Grendon is the only prison in the country to operate entirely as a series of therapeutic communities. Reflecting its role and philosophy, HMP Grendon holds an annual seminar which explores an issue of relevance to therapeutic communities but also more widely. The contributors include internal and external speakers, academics, practitioners and sometimes also those who use the service. The audience includes external guests from a range of fields, but also staff and residents from within the prison.

The seminar deliberately derived its title from the 2010 Green Paper which set out the government's plans for the future of the criminal justice system. These plans included the intention to improve services designed to reduce reoffending by released prisoners and the promotion of competition for the provision of services, including the use of payment by results. The opening article by Dr. Alisa Stevens is based upon her research in therapeutic communities and outlines how they facilitate a process of personal reflection and transformative change in personal identity. Her work situates therapeutic communities in the literature of desistance and shows their continued relevance to support change including with those who have committed the most serious offences. Dr. Hanna Pickard takes a philosophical approach in her article, considering the values, beliefs and ethics that underpin work with those who suffer from personality disorders. In a closely argued and carefully considered piece, she outlines an approach based upon responsibility without blame. Whilst her article is based in medical practice, it has clear relevance for penal practitioners and indeed the wider criminal justice system. The third contribution comes from distinguished critical criminologist Professor Joe Sim. In his passionate and provocative work, he offers a challenging critique of the current system of criminal justice, the notion of rehabilitation and ideas about the efficacy of the market. Instead, Sim makes a case for the need for wider social change to address inequalities in wealth and power. The three contributions offer divergent and diverse ways of approaching the questions about the current and future direction of prison policy.

The remainder of the articles in this edition reflect and build upon this theme. Stacie Douglas and Dr. Laura Caulfield's article explores the role and experience of prison officers working in the therapeutic communities at Grendon. Those staff describe how they go through a process of adaptation and embrace an organisational culture that in important regards is different from that of mainstream prisons. In contrast, Dr. Jennifer Sloan's fascinating article on masculinity and indeterminate sentences for public protection, discusses the ways in which the assessment of risk draws upon ideas of masculinity. She describes how those serving IPP sentences often have to manage a tension between the 'hyper-masculine' prison culture and the contrasting versions of masculinity that are likely to result in risk reduction being recognised and release approved. This raises important questions about prison and prisoner culture.

The last two articles draw upon specific examples of the effects of interventions on prisoners. Amy Bilderbeck, Miguel Farias and Inti Brazil's article summarises their research on the effects of yoga and meditation. This research was funded by the Prison Phoenix Trust and provides an example of how third sector organisations can contribute to evidence based practice and establish the credibility and value of their services. The results of the research are positive, illustrating beneficial effects on mood, psychological well-being and thinking, which taken together 'are indicative of the potential for yoga to influence affect and behavioural regulation in a prison setting'. Melanie Merola from HMYOI Aylesbury offers an article examining the benefits of a cognitive behavioural programme on institutional behaviour by prisoners.

In the review section, there are articles that also reflect upon the general theme of this edition, including Michael Brookes' review of *What Works in Offender Rehabilitation: An evidence-based approach to Assessment and Treatment* edited by Leam Craig, Louise Dixon and Theresa Gannon, and Paul Crossey's review of Rosie Meek's book on *Sport in prison*.

This edition attempts to loosely reflect the theme of 'Breaking the Cycle'. Primarily this is achieved by discussing different approaches to changing the behaviour of prisoners. This includes cognitive behavioural programmes, therapeutic communities and some less conventional approaches such as yoga and meditation. In adopting such a wide variety of examples, an imaginative and open-minded approach is being supported. As ever, *Prison Service Journal* also takes a wider perspective on the questions at hand. This edition therefore also raises questions about occupational and organisational culture as well as the philosophy of punishment. Further, this edition questions the cycles that are being or should be broken: is this a question of individual thinking and behaviour alone, or are there issues that need to be addressed about the nature of contemporary society?

'Difference' and desistance in prison-based therapeutic communities

Dr Alisa Stevens is a Lecturer in Criminology at the University of Southampton.

There's an old joke about therapists, changing a light bulb, and the light bulb wanting to change. Clearly, one does have to want to change in order to change, which is why critics of prison-based therapeutic communities claim that if they are successful, it is because of a selection effect: only people who have already decided to change, go there and (much more importantly) stay there, so *of course* they change. And yet … prisons contain plenty of people who claim they sincerely want to change, but cannot even stay away from the temptations of mobile phones, drugs, hooch, and all manner of infractions of the Prison Rules while 'behind bars', let alone when unleashed on the unbounded temptations of life 'on the out'. (Perhaps one can sympathize: after all, every January millions of people say they want to change, by giving up smoking or losing weight, for example, but have given up on that resolution by February.) So if therapeutic communities (TCs) are able to exploit whatever willingness to change pre-exists, it must require more than exceptional willpower on the part of the prisoners who go there. What is it, then, that TCs do to nurture a desire for personal change? Can one, in fact, make claims for offenders' progress towards desistance from crime, while in prison? Even if prisoners are not committing any criminal offences or contravening institutional regulations, 'going straight' is clearly an imposed virtue while imprisoned within an environment which severely curtails opportunities for offending. In this article, based upon my research in three forensic TCs, I contend that it is possible to observe and evidence indicators of meaningful rehabilitation in the TC. Moreover, the theoretical similarities between these changes, between this desistance in process, and those found in retrospective studies of successful desisters, allows one to argue that such profound personal change is indicative of actual progress towards a life post-crime, post-prison. But first, I begin with a brief account of prison-based TCs and description of the empirical research upon which this paper draws.[1]

Prison-based democratic therapeutic communities

Many readers of this journal will know that HMP Grendon is the only British prison to operate wholly in accordance with the principles and practices of the democratic therapeutic community (TC), by offering small group psychotherapy within semi-autonomous and self-consciously pro-social small communities. Opened in 1962, this Buckinghamshire prison enjoys an international reputation for its rehabilitative work with men serving substantial (nearly all, nowadays, indeterminate) sentences for violent and sexual offences, and who have been clinically assessed as personality disordered or displaying traits associated with psychopathy. Readers may not appreciate, however, that three other English establishments offer TC treatment on one or more wings or units within, but physically and to varying degrees, operationally, distinct from, an otherwise 'mainstream' prison. The Serco-run 'therapeutic prison' inside HMP Dovegate in Staffordshire, which opened in 2001, most closely imitates, in size and ambition, Grendon. The TC at Leicestershire's HMP Gartree — known as GTC — celebrated its 20th anniversary in November 2013 and draws its residents, as prisoners in TCs are called, entirely from the early stage lifers who populate the host prison, while HMP Send in Surrey has, for a decade now, provided the only TC facility for women.[2] Each TC has its own constitution, its own multi-disciplinary staff group, and, as an accredited offending behaviour programme, each TC is audited separately for its programme compliance.

As operationalized within prisons, the primary purposeful activity of a TC is the provision of small group therapy three mornings a week. These groups typically comprise eight residents and one or two regular facilitators, who may be psychotherapists, psychologists, or prison or probation officers. In a largely unstructured, non-directive manner, incrementally and iteratively, each resident will tell the story of his or her life, from earliest childhood memories, through formative relationships and events and personal triumphs and traumas, to the crime(s) for which the resident has been imprisoned. On the

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1. For a comprehensive discussion, see Stevens, A. (2013) *Offender Rehabilitation and Therapeutic Communities*. Abingdon: Routledge.
2. A TC also operated at HMP Blundeston, until the host prison's closure in December 2013.

remaining two mornings, residents hold community meetings, in which they discuss and attempt to resolve through negotiation any issues which affect, and especially, may adversely affect, the day-to-day functioning and management of the community. Residents can also participate in art therapy and psychodrama, and are expected to carry out 'rep jobs' of benefit practically to the community and developmentally to the individual, such as contributing to drug strategy and violence reduction meetings, or organizing social activities and events for their peers or visiting family members.

Most academic literature on forensic TCs has focused on researching their effectiveness in terms of reducing re-offending and remedying psychological dysfunction.[3] Relatively little attention has been paid to TC culture and experience, and in particular, there has been a curious neglect of the perspectives of those people for whose benefit the TC exists. My sociological and phenomenological research accordingly sought to contribute this emic or insider's appreciation of the regime by eliciting detailed accounts from residents about their experiences. In the course of my observations of the regime at Grendon, Gartree, and Send during 2006 and 2007, 60 residents, who on average had resided for 16 months, volunteered to be interviewed. This was therefore not a random sample, but one comprised of people who had successfully adapted to, and chose to remain in, the TC. Given its much greater population size, the majority of participants resided at Grendon. With their consent, interviewees were tape recorded and the illustrative quotes that appear in this article are therefore verbatim, though the names of all participants have been changed to preserve their anonymity. The fieldnotes and interview transcripts were subjected to a grounded theory analysis in order to develop inductively a set of descriptive and thematic categories by which to understand residents' experiences, including in what ways participants thought TC treatment promoted (or prevented) their rehabilitation.

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What I found was that interviewees described a process of change, both for themselves and discernible in others, which they believed could and would lead to eventual desistance; that is, the giving up of crime. In other words, I found evidence of desistance in process, in which the penal 'difference' of the TC was integral to creating and fostering the emergence of positive 'differences' in its residents. The remainder of this article explains how this was achieved.

Being somewhere 'different'

A recurrent theme of this research was that residents created very unambiguous distinctions between the respective 'ways'— the regime, culture, ethos, and norms — of the TC and of 'the system'; that is, mainstream secure prisons. 'System' thinking and behaviour was simply '*not* the way we do things *here*' (fieldnotes), and either explicitly or by implication, this meant that residents were keen to portray the TC way of imprisonment and rehabilitation as, without fail, superior. For those who work in 'normal' prisons, this dichotomy and characterization may seem overly simplistic, and hence, unfair, even offensive. I interpret this bifurcation as symbolically significant, however, because perceiving oneself to be in 'a totally different environment' (Winston, Grendon), 'a million miles away from the system' (Andrew, Grendon) seemed to communicate to new arrivals, swiftly and evidently very effectively, the need to behave and think about oneself differently. Indeed, as many noted, they were no longer a prisoner on a wing, but a resident on a community.

This perceived difference encompassed all aspects of the TC experience. Interviewees certainly welcomed the 'relaxed vibe' of the TC prison or unit, with 'none of the usual jockeying for position' that occurs amongst hypermasculine 'tough men', all trying to establish themselves on a wing and pre-empt the pugilistic potential of perceived 'disrespect' (Francis, GTC). But adaptation to the regime was widely experienced as

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3.   For example, Taylor, R. (2000) *A Seven Year Reconviction Study of HMP Grendon Therapeutic Community,* Home Office Research Findings No.115. London: Home Office Research, Development and Statistics Directorate. Newton, M. (1998) 'Changes in measures of personality, hostility and locus of control during residence in a prison therapeutic community', *Legal and Criminological Psychology* 3 (2): 209-23. Shuker, R. and Newton, M. (2008) 'Treatment outcome following intervention in a prison-based therapeutic community: A study of the relationship between reduction in criminogenic risk and improved psychological well-being', *The British Journal of Forensic Practice* 10 (3): 33-44. Neville, L., Miller, S. and Fritzon, K. (2007) 'Understanding change in a therapeutic community: An action systems approach', *Journal of Forensic Psychiatry and Psychology* 18 (2): 181-203.

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challenging, and indeed the high attrition rate in the early stages of residency attests to the fact that the bewildering 'culture shock' (Ross, GTC) of the TC proves, for some, to be too much.[4] Most obviously, one has to get used to the precepts and demands of psychotherapy and the 'interesting, but weird, very weird' (Ravi, Grendon) community meetings. As members of a social community, however, residents were also expected to be more friendly with, courteous to, and reliant on their peers and prison staff; and to trust that the 'issues' disclosed in therapy would be understood and empathized with (in part, because many of these 'issues' were widely shared by residents), rather than ridiculed: 'You don't have to fear here that any openness will be used against you, that is that whatever you've revealed will be thrown back at you and seen as a weakness' (Michael, Grendon). In other words, successful adaptation to the TC way requires the abandonment of the normative 'inmate code', the value system which traditionally governs social relations within the prison. This pits prisoner solidarity against the staff ('them and us'); prohibits informing against ('grassing'), or exploitation of, one's peers; and encourages self-sufficiency, because any perceived vulnerability, particularly amongst 'macho men', might otherwise be mercilessly exploited: 'If you're weak, the predators will come out and claim you. Be a man, or be a victim; that's the reality in the system' (Keith, Grendon). As Wesley (Grendon) explained:

> *Straightaway [TC staff] expect you to do certain things that you're not used to doing. Just simple things: the way you talk to other inmates, the way you get to know someone. In the system, you may not talk to your next door neighbour for a year. Here, you're expected to integrate straightaway, to come forward with information if there's any drugs or if anyone's been threatened ... I found that difficult to get my head round.*

A number of uniquely TC situational and cultural factors further fostered the perception that '*everything* is different in TC; there's no comparison to normal jails' (Adele, Send). The stable populations and limited size of the communities (of up to approximately 40 residents at Grendon and Send and only two dozen at GTC); the provision of sociable spaces including at the men's TCs, a dining room for each community, and above average time out of cell; and the expectation that residents and uniformed, managerial, and clinical staff alike will address each other by their first name, all contributed to the creation and sustenance of a 'family-like' (Richie, GTC), egalitarian atmosphere. At Grendon and GTC, for example, residents were encouraged to spend time in the wing office; a workspace where 'in normal nicks, inmates only go to get a bollocking or grass' (Shane, Grendon). The TC's 'open door' policy, however, enabled easy access to, and effortless sociability with, staff. This challenged the ingrained distrust and dislike of authority figures some long serving, battle weary 'cons' held for 'system screws', and redrew the boundaries within which interpersonal relationships could be formed:

> *I like going into the wing office and sitting down and talking. Being allowed to do that. Having officers talking and they don't shut up because you go near them. They're having general conversations in front of you; they talk to you. You can have a laugh with them, bit of banter. And not just officers. This governor sat down and was telling me about his kids and how they'd built this play house at the weekend. And I'm looking at him thinking, are you mad? You're sitting there telling me about your life! And he seemed like a nice guy! [laughs] You know what I'm saying, though? That just don't happen in a normal jail; I've never heard a governor or officer or no one telling me the slightest thing about themselves personally.*
> (Stewart, Grendon)

Becoming someone 'different'

Just as TC residents dissociated everyday life in the TC from 'normal' prisons, so they distinguished psychosocial TC treatment from the offending behaviour programmes they had previously completed elsewhere, such as Enhanced Thinking Skills, the

. . . successful adaptation to the TC way requires the abandonment of the normative 'inmate code', the value system which traditionally governs social relations within the prison.

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4.   Approximately a third of all new arrivals at Grendon leave within their first year.

Cognitive Self-Change Programme, and the (Extended) Sex Offending Treatment Programme. The depth and constancy of therapeutic enquiry in small groups and the wider community was consistently contrasted by interviewees, rather brutally, with these 'surface, very simplistic' courses (Tim, Grendon), which did not allow one 'to go into more depth, to really understand where [my offending] started, why, and how I came to this' (Eddie, Grendon).

By depth, I refer to the microscopic exploration and dissection of one's life in the small therapy group. A fundamental principle of psychodynamic psychotherapy is that one must understand an individual's past in order to understand their behaviour, attitudes, and problems in the present and how to resolve them beneficially for the future. Specifically, the offender's personal history and internal world — including the unconscious meanings they have ascribed to, and the suppressed and sublimated emotions arising from, disturbing and distressing events and experiences — explain both how it became possible for this damaged person to inflict damage upon others, and how these painful and problematic experiences continue to infuse and be re-enacted within their interpersonal relationships and responses to everyday life in the TC. This is what residents refer to as 'making links', in which work they are aided by the habitually robust but ideally constructive observations, interrogations, clarifications, and interpretations of their fellow group members; in particular, 'senior' residents whose advanced therapeutic progress other residents respect. The following examples illustrate how the process can work:

[After swearing at a prison officer] your group goes into detail: 'Why are you always so aggressive? Why are you anti-authority? Have you got something against that officer? Was there some other way you could have said that?' You'd get none of that in another prison.

And have you found that sort of questioning helpful?

Oh yeah, I've not sworn at an officer now for, oh, a couple of weeks! [laughs] … When I'm challenged, it's not nice to hear, but it makes me think about why I'm pissed off and how I make other people feel around me. It gets explored and the questions you're asked can lead anywhere; one minute you're talking about anger, and the next, your childhood. But that's how you make links, isn't it? You

have to look for the true meaning behind your behaviour.

(Charles, Grendon)

I went to the pod[5] and asked for a juice, and I took it bad when [the pod worker] said no … I threatened him because I was pissed off … So I got grouped[6] and had to talk about why the juice was so important to me [laughs]. And then [name of senior resident] started asking me loads of questions and I ended up talking about my index offence.

How did you go from talking about juice to rape?

Er, he said my problem was entitlement; that I feel like I'm entitled to what I want and don't think about how my behaviours make other people feel.

Right. So that's how you make links between …

Between little things that you do that are a bit wrong and the big things you do that are very wrong. It's not easy but [name of senior resident], he's a sensible fella, he's got good insight into therapy, and him and me have similar issues, so I did take on board what he said.

(Eddie, Grendon)

By constancy of enquiry, I am alluding to the ideological, temporal, and spatial positioning of 'courses' in mainstream prisons as a distinct rehabilitative activity, undertaken for a set period of time, by programmes staff, and which therefore allows prisoners to compartmentalize their learning: to consign it to the classroom. In TCs, because the entire regime is designed to produce spontaneously occurring opportunities for social and experiential learning, and because every observable incident and interaction is potentially grist to the therapeutic mill, 'therapy doesn't stop when the group ends' and efforts to change become 'full-on, 24/7' (Nigel, Grendon). Among a community of 'like-minded people who aren't going to wind you up and aren't going to take the piss, that you're actually *able* to have sensible conversations with about changing' (Callum, Grendon), 'change talk' flows more fluidly from the therapy groups or community meetings, into the corridors and wing office and on through to the

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5.   'The pod': small kitchen on each community.
6.   'Grouped': The referral to the resident's small group by another resident of an issue for exploration.

residential areas, and thus allows for the collective reiteration and reinforcement of the belief in the possibility of meaningful personal change. Leslie (Grendon) explained the difference in these terms:

> I did the SOTP at [a prison reserved for sexual offenders] but even there, you'd do it and then you come back on the wing and that was it, it's not spoken about; you leave it behind. It's like that is your therapy and this is your prison and never the twain shall meet. But here, the two go hand in hand; your therapy and how you socialise and what you talk about. So the rehabilitation here is all the time, so it feels much more genuine and closer to what you'll need for life outside.

The other aspect of the TC regime which interviewees highlighted as potentially transformative was the high levels of individual and collective responsibility afforded to, and expected of, residents. This was achieved through 'having a voice' in community meetings about 'everything that affects our community, because it is *our* community' (Belinda, Send), and through the successful completion of 'rep jobs'. The ability to influence one's environment positively through active contribution and democratic participation improved residents' sense of ownership of, and investment in, their community, and reinforced their perception that they were residents of a viable, distinctive social community in prison, rather than 'just' prisoners. 'Doing things not just for you but for other people … [which] teaches you something about responsibility you won't get elsewhere' (Muktar, Grendon) also provided residents with opportunities to assume new, pro-social roles, and through their reiterative practice, prompted them to re-examine any self-limiting beliefs they held about who they 'naturally' were and of what they were capable:

> I never really believed I could be anything better; it's very hard to think highly of yourself when you're a drug addict and committing crimes, you know? … [My rep job] showed me that I've got a good head on my shoulders and it can be put to good use; I am capable of

more; I can be someone totally different, basically — that's what this place gives you.

(Nate, Grendon)

> I've struggled with feeling confident all my life and [being chair] made me put myself forward, to face my responsibilities, to get things done and not shut myself away in my cell, which is what I would have done before. I've kind of surprised myself … [and] for sure, I feel a lot better about myself.

(Lee, GTC)

Most startling, however, was the responsibility placed on residents to monitor, 'feedback' upon, and collectively enforce adherence to the TC's cardinal rules of abstinence — no violence, no drink or drugs, no sex — without which no therapeutic community can function safely or effectively. For the most serious incidents of rule-breaking, this requires that residents vote, by show of hands in a community meeting, upon whether they recommend to staff that their peer should remain in the community or be expelled. It is in this role reversal of *prisoners* self-governing assiduously, and being willing to inform on, and propose sanctions against, 'offenders' against the TC way, in which one sees the most fundamental rupture from the traditional roles, codes, and loyalties by which 'cons' normally abide. As Steve (GTC) explained:

> I used to be staunch about no grassing; it's just a major rule of prison life. But I have no qualms about it here because it's not grassing: it's feedback to help someone with his behaviours and to keep the community safe.

Desistance in process — in prison?

The elements of what I call desistance *in process* have similarities to the factors identified by academics who have studied the achievement of desistance *retrospectively*. My research coheres with desistance theory which recognizes the importance of positive changes to one's identity — 'our understanding of who

we are and of who other people are, and, reciprocally, other people's understanding of themselves and of others (which includes us)'[7] — and our internalized 'storied self',[8] which every individual mentally creates and constantly updates in order to make sense of, and find meaning in, one's life. 'The capacity *to keep a particular narrative going*'[9] becomes the defining feature by which we understand 'who we are' because this story, this self-narrative, intuitively guides us towards what we choose to do (and not to do) in the present, and what we intend to do (and not to do) in the future. One therefore never passively 'has' or 'receives' a life story; one must actively 'make' this story, by writing and re-writing it so that the narrative can continue, logically, feasibly, to 'keep going'. Moreover, desistance is always a process to which one has to continually commit; rather like stopping, and not restarting, smoking, or losing, and not regaining, weight. People who successfully give up crime are those who are able to create and sustain a 'new, improved' version of self, within which the commission of crime and the lifestyle that involves no longer 'fits', because it does not keep the new, and now preferred, narrative 'going'. Two seminal examples from desistance research explain this point well.

Drawing upon the life stories of 180 ex-offenders, Peggy Giordano and colleagues plotted a four stage process of change through 'cognitive transformation'. The potential desister was ready to change, but this 'cognitive openness' had to be matched by an opportunity — a 'hook for change' — which provided 'an important opening in the direction of a new identity and concrete reinforcement during all phases of the transformation process'.[10] This 'hook' made change possible, though certainly not inevitable: the difference between desisters and persisters was the willingness and ability of the former to recognize, connect with, and capitalize upon the 'hook'. This in turn required the development

> My argument is therefore that the TC can provide that all important 'hook for change', upon which to hang one's aspirations for, and efforts to, change and by which to create a replacement self or redemption script.

of a 'replacement self': a consciously fashioned 'better' version of oneself through which all decisions could be filtered, and all actions assessed, for their consistency with the new identity. The final stage in the change process occurred when the desister repeatedly chose to behave in a way which was relevant to and reaffirmed the 'new' (pro-social) identity, whilst actively deprecating and rendering redundant the 'old' (anti-social) behaviours associated with the 'old' self.

Similarly, Shadd Maruna[11] found, in his comparison of 30 desisters and 35 persisters, that those who had given up crime had established for themselves a 'redemption script'. This script did not merely retell the past passively, but positioned the narrator as an active agent of change. It explained, to the author's satisfaction, why involvement in offending had once been salient, but was no longer, and brought together the different chapters of the life into one unified, purposeful, and convincing 'prototypical reform story'. For many, this involved asserting that their previous long-term criminality was not part of who they really were 'deep down', or that they had learned from the mistakes they had made and the indignities they had suffered during their criminal careers to become older and wiser 'wounded healers' who had now 'made good'.

My argument is therefore that the TC can provide that all important 'hook for change', upon which to hang one's aspirations for, and efforts to, change and by which to create a replacement self or redemption script. Human agency is, as ever, vital to the process of change: TC residents had to be willing and able to journey to 'the dark places of your life' (Josephine, Send) and 'put yourself through this serious, *really* serious, *really* hard work; it's the hardest bit of sentence you will ever do' (Richard, Grendon). They had to, in short, take advantage of, or allow themselves to be 'hooked by', the opportunities to change which the TC offered them. Since my interviewees had typically

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7.   Jenkins, R. (2004) *Social Identity*, 2nd edition. London and New York: Routledge; page 5.
8.   McAdams, D. (1996) 'Personality, modernity, and the storied self: A contemporary framework for studying persons', *Psychological Inquiry* 7 (4): 295-321.
9.   Giddens A (1991) *Modernity and Self Identity: Self and Society in the Late Modern Age*. Stanford, CA: Stanford University Press; page 54, emphasis in original.
10.   Giordano, P., Cernkovich, S. and Rudolph, J. (2002) 'Gender, crime and desistance: Toward a theory of cognitive transformation', *American Journal of Sociology* 107 (4): 990–1064; page 1002.
11.   Maruna, S. (2001) *Making Good: How Ex-Convicts Reform and Rebuild their Lives*. Washington, DC: American Psychological Association.

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served several sizeable sentences previously and 'done loads of courses' (Nick, Grendon) in 'the system', clearly there was something atypically attractive and compelling about the particular opportunities or 'hooks' residents found within the lived and situated experience of the TC regime and of which, this time, they felt able to avail themselves.

That something, I suggest, was the TC 'difference'. Interviewees contrasted their trenchant criticisms of system imprisonment and its reliance on cognitive-behavioural interventions, with their appreciation of, and pride in, the 'humane environment' (Raymond, GTC) of the TC and 'the real deal' of multi-factorial TC treatment (Colin, Grendon). This TC way combined unflinching, yet supportive, group exploration of behaviours and attitudes and the excavation of their 'hidden' meanings and significance in therapy, with the sociability, yet responsibility, of the regime. Telling one's story in therapy was essential in order to understand why residents had offended and how, at that time, crime had 'fitted' into and did make sense, psychodynamically, to the unfolding of that life. The insights residents gained into the 'emotional stuff [that's] gone on that turns us to the way we are' (Tony, Grendon), however, and its 'links' to the present, observed in the community and explored collectively by one's peers, also enabled residents to learn how to change habitual ways of thinking, responding, and behaving, now and for the future. Practising new roles and personas such as an empathetic auxiliary therapist or a reliable community member was equally important, because this fostered the relinquishment of old (anti-social) ways of being and their replacement with new (pro-social) self-esteem enhancing, dependency-reducing, and capacity-building roles, *including* all the normative behaviours and qualities associated with the 'old' and the 'new'. In short, as residents' self-awareness developed, and they were given opportunities to demonstrate, to themselves and others, behaviours consistent with becoming 'more' and 'better', so residents gained increasing confidence that they really could become 'more' and 'better'.

The *'true meaning'* of residents' dismissal of 'system thinking', 'system screws', and 'standard' rehabilitative interventions, is then revealed. The need to apply to, and be accepted by, the TC encouraged the shared sentiment that residents are privileged to have joined a special, select, penal 'club'. As the anthropologist Richard Jenkins observes,[12] social identity involves defining an 'us' in opposition to a range of 'thems'. In their claims to superiority — of rehabilitative method, of interpersonal relationships, of dedication to

the sustenance of a therapeutic culture of enquiry — TC residents created an 'us' which disowned not only the 'thems' of 'the system' but *their own* 'old' former prisoner identity. In other words, when residents created this cognitive divide, and discursively differentiated, between *where* they were imprisoned and where they are now, it facilitated the more important creation of the cognitive division from *who* they were and who they are now and intend to go on 'becoming'.

Conclusion

My research situates for the first time the achievement of the prison-based TC as the enablement of desistance-focused identity reconstruction. As Neil (Grendon) explained:

> *I've become here the person I've always wanted to be; the person that's always been there underneath but was scared to come out and got covered up with all the bollocks of my lifestyle and attitudes … I am the person now I was always meant to be, but who got lost somewhere along the way.*

For some residents, these changes did indeed require the creation of a 'new me': someone entirely divorced, cognitively and emotionally, from whom they were, and for whom the past no longer had any place in, or claim to, their present self-conception. For others, it was a more subtle (re)discovery of the 'real me': 'the nice person I was, before I went wrong … a functional, decent human being' (Nate, Grendon), or 'the me that I always wanted to be, but was never allowed to be' (Natalie, Send). Either way, their self-perception 'shifted', allowing for the emergence of a redemption script which was intrinsically incompatible with a return to the 'old me' who committed crime or caused 'trouble' in other establishments. Given the unpromising criminal and prison histories of many residents, this experience of 'evidence-based' hope for desistance was novel, and was felt to be credible and significant: 'I honestly don't believe I will ever offend again because I'm not that person now. I've found a better person here' (Ben, GTC). This, then, is desistance in process, in prison. The challenge for 'system' prisons is to help TC graduates maintain and further develop these positive changes throughout the remainder of their sentence, so that the promise of desistance, cradled in the TC, can be realized in desistance in reality, upon release.

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12.   See note 7.

Responsibility without Blame:

Therapy, Philosophy, Law

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I offer a philosophical account of the meaning of responsibility and the meaning of blame which shows how it is possible to distinguish them, in theory and in practice. Drawing on clinical interventions targeting problematic behaviour in service users with personality disorder, I explain why it is essential to *maintain responsibility* and *accountability* in order to enable learning and change, while it is essential to *avoid blame*. I suggest that the clinical stance of Responsibility without Blame be adopted within the criminal justice system, as a framework for addressing offending behaviour in a way which serves not only justice, but also reform and rehabilitation, by attending to the mental health of offenders while yet holding them responsible and to account.

Introduction:
The Paradox of Responsibility without Blame

My first experience as a clinician was in a Therapeutic Community for service users with predominantly Cluster B personality disorder and related complex needs. Such service users are notoriously difficult to treat, and, within mental health services, often stigmatized as the service users 'no one likes'. Personality disorder [PD] is characterised by extreme, overwhelming emotions, maladaptive beliefs, and, especially for service users with strong borderline and anti-social tendencies, 'problematic' behaviour, such as self-harm, aggression and violence towards others, alcohol and drug misuse, and severe difficulties in maintaining positive interpersonal relationships and fulfilling social roles and duties. Some of this behaviour is straightforwardly criminal, but much of it, even when not criminal, is harmful and damaging — to service users themselves, to their children, families, and friends, and to others who come into contact with service users through any variety of ways. No wonder, then, that in his landmark study of High Security Hospitals in the UK, Len Bowers suggests the following explanation of staff attitudes to service users with personality disorder:

The generally hopeless, pessimistic attitudes of carers can be seen to originate in the difficult behaviours of … PD patients. They bully, con, capitalize, divide, condition, and corrupt those around them. They make complaints over inconsequential or non-existent issues in order to manipulate staff. They can be seriously violent over unpredictable and objectively trivial events, or may harm and disfigure themselves in ways that have an intense emotional impact on staff. If this were not enough, they also behave in the same way towards each other, provoking serious problems that the staff have to manage and contain. On top of that, the staff have to come to terms with the committed offences that have brought patients into hospital — offences that can be so grievous as to elicit feelings of disgust and abhorrence.[1]

Although couched in somewhat judgemental language, this description of the problematic behaviour of service users with PD is nonetheless accurate in many ways, and likely to feel familiar not only to staff who work in mental health services, but equally to those who work in prisons and probation services: 64 per cent of male and 50 per cent of female offenders have a personality disorder.[2] But in the Therapeutic Community where I worked, the staff attitude towards this behaviour was not as Bowers describes. Rather, the staff were very clear about what their attitude as clinicians should be, and usually, although not invariably, succeeded in achieving it. Service users were responsible and accountable for problematic behaviour, but an attitude of respect, concern, and compassion prevailed, and they were not blamed. As a novice clinician, this stance of Responsibility without Blame struck me forcefully. It is very different from the stance we, as individuals and as a society, ordinarily adopt towards people whom we believe do harm or behave badly. Problematic behaviour of the sort described tends to evoke blame, no doubt alongside related attitudes such as anger and resentment, dislike and rejection, and 'disgust and abhorrence', to use Bowers' phrase. And, if I am honest, I initially had no idea how this clinical stance of Responsibility without Blame was so much as possible to achieve: when a service user, who had personality disorder but was not psychotic and

1.   Bowers, L. (2002) *Dangerous and Severe Personality Disorder: Response and Role of the Psychiatric Team*. London: Routledge, p 65.
2.   National Offender Management Strategy (2011) *Working with Personality Disordered Offenders: A Practitioner's Guide*. London: NOMS.

so knew what they were doing, was angry and threatening towards me for no reason, and made me feel angry and scared, how was I to hold them responsible and accountable for this behaviour without blaming them for it? I could make sense of the idea that, despite appearances, they might not be responsible because their personality disorder excused them, and hence they were not to be blamed. And I could make sense of the idea that, despite their personality disorder, they were responsible, and hence to be blamed. But the combination of responsibility but not blame for harm or wrongdoing struck me as a paradox, in theory and in practice.

This article explains why there is no paradox: we can hold people responsible and accountable for harm or wrongdoing, without blaming them for it. It does so by offering a philosophical account of the meaning of responsibility and the meaning of blame that clearly distinguishes each idea from the other. But it also argues that, in so far as it is possible, we should aim to adopt the clinical stance of Responsibility without Blame within the criminal justice system, including courts, prisons, and probation services. For doing so may contribute to addressing offending behaviour in a way which serves not only justice, but also reform and rehabilitation, by attending to the mental health needs and problematic behaviour of offenders while yet holding them responsible and to account. Hence the article has three parts, as reflected in its title: therapy, philosophy, law.

1. Therapy

Why is the stance of Responsibility without Blame important to engage and effectively treat service users with personality disorder? The answer to this question has two components. The first pertains to why responsibility is essential to maintain, the second to why blame is essential to avoid.

Responsibility and Agency for Change
Quite simply, responsibility is essential to maintain because improvement in mental health and wellbeing

requires service users with PD to stop behaving in ways that are so harmful and damaging, to them and to others. Although medication is sometimes advisable,[3] for instance, to help dampen impulsivity or anxiety, there is no miracle cure available: service users must 'take responsibility' for their behaviour, as we naturally say, and work to change.

Problematic behaviour is often a habitual if ineffective way of coping with psychological distress, and so part of a cycle of dysfunction: in the short-term it may seem to service users like the only way of dealing with underlying, negative emotions and beliefs, but in the long-term it makes things worse. So, for life to get better, service users must stop behaving in these ways in face of these emotions and beliefs, and learn to do things differently. This, of course, is not easy. Personality disorder is associated with extreme early psychosocial adversity: dysfunctional families, where there is breakdown, death, institutional care, and parental psychopathology; traumatic childhood experiences, with high levels of sexual, emotional, and physical abuse or neglect; and social stressors, such as war, poverty, and migration.[4] Negative emotions and beliefs may have their source in such childhood experiences, and alternative, healthy ways of coping with distress may not have been modelled by carers, and so were never available to be learned. As a result, both inner and outer resources may be extremely meagre: service users may lack any genuine self-esteem or self-belief, and their socio-economic status and other external factors that genuinely limit opportunities may understandably impede hope for a better future and with it motivation to change.

But, despite the importance of recognizing such hardship, the point remains that service users cannot even begin to resolve to change and embark on the process of learning to do things differently if they and those who work with them do not believe it is *in their power to do so.* For, it is only possible to deliberately change those patterns of behaviour over which we have choice and at least a degree of control — however difficult it may be to exercise our power. This is why *responsibility* is essential to engagement and effective

> Although medication is sometimes advisable . . . there is no miracle cure available: service users must 'take responsibility' for their behaviour, as we naturally say, and work to change.

3.   National Institute of Mental Health in England (NIMH(E)) (2002) *Personality Disorder: No Longer a Diagnosis of Exclusion*. London: NIMH(E).
4.   Paris, J. (2001) 'Psychosocial adversity', in W. J. Livesley (ed.) *Handbook of personality disorders*, New York: Guildford Press, p231 – 241.

treatment of service users with personality disorder: the clinical task must be, in part, to motivate, encourage, and support service users in this project of doing things differently, by helping them to develop *their sense of agency*. This can include, for instance, encouraging them to see they have or can make different choices despite the pull of past habits, supporting them to learn new skills and ways of coping with underlying emotions and beliefs to improve their capacity for control, and helping them to better understand and recognize the feelings and motivations driving them, so they can stop and think instead of acting on impulse.

So, when service users behave in ways that are harmful and damaging, to them or to others, clinicians must not shy away from seeing service users as in effect *responsible agents* and asking them to take responsibility for their actions. Indeed, this commitment is a presumption of most forms of psychological interventions used to treat personality disorder, including cognitive-behavioural therapy, motivational interviewing, stop-and-think training, emotional intelligence, mentalization-based therapy, and Therapeutic Communities. These interventions are united in viewing service users as capable of choice and a degree of control over their behaviour, although the extent to which this presumption is explicitly articulated to service users themselves varies. For instance, in motivational interviewing, the clinician adopts a non-challenging stance, simply expressing empathy and encouraging service users to see the unwanted consequences of their behaviour, as a means to increasing motivation to change. In contrast, the language of agency and responsibility permeates the culture of Therapeutic Communities: the Community is explicit that members are expected to see themselves and others in this light.

The Rescue-Blame Trap

On the other hand, *blame* for problematic behaviour is essential to avoid. We all have some experience ourselves of what it feels like when we do something wrong and then get blamed for it. In the case of service users with personality disorder, most of whom are vulnerable and marginalized with limited inner and outer resources, blame may trigger feelings of rejection, anger, shame, and indeed self-hatred and

> For this reason, it is essential when working with service users with personality disorder that blame is avoided, and respect, concern, and compassion is maintained.

self-blame, which bring heightened risk of disengagement from treatment, distrust and breach of the therapeutic alliance, hopelessness, desperation, relapse, and potentially even self-harm or attempts at suicide. For this reason, it is essential when working with service users with personality disorder that blame is avoided, and respect, concern, and compassion is maintained.

Clinicians must therefore adopt the stance of *Responsibility without Blame*: they must hold service users responsible and accountable for harm or wrongdoing, without blaming them for it. But without a clear articulation of what this means, they may find themselves caught in what I call 'The Rescue-Blame Trap'. Conscious of the importance of avoiding blame given the potential repercussions and their duty of care, clinicians may (consciously or unconsciously) recoil from holding service users responsible and accountable for their behaviour, as a way of ensuring they do not end up blaming them. Rather than acknowledge the capacity for choice and control, they may 'rescue' service users by maintaining that they 'couldn't help it' or that their behaviour was caused by their disorder and hence not under their control. But if clinicians take this attitude, and deny service user agency and excuse them from responsibility, then they cannot work effectively to motivate, encourage, and support service users in the project of doing things differently. For, again, people cannot change what they are powerless to change — it makes no sense to ask this of them. Hence the possibility of getting trapped between the extremes of Rescue and Blame: rescuing service users removes the risk of blame but so too the possibility of changing problematic behaviour; while holding service users responsible and accountable secures the possibility of changing problematic behaviour but risks leading to blame.

The Rescue-Blame Trap often leads to splits within mental health staff teams, with some staff adopting a rescue stance, while others adopt a blaming stance.[5] The result is poor care and inconsistent, ineffective treatment, where service users are either 'let off the hook' or punished for their behaviour, neither of which is likely to lead to improved mental health and wellbeing. The solution to the Rescue-Blame Trap is

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5. This may mirror the split sometimes found in prison staff between 'Care Bears' and 'Turn Keys'.

superficially easy to see: clinicians must adopt the stance of Responsibility without Blame, where service users are neither rescued nor blamed for problematic behaviour, but instead held responsible and accountable with respect, concern, and compassion. But what exactly does that mean, in theory and in practice?

2. Philosophy

We use words to mean different things in different contexts, and much of our ordinary use of language is imprecise or ambiguous. Nonetheless, we can often extract a core meaning through philosophical reflection. Responsibility and blame are easily confused because they often go together: when others are responsible for harm or wrongdoing, it is common in our society to find that we blame them. But despite this common association, they are nonetheless distinct. To put the distinction in the very plainest terms: responsibility is about *the other person*, while blame is about *us* and how *we choose to respond* to that person. Responsibility is about whether someone meets various conditions that must hold for it to be true that *they* are responsible for their actions. Blame is about *our* emotions, judgements, and actions towards those who are responsible for harm or do wrong.

The Meaning of Responsibility

What are the conditions that are necessary for responsibility? It seems probable that there is a good degree of cultural variation.[6] But within our culture, and implicit in the discussion in the first section, is a long history linking responsibility fundamentally to agency and free will. This idea of responsibility can be found in Western philosophy from Aristotle[7] onwards, and remains dominant in contemporary society. This idea of responsibility distinguishes behaviour which is voluntary, in the sense that it is subject to choice and at least a degree of control, from behaviour which is involuntary. So long as we are conscious, sane, and know what we are doing, we are then responsible for our behaviour to the extent that it is voluntary: the core necessary conditions for responsibility are choice and at least a degree of control. These conditions seem very intuitive, because it is only if a person has choice and a degree of control over their behaviour that it is *up to them* whether and how they act and, at least in our culture, it seems wrong to judge a person responsible for harm if there is nothing they could do to stop it happening — if they 'couldn't help it' and so did not do it of their own free will, as we say. But, so long as they can refrain from acting — so long as they are capable, at a given moment in time, of *not behaving* in a certain way — then they are responsible if they do so act.

> This idea of responsibility distinguishes behaviour which is voluntary, in the sense that it is subject to choice and at least a degree of control, from behaviour which is involuntary.

Degrees of Responsibility

However, it is important to recognize that choices can be limited and control diminished relative to the norm, through no fault of a person's own. When this is so, then, even if it is true that a person could have not behaved in a certain way and so is responsible, it may be that their degree of responsibility is yet reduced. Early psychosocial adversity typically limits opportunities for development and learning, as well as future choices. Equally, service users with PD may sometimes have a reduced capacity for behavioural control relative to other people. On the one hand, the possibility of mentalization deficits and the high levels of emotional arousal associated with PD may diminish the extent to which service users are able to grasp the probable effects of their actions on others in the moment of acting.[8] On the other hand, in so far as the problematic behaviour is a habitual way of coping with psychological distress, refraining will require tolerating the distress, which is especially difficult if the service user has never had the opportunity to learn alternative ways of coping. If choices are constrained and control difficult through no fault of a person's own, responsibility may accordingly be reduced. In clinical contexts, this may be especially important to recognize, for identifying the factors and circumstances that limit choices and diminish control relative to the norm may

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6.   For a good, accessible survey of some of the data, see Sommers, T. (2012) *Relative Justice: Cultural Diversity, Free Will, and Moral Responsibility*. Princeton: Princeton University Press.
7.   The classic text is the Eudemian Ethics which can be found in *The Complete Works of Aristotle*, vol. 2, J. Soloman (tr.), J. Barnes (ed.), Oxford: Oxford University Press.
8.   For discussion of these deficits see Fonagy, P., Gergely, G., Jurist, E., and Target, M. (2004) *Affect regulation, mentalization, and the development of the self*. London: Karnac.

help to show where interventions aimed at developing a sense of agency should be targeted.

The Meaning of Blame

What, then, is it to respond to a person who is responsible for harm with blame? Just as there may be cultural variation in the conditions necessary for responsibility, there is individual variation in what kinds of harm or wrongdoing most strongly incline a person towards blame, and in blaming style. Nonetheless, within our culture, blame ordinarily involves a typical range of emotions, judgements, and actions. With respect to emotions, blame is connected to hostile feelings, such as hatred, anger, resentment, disgust, and contempt. With respect to judgements, blame usually involves forming a harsh, negative view of a person's overall character, or permanently stigmatizing and condemning them as a bad or worthless person. Finally, blame also typically involves expressing or acting on these emotions and judgements in a variety of ways, for instance, exhibiting behaviour that is aggressive, vengeful, and punitive, or alternatively passive-aggressive, rejecting and distancing.[9]

When we are confronted with wrongdoing and the perpetration of harm, it is common not only to respond with these sorts of emotions, judgements, and actions, but also to feel a sense of righteousness or entitlement to do so: as if the person 'deserves' whatever they get, including our blaming response. But, in theory, because responsibility and blame are distinct, we can drive a wedge between holding a person responsible and blaming them. To hold a person responsible is to believe that they meet the conditions necessary for responsibility — they had choice and a degree of control over their behaviour and so could have not acted as they did. We can believe this —indeed, as I shall discuss, we can believe this *and hold people to account* — but not allow blame to infect our emotions, judgements, and actions towards them as a person. That is what it means to adopt the stance of Responsibility without Blame.

Practising Responsibility without Blame

In practice, how we do this is complicated and context-specific. As a first step, and quite generally, we can keep the distinction between responsibility and blame clearly before our minds, and undertake to challenge our own sense of righteousness and entitlement while cultivating a commitment to treating all people, including those who are responsible for real and lasting harm, with respect, concern, and compassion. But the precise details of what this means and how it is achieved in practice may be context-specific.

Clinicians are no doubt helped by the nature of their role: the guiding aim of clinical work is to help patients. This duty of care structures the relationship between clinician and patient, providing a clear rationale for avoiding affective blame. Correspondingly, there exist guidelines and conventions that establish norms for how patients are spoken to and treated and promotes reflective practice, which ensures a culture in which respect, concern, and compassion are always expected, and often maintained. The therapeutic focus on service user responsibility may also help: in the clinic as elsewhere, it is easier not to blame those who actively take responsibility for their actions and 'own up' to what they have done. Finally, when all else fails, clinicians need a good poker face — a commitment and capacity to mask some of their emotions, and refrain from acting out of any blame they may feel.

> But perhaps the most important counter to blame within clinical contexts is proper attention to service users' past history.

But perhaps the most important counter to blame within clinical contexts is proper attention to service users' past history. Treatment for PD can involve helping service users to explore their past and recognize its effects on their personality and their present experiences and behaviour, both as a way of coming to terms with the past, and as a way of developing skills needed to better manage the present.[10] But, in attending to this history, clinicians and service users together gain understanding of why service users are as they are. A fuller life story or narrative comes into view, in which — given the association between PD and extreme early psychosocial adversity — service users in all likelihood come to be seen not only as people who harm others, but as people who have been harmed by others. This capacity to see patients both as victims and as perpetrators can help clinicians avoid blame. It requires keeping in mind the whole of the person and the whole of their story, which undercuts any single attitude or emotion, forcing

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9.   As the variation in emotions, judgements, and actions suggests, blame can be either 'hot' or 'cold'.
10.   For further discussion, see Pickard H. (forthcoming) 'Stories of recovery: the role of narrative and hope in overcoming PTSD and PD' in Fulford, K.W.M., Sadler, J., and van Straten, W. (eds), *The Oxford Handbook of Psychiatric Ethics*. Oxford: Oxford University Press.

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any blame to exist alongside other attitudes and emotions, such as understanding and compassion, and thereby at least tempering, if not outright extinguishing, its force. As the moral philosopher Gary Watson has put this point in relation to the famous US psychopath Robert Harris: 'The sympathy towards the boy he was is at odds with outrage towards the man he is'.[11] Indeed, there is evidence that this sort of contextualisation may help to temper blame towards offenders. Research on social attitudes towards criminal offending consistently finds that more fully contextualised scenarios give rise to less punitive responses.[12]

Hence we can solve The Rescue-Blame Trap. We can distinguish responsibility from blame in theory. And, in practice, the nature of the clinical aim and culture, together with the therapeutic attention reliably paid to service users' past history, can act as a real-world antidote to blame, while yet leaving responsibility for present behaviour intact. Is something similar possible within criminal justice contexts?

3. Law

Criminal law employs the very idea of responsibility articulated above as a prerequisite for conviction: in order to be convicted, an offender must have known what they were doing when they committed the offence, and have exercised choice and a sufficient degree of control in doing so. But criminal legal theory and practice does not tend to distinguish clearly between responsibility and blame. In this, of course, it is not unique: as we saw, the distinction between them tends to be overlooked within our society quite generally. Nonetheless, as a result, law courts and criminal justice institutions, such as prisons and probation services, can become environments where blame is sanctioned, even encouraged, as part and parcel of the process of serving justice for crime.

> . . . law courts and criminal justice institutions, such as prisons and probation services, can become environments where blame is sanctioned, even encouraged, as part and parcel of the process of serving justice for crime.

The UK Criminal Justice Act 2003 Section 142 codifies multiple purposes in sentencing, including punishment, reform and rehabilitation, reduction of crime, public protection, and the making of reparation by the offender to those affected by the offence. Arguably, these purposes would be better served by adopting the clinical stance of Responsibility without Blame within criminal justice contexts. Again, personality disorder is prevalent within the offending population: 64 per cent of male and 50 per cent of female offenders have a personality disorder. At least for those offenders who have PD and possibly more widely, enacting punishment within criminal justice institutions in a manner associated with and expressive of blaming emotions, judgements, and actions may undermine the possibility of reform and rehabilitation. The reason is the same as why blame is avoided in clinical contexts: it risks creating feelings of rejection, anger, shame, hopelessness, and desperation in offenders, thereby undermining the possibility that responsibility and accountability may enable learning and change. But, if the possibility of reform and rehabilitation is undermined, so too may be the possibility for reduction of crime, public protection, and any genuine making of reparation or 'giving back'.[13] The cost of blame to the prospect of realising the various purposes of sentencing may be high.

Adopting the clinical stance of Responsibility without Blame within criminal justice contexts allows us to re-conceive punishment as the imposition of serious or negative consequences in response to criminal responsibility, but with an attitude of concern, respect, and compassion for the offender. The law can in theory hold offenders to account, but within an environment — whether this is within the courts, prisons, or probation services — that may do better to help them address their offending behaviour and enable learning and change. Of course, the culture and practices in many corners of criminal justice services

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11. Watson, G. (2004) 'Responsibility and the limits of evil' in his *Agency and Answerability: Selected Essays*. Oxford: Oxford University Press, p44.
12. See for instance Roberts, J. and Hough, M., eds (2002). *Changing Attitudes to Punishment: Public Opinion, Crime and Justice*. Uffculme: Willan Publishing.
13. For discussion of the importance of 'giving back' and other factors that emerge from the narratives of offenders who have desisted from crime, see Maruna S. (2001) *Making Good: How Ex-Convicts Reform and Rebuild their Lives*. Washington: American Psychological Association.

already aim to do this, as evidenced, for instance, by the history of Therapeutic Community prisons and the more recent Psychologically Informed Planned Environments (PIPEs) in prison and probation services, alongside initiatives to provide mental health and especially PD skills and awareness training for officers, and increase mental health care provision and educational and occupational training for offenders. But just as the clinical stance of Responsibility without Blame provides a framework for understanding how clinicians find a balance between the twin pitfalls of Rescue and Blame, so too it can provide a framework for understanding how criminal justice theory and practice can find a balance and reduce the conflict between punishment on the one hand, and reform and rehabilitation on the other.

Endnote: The Moral Case for Responsibility without Blame

The argument I have just offered for why we should adopt the clinical model of Responsibility without Blame within the criminal justice context is in essence pragmatic: doing so may better serve the multiple purposes of sentencing encoded in law.[14] I want to conclude this article by offering one further, moral argument, in favour of its adoption.

I suggested that proper attention to service users' past history can act as a real-world antidote to blame, while yet leaving responsibility for present behaviour intact. It can, but also, it should. When children grow up in our midst subject to extreme psycho-social adversity and impoverishment, arguably we as a society bear some responsibility for the harm inflicted on them if we fail to intervene. Our responsibility may undercut our moral standing or right to blame the adults these children become, even when we justly hold them responsible. There is therefore reason to hold that large-scale social institutions, like the criminal justice system, have a moral obligation to bear in mind our collective failure to protect children and promote psycho-social and economic equality for all, in the attitude taken to those who may have been victims before they became perpetrators. This is, to some degree, already recognised in sentencing practice: for example, pre-sentence reports addressing contextual factors such as these have long been a feature of the sentencing process in England and Wales.[15] Hence not only does the criminal justice system have pragmatic reasons, given the purposes of sentencing, to avoid blame. It may also, as a large-scale social institution, have a moral obligation to do so.

Adopting a stance of Responsibility without Blame within the criminal justice system would require a radical shift in culture — within in its institutions but also, no doubt, within broader society. But the exact contours and details of how far to go, and what such a shift would and should be like, is open for debate. What I hope to have established here is only a first step towards understanding why blame is not necessary to responsibility and accountability for wrongdoing in both clinical and criminal justice contexts, and to sketching some of the reasons we have, and steps we might take, to avoid it.[16]

'Welcome to the Machine'[1]:

Poverty and Punishment in Austere Times

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We don't necessarily need to know every pathway that leads to misery in every individual. If anguish and madness are caused by material things happening to material bodies: on [the] one side, traumatic abuse and persecutions; and on the other, soul-deadening labour, squalid impoverishment, the boredom of joblessness, the moralising sermons of the privileged — to name but a handful of the officially approved torments — then it seems sensible not to try to talk people out of their unhappiness, but to change the world from which it springs. A concerted effort to take the plight of the poor and the marginalised seriously, to redistribute wealth, and to give them more say over their own future might not solve every one of these ills, but it would be a good place to start.[2]

Rehabilitation is back on the state's agenda. The publication of *Breaking the Cycle* in 2010, and other policy documents, has allowed ministers to claim that their government is at the forefront in revolutionising the process of rehabilitating prisoners. However, even in its own terms, there are a series of problems with this development which Nicola Padfield,[3] amongst others, has identified. This article, focuses on a number of broader issues and considers the rehabilitation revolution in the context of the social and economic policies pursued by the present government (and their less than illustrious predecessors), which, with their atavistic attacks on the discourses and practices of the welfare state, are negating and destroying the social protection afforded to the poor as a result of the post-war settlement and ravaging both their collective sense of self-worth and their individual sense of personal validation. It addresses three issues. First, it analyses the punishment of the poor through the welfare reforms that are being pursued which are intrinsic to the interlocking and intensifying power of the penal-welfare state. Second, there is the question of programmes for prisoners and the link, or not, to individual rehabilitation. Finally, the article discusses the development of an alternative set of discourses which would contribute to thinking differently, and critically, about crime, prisons and the welfare state. These alternative discourses can be understood as contributing to the construction of material and ideological 'abolitionist alternatives' (Davis, 2003)[4] to the current penal and welfare arrangements in order to confront, and eventually remove, the soul-crunching policies that are being implemented by state institutions and profit-obsessed, private corporations.

Punitive Welfare Regimes

In neoliberal Britain, in a landscape marked by the scar of the foodbank which, in 2012-13 fed nearly 350,000 people nationwide, of whom nearly 127,000 were children,[5] the material existence of the poor and dispossessed is under remorseless attack. Indeed, the very act of attempting to survive in capitalist-induced times of austerity — what Moloney has called 'the punishing existence' of the poor — subverts their sense of 'safety, self worth and competency'.[6] In turn, this means that feelings of rejection and patronising disdain are central to their often-wasted lives. As he notes:

> For poor people living in western consumer societies ... the daily grind of earning and getting by, the patronising arrogance and pettiness of the welfare officials upon whom many of them depend, the contrast between public opulence on the one hand and bare survival and private squalor on the other — all reinforce the message of low self-worth. Over time, such feelings become ingrained, densely connected to memories and experiences through multiple neural networks, and, in consequence, always primed to surge forth and overwhelm, making future attempts at escape more unlikely, even if circumstances should change for the better.[7]

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1. The first part of this paper's title is taken from the Pink Floyd song of the same name. The paper was originally presented at a seminar in Grendon Underwood prison in July 2013. I would like to thank the governor, Jamie Bennett, prison staff and the residents for their contribution and hospitality on the day. Thanks also to Roy Coleman, Will Jackson, David Scott and Steve Tombs for discussing different aspects of this paper with me.
2. Moloney, P. (2013) The Therapy Industry London: Pluto p. 208.
3. Padfield, N. (2011) 'Wither the rehabilitation revolution?' in Criminal Justice Matters, 86, December pp17-19.
4. Davis, A. (2003) Are Prisons Obsolete? New York: Seven Stories Press p. 109.
5. http://www.trussell.org/foodbank-projects. Accessed 28 January 2014.
6. Moloney (2013) see n 2 pp 201-202.
7. Ibid pp 202-203.

This attack is operating across a range of political and cultural institutions. In early 2013, it was reported that members of the Royal Family, had allegedly engaged in chav-themed fancy dress parties at Sandhurst, colleges at Oxford University had organised 'chav bops' while 'the privately educated creators of Little Britain [were entertaining] their devotees with comedic representation of the so-called underclass'.[8] These bourgeois 'japes' should not be surprising given that the caricaturing of the poor — 'bodies without brains'[9] — has reached unprecedented levels in the second decade of the twenty first century. Their cultural denigration is underpinned by political and popular hostility to their lives, habits and characters which, as Zygmunt Bauman, following Gans, has noted, is crystallised around a number of regressive themes and apocalyptic images: a parasitic class, tied to a netherworld of behavioural and psychological diseases. They are 'failed consumers', 'unwanted', 'incompetent', 'hopeless', 'hapless', 'immoral', 'lax', 'intractable', 'unreachable' individuals who have chosen debauchery over respectability.[10] Above all, they are dangerous. They constitute:

> ... a black hole that sucks in whatever comes near and spits back nothing except vague but dark premonitions and trouble ... Prisons now deputize for the phased-out and fading welfare institutions, and in all probability will have to go on readjusting to the performance of this new function as welfare provisions continue to be thinned out.[11]

The voyeuristic surveillance of their behaviour has reached a point where even Jeremy Bentham might have had misgivings. Any potential for deviance, including welfare deviance, is increasingly being ruthlessly suppressed, a coercive strategy legitimated by the cod-psychology articulated by a range of 'judges of normality'[12] employed by both the state and private companies who are remorseless in their intent to psychologically break down welfare claimants and rebuild their 'deviant' personalities so that they become remoralised drones operating in the service economy.

This surveillance is underpinned by the discourse of mistrust — they are not to be trusted, in fact, they are mendacious. Conversely, the self-surveilling rich *can* be trusted to act truthfully and responsibly for the greater good of the wider social collective — a grimly ironic perspective given their role in the seismic, economic crisis that continues to engulf the lives of individuals and communities both nationally and internationally. A further indignity in the attempt to induce their respectable conformity is to expose their families to the 'wisdom' of celebrities who share their lives for a limited period of time while offering them sage advice, from their millionaire's perspective, on how to manage their meagre budgets. Reimagining, and coercively rebuilding their family structure, is central to this process. The alleged decline in family values was a

The alleged decline in family values was a perennial, political concern of New Labour and remains a central obsession of the coalition.

perennial, political concern of New Labour and remains a central obsession of the coalition. It is a discourse underpinned by naked positivism. Thus, in 2006, on returning from a summer break taken in Cliff Richard's Barbados villa, Tony Blair was asked about interventions with problematic children and families. Blair took up the point with an enthusiasm redolent of nineteenth century positivists, arguing that 'a lot of the evidence suggests that you need to be getting in there while the child is still in nappies frankly. Or pre-birth, even ... I think if you talk, as I do, to teachers sometimes they will tell you, and I know it sounds almost crazy to say this, but at age 3, 4, 5 they are already noticing the symptoms of a child that when they are 14 or 15 is out on the street causing mayhem'.[13]

An additional, 'officially approved torment'[14] is the role of, and the interventions made by, private corporations, such as Atos, contracted to the state to provide a range of 'services' including fit-for-work assessments. In January 2013, in a Parliamentary debate concerning work capability assessments for those on incapacity benefits carried out by Atos, MPs raised a number of issues with the Work and Pensions Minister, Chris Grayling (soon to become the Justice

8.   Harris, J. (2013) 'Chav-bashing-a bad joke turning into bilious policy' in The Guardian, 7 January p 28.
9.   Wilson, D. and Anderson, M. (2011) 'Understanding Obama's Discourse on Urban Poverty' in Bourke, A., Dafnos, T. and Kip, M. (eds) Lumpencity Ottawa: Red Quill Books pp 43-74 p 50.
10. Bauman, Z. (2007) Consuming Life Cambridge: Polity pp 123-134.
11. Ibid pp126 and 132.
12. Foucault, M. (1979) Discipline and Punish Harmondsworth: Penguin p 304.
13. www.number-10.gov.uk/output/Page10023.asp Initially downloaded 2 April 2007.
14. Moloney (2013) see n 2 p 208.

Secretary). Michael Meacher was particularly scathing about the tests and the devastating impact on some of the most vulnerable groups in the society. He noted that the chief medical officer of Atos had joined from an American company, Unum, which had been described as an 'outlaw company' by authorities in America 'because it was regarded as a 'disability denial factory'. He went on to raise a 'fundamental issue' and asked:

> ... how can pursuing with such insensitive rigour 1.6 million claimants on incapacity benefit, at a rate of 11,000 assessments every week, be justified when it has led, according to the Government's own figures, to 1,300 persons dying after being put into the work-related activity group, 2,200 people dying before their assessment is complete, and 7,100 people dying after being put into the support group? Is it reasonable to pressurise seriously disabled persons into work so ruthlessly when there are 2.5 million unemployed, and when on average eight persons chase every vacancy, unless they are provided with the active and extensive support they obviously need to get and hold down work, which is certainly not the case currently?[15]

Thus, the patronising interventions of celebrity culture and reality TV programmes, the inane interventions by politicians and the iron grip of private corporations, with their insidious links to the state, have added further layers of regulation, and, from the perspective of the poor, an intensified sense of dread, to the already damaging, neoliberal policing that they endure on a daily basis. Allied to this corrosive process, is the shameless role of the mass media in constructing and reconstructing commonsense attitudes towards those in poverty. An analysis of 6000 newspaper articles on the subject of social security, published between 1995 and 2011, found that 'the most immediately striking aspect perhaps is just how much of the coverage refers to benefit fraud. Remember that rates of fraud are between 0.5 per cent – 3 per cent depending on the benefit in question. But 30 per cent of all articles in the dataset refer to fraud. This is much higher for the tabloids ...[16] Similarly, in the year up to April 2013, in speeches made by ministers from the Department of Work and Pensions (DWP), and in press notices released by the same department, there was an increase in the use of terms such as 'dependency' 'entrenched' and 'addiction' compared with the last year of the Labour government's time in office. Crucially, fraud, which accounted for less than 1 per cent of the overall benefits bill was mentioned 85 times while 'entrenched' was mentioned 15 times, 'addiction' 41 times and 'dependency' 38 times in speeches by ministers in the department.[17]

Finally, and ironically given the mendaciousness attributed to the poor, the ideological battle to socially construct a particular, eviscerating 'truth' around their behaviour is taking place in the context of a 'generalised pathology of chronic mendacity [which] seems to be a structural condition of global capitalism at the beginning of the twenty first century ... unprecedented levels of secrecy, obfuscation, dissembling and downright lying ... now characterize public life'.[18] Thus, the capacity to have a serious and informed debate about crime, prisons and social welfare, was, and is, increasingly hindered by this 'chronic mendacity' which has become obvious across a range of political and cultural institutions: misleading crime statistics, misleading welfare statistics, misleading 'problem families' statistics as well as the revelations concerning 'Plebgate', Hillsborough and phone hacking, all of which, in one form or another, come back to the question of whose truth and what justice? The fact that those in power, of whatever political persuasion, could preside over a system that saw the hacking of a murdered teenager's phone says something profound about the priorities of the powerful: a forensic focus on the poor while relegating their own lamentable, immoral and often-illegal

The fact that those in power, of whatever political persuasion, could preside over a system that saw the hacking of a murdered teenager's phone says something profound about the priorities of the powerful . . .

15.   Hansard 17 January 2013: col 1051.
16.   Elizabeth Finn Care and the University of Kent (2012) Benefit Stigma in Britain London: Elizabeth Finn Care.
17.   The Guardian, 6 April 2013.
18.   Panitch, L. and Leys, C. (2005) 'Preface' in Panitch, L. and Leys, C. (eds) The Socialist Register 2006 London: The Merlin Press pp vii-x p vii.

behaviour to the margins of the perpetual surveillance and regulatory network that has come to dominate the lives of the powerless while leaving the lives of the powerful effectively unscathed, untouched and unrestrained.

Programming the Poor in Prison

For those who are being pushed to the margins of an increasingly fragile and vanishing net of welfare support, the spectre of the prison awaits them. In the second decade of the twenty first century, the institution continues to 'warehouse [the] social dynamite and social wreckage'[19] generated by neoliberal capitalism. Importantly, this process is not new but has been part of the prison's role since it emerged at the end of the eighteenth century, a point that is often omitted in the academic debates around contemporary 'shifts' in penal policy, debates which underestimate historical continuities and overestimate historical discontinuities in the operationalisation of state power.[20] Penal power is being augmented and reinforced by the programmes that are being introduced and consolidated inside which are legitimated by old and new 'judges of normality' dedicated to normalising the attitudes and behaviour of this social wreckage and dynamite. An example of this process can be seen in Liverpool prison.[21] The prison is integral to a local structure of state power involving the policing of a city which is not only one of the poorest in the country but is also 'the easiest place to die — 35 per cent above the national average'.[22] In December 2011, the institution was operating as a warehouse for short term and remand prisoners. According to the Chief Inspector of Prisons, over 63 per cent of the prison's population, were serving 12 months and under.[23] A range of programmes were in operation in the prison to normalise the deviant. However, even on their own terms, these programmes, based on self-surveilling, responsibilisation strategies, and heralded as the

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panacea for the elimination of the feckless criminality of the confined, were problematic. For example:

... resettlement resources were not adequate to meet the needs of the population held. There were significant backlogs of the reviews necessary to address prisoners' offending behaviour and little planning for remand or short term prisoners. Housing services were stretched and some prisoners did not have accommodation confirmed until the day they were released; during the inspection just before Christmas, some prisoners genuinely expressed great anxiety that they would be homeless after release.[24]

Similar critiques were made of the offending behaviour programmes:

Implementation of the learning skills strategy had been slow and few skills acquired at work were recognized or led to qualifications. There were very few vocational trading places ... More offending behaviour programmes had been introduced but the range of courses was too limited to meet the prison's aim of becoming a community prison. Gaps had been identified for alcohol-related offending, anger management, domestic violence and victim awareness. Prisoners were unable to be assessed for programmes not run at Liverpool.[25]

Therefore, despite the 'rehabilitation revolution' articulated by successive governments, the reality of penal power remains as debilitating and disempowering as ever for the short-term, petty recidivist. Furthermore, even if the programmes were accepted as offering some form of rehabilitation to offenders, there is another question which is rarely, if ever, addressed by those who advocate introducing these programmes: what are prisoners being

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19. Parenti, C. (1999) Lockdown America London: Verso p. 169.
20. Sim, J. (2009) Punishment and Prisons London: Sage.
21. For a fuller account of this issue see Cooper, V. and Sim, J. (2013) 'Punishing the Detritus and the Damned: Penal and Semi-penal Institutions in Liverpool and the North West' in Scott, D. (ed) Why Prison? Cambridge: Cambridge University Press pp 189-210.
22. Armstrong cited in Coleman, R. and Sim, J. (2013) 'Managing the mendicant: regeneration and repression in Liverpool' in Criminal Justice Matters, 92, June, pp 30-1 p 30.
23. Cited in Cooper and Sim (2013) see n 21 p 201.
24. Ibid.
25. Ibid.

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rehabilitated to? For Pat Carlen, 'rehabilitation programmes in capitalist societies have tended to be reserved for poorer prisoners' and therefore 'have not been designed for corporate criminals.[26] As she goes on to point out:

> *... re-integration, re-settlement or re-entry are often used instead of re-habilitation. Yet all of these terms, with their English prefix 're', imply that the law breakers or ex-prisoners, who are to be 're-habilitated'/'re-integrated'/'re-settled' or 're-stored', previously occupied a social state or status to which it is desirable they should be returned. Not so. The majority of prisoners worldwide have, prior to their imprisonment, usually been so economically and/or socially disadvantaged that they have nothing to which they can be advantageously rehabilitated.[27]*

She concludes by noting that justifying 'what works' as a mechanism of crime control:

> *has gradually erased the citizen-subjects of the welfare state from the penal frame, replacing them with the risk-laden, techno-entities of surveillance and security fetishism. Moreover, whatever the official claims regarding 'what works', criminal prisons in most jurisdictions are still primarily for the poor, the mentally-ill, the homeless, ethnic minorities and the stateless — and yet!!! the belief in rehabilitation as a panacea for all penal ills lives on![28]*

These programmes are also clearly differentiated by gender. Either way, their desired goal is the individualisation and the normalisation of the abnormal poor, a process that leaves the wider structures of power and powerlessness, violence and intimidation, degradation and humiliation, that give meaning to, and set the parameters for, how their lives are lived, untouched, unaddressed and unaffected. Or as Carlen succinctly points out with respect women's offending, the programmes see their criminality as 'being in the [women's heads], not their social circumstances'.[29]

Thinking Differently

Stuart Hall has argued that 'history is never closed but maintains an open horizon towards the future'.[30] For Hall, ideas are fluid, contestable and open to different, more utopian outcomes. Hall's insight can be applied to crime and punishment in that it allows for the possibility that 'good sense' discourses around law, order and welfare can be developed, and, indeed implemented, contesting those policies that reinforce commonsense, regressive mentalities in these and other social and political arenas.[31] Bearing his point in mind, there are three areas the paper now highlights that might be considered pertinent to thinking critically, and honestly, about an alternative penal, criminal justice and welfare future.

First, any discussion about crime and deviance should recognise the unadulterated hypocrisy of the powerful, elected and unelected, when they highlight the offending behaviour of the poor. Their rampant criminality and deviance, cutting across a range of social areas, and the profound harms, including death, that this behaviour generates, is still marginalised at least in political debate in favour of the endless probing and testing of the poor — their habits, lifestyles, psychological fragilities and family structures. Failing to recognise this, (an omission that is not unique to politicians and the media but remains central to the often-facile and endless, empirical chatter about crimes of the powerless that continues to bedevil disciplines like Criminology and Psychology) inevitably leads to the perverse and skewed picture of crime and deviance that has underpinned political, popular and academic debates for decades.

Second, what about the resurrection of rehabilitation as a discourse by the coalition

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26. Ibid p 202.
27. Ibid.
28. Ibid.
29. Carlen cited in Ibid p 206.
30. Hall, S. (2011) 'The neoliberal revolution' in Soundings, 44, Summer, pp 9-27 p 26.
31. 'Good sense' is taken from Gramsci's use of the term. See n 20 p 129.

government? In practice, it has rarely, if ever, been a central goal of the penal system, historically or contemporaneously.[32] The idea that it is being brought back into the penal system conveniently ignores this fact. Programmes, policies and practices of reform have consistently been confronted by the formal and informal apparatuses of punishment that have had, and continue to have, a detrimental and negative impact on the everyday lives not only of the confined but also of those prison staff who have attempted to break through the punitive and degrading discourses that have legitimated, and given meaning to, the landing culture of prison officers in the UK.[33] Thus, an alternative, and more critical, perspective would mean confronting and deconstructing this culture and, instead, replace it with the philosophy and practices that have been operationalised in a number of institutions over the last fifty years, such as the Barlinnie Special Unit, Parkhurst 'C' Wing and Grendon Therapeutic Community Prison. However, there is an obvious problem. While these institutions are amongst the few attempts that have been made to develop genuine, empowering and holistic rehabilitative models of confinement, they have either been abandoned, after years of official and media subversion and criticism, as in the cases of the Barlinnie Special Unit and Parkhurst 'C' Wing or, in the case of Grendon Therapeutic Community Prison, have remained marginal to the 'real' concerns of penal policy and practice which is punishment.

In a society dominated by the demands for more law and better order, the social construction of these places as 'easy' options has meant that their success in changing individual behaviour, particularly with respect to the masculine subjectivity and 'self-estrangement'[34] that gives meaning to many, though not all forms of officially recorded criminal behaviour, was, and is, continuously undermined by their alleged pandering to the abnormal in the form of the convicted criminal. Ironically, as the evidence suggests, these places, can, in fact, be *harder* environments for the confined to do their time,[35] a fact lost on the contemporary preachers

of punishment whose valorisation of certain well-chosen victims of crime, while ignoring others, particularly in the area of gendered violence, only further underlines their hypocritical attitude towards crime and deviance. Therefore, recognising the contribution made by these institutions, and embedding their philosophy and practice within the *whole* penal system — not just the prison system — would provide a new sense of direction for a system that remains locked in a dispiriting, and endless cycle of crisis-reform-crisis that ultimately does little to change the behaviour of the confined, or in the state's terms, to rehabilitate them.

Finally, given the political and media obsession with the decadent fecklessness and disorderly actions of the poor and the powerless, and their alleged lack of moral responsibility, what might an alternative and critical vision of moral responsibility look like? As Pat Carlen observed over two decades ago, thinking about the radical transformation of the criminal justice system would involve developing more sophisticated models of culpability, responsibility and accountability.[36] Building on the work of Steven Box, she argued for an alternative vision of justice which would begin by recognising the material circumstances in which the vast majority of offenders lived their lives. In making this argument, Carlen, like Box, eschewed reductive, deterministic views of human behaviour and, instead, envisioned a more expansive, understanding of behaviour built on recognising that social action involves a dialectic between individual agency, human meaning and broader structures of social and economic power. Therefore:

> ... although people choose to act, sometimes criminally, they do not do so under conditions of their own choosing. *Their choice makes them responsible, but the conditions make the choice comprehensible. These conditions, social and economic, contribute to crime because they constrain, limit or narrow the*

> # Building on the work of Steven Box, she argued for an alternative vision of justice which would begin by recognising the material circumstances in which the vast majority of offenders lived their lives.

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32.   Ibid.
33.   Ibid.
34.   Epstein, M. (1995) Thoughts Without a Thinker Cambridge: Basic Books p.159.
35.   Stevens, A. (2013) Offender Rehabilitation and Therapeutic Communities London: Routledge.
36.   Carlen, P. (1988) Women, Crime and Poverty Milton Keynes: Open University Press p. 162.

choices available. Many of us, in similar circumstances, might choose the same course of action.[37]

Conclusion

Marx made the point that the workhouse in the nineteenth century was a 'place of punishment for misery'.[38] Two hundred years on, the everyday humiliations experienced by those caught in the pliers of welfare austerity, indicate that the punishment and misery he saw in nineteenth century institutions has not only *not* disappeared but has become intensified through a deadly combination of panoptic and synoptic power networks which leaves those at the sharp end of this process as dispossessed and bereft as ever. Given the destructive nature of the social and economic policies pursued by successive governments, the sense of entitlement of the powerful and their often-sneering disdain for those who are not, in the neoliberal sense 'one of us', contemplating the alternative visions outlined above may appear to be hopelessly idealistic. However, *not* to think in these terms, will mean the continuation of a pathological system governed by the hypocritical, exploitative behaviour of the degenerate few which will continue to generate degrading desolation for the increasingly desperate many. The penal/welfare industrial complex that is being consolidated is now part of that process, despite the constant, but ultimately delusional, references to the chimera of rehabilitation articulated by the majority of state servants and politicians who share a 'correspondence of interests'[39] *not* to confront the wider, acidic structures of power and powerlessness that lacerate the potential for individual growth and annihilate the spirit and space for collective development.

The 'healing' of the 'disordered subjectivi[ties]'[40] of the poor demands thinking about social justice. However, social justice demands empathy and empathy demands self-awareness and self-scrutiny. At this historical moment, this empathy, self-awareness and self-scrutiny are the last things on the collective consciousness of the powerful, and the institutions of the state, which, despite the contradictions and contingencies between them, ultimately legitimate and defend their interests and their parasitical behaviour. The current state-defined debate about rehabilitation is a zombie idea for a zombie institution operating in zombie times.[41] It will contribute little, if anything, to solving the complex social problems facing those existing spectrally in the austere wastelands of twenty-first century Britain.

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37. Box, cited in Ibid, emphasis in the original.
38. Marx cited in Palmer, B. (2013) 'Reconsiderations of Class: Precariousness as Proletarianization' in Panitch, L., Albo, G. and Chibber, V. (eds) The Socialist Register 2014 London: The Merlin Press pp 40-62 p. 55.
39. Hall, S. and Scraton, P. (1981) 'Law, Class and Control' in Fitzgerald, M., McLennan, G. and Pawson, J. (Compilers) Crime and Society: Readings in History and Theory London: Routledge pp 460-497 p 474.
40. Mitchell cited in Moloney see n 2 p. 150.
41. See Little, B. (2013) 'Parties, causes and political power' in Soundings, 55, Winter, pp 25-38. Little develops the concept of the zombie from the work of Henry Giroux and Andrew Quiggan. The subtitle of Quiggan's book on Zombie Economics — 'how dead ideas still walk among us' — seems entirely relevant to current, state-inspired penal philosophies and practices.

Relinquishing control?

An exploration of the experiences of staff working in a Therapeutic Community prison

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The majority of the prison service operates on a control orientated organisational model. Such models have received a good deal of attention within the academic literature, in relation to the traditional role of prison officers and the effects of working within a prison setting. However, little evidence exists specific to the unique working environment of a Therapeutic Community (TC) prison, and the experiences of staff in working in these settings in what is traditionally perceived as a role focused on control. This lack of literature prompted our in-depth qualitative study, conducting a thematic analysis of data gained from nine semi-structured interviews carried out with prison officers at HMP Grendon. A number of dominant themes were identified: security versus therapy; benefits of dynamic security; the importance of interaction; 'looking past the uniform'; and finally, adapting to a Therapeutic Community. This paper reports the methods of control utilised within a TC prison, from the perspective of prison officers.

Background

This study aimed to review the experiences of prison officers working at HMP Grendon. Of the one hundred and forty prisons in England and Wales, just five currently offer a vision of 'offender management' based upon the principles and aims of a democratic therapeutic community. Grendon — a category B (medium secure) establishment for up to two hundred and thirty five men is the first, largest and only fully dedicated TC prison in the UK.[1] Although the establishment has changed over time, it has kept its unique regime of therapeutic care for offenders. Grendon accepts a range of prisoners, including those serving life sentences and those with complex needs, such as personality disorders and high levels of psychopathy. Offenders applying to the prison must agree to a commitment of twenty-four months to complete therapy, showing that they have a genuine desire to change. The preferred TC term for inmates is 'residents'.[2] and so this will be used throughout.

Existing literature[3] has identified four complementary and interdependent TC principles: first is the principle of democratization, which ensures that each member of the community can participate equally in therapeutic and administrative decision making; second is communalisation, where facilities and domestic arrangements are shared; third is permissiveness — this simply means that residents tolerate other's behaviours that might normally be perceived as deviant; finally is the principle of reality confrontation, which highlights that although problematic behaviour is tolerated, it does not pass unnoticed or without criticism. This is achieved predominantly through small therapy groups, where the effects of problematic behaviour are discussed and explored. These guiding principles apply equally to staff and residents.[4] The basic principles of a democratic TC allow the residents to influence and change the way they interact within an agreed decision making structure.

When reflecting on the four principles stated above, it is clear that a TC is designed to give a great deal of responsibility to the residents and promotes the idea that residents and staff are equal, with a focus on the encouragement of an open 'culture of enquiry'. A 'culture of enquiry' refers to residents being mindful of each other's needs, problems, and how to negotiate their place in the community and appreciate the interdependence of all members.[5]

Review of the Literature

This research sought to explore the specific experiences of prison officers at Grendon, in relation to aspects of control. The role of a prison officer is

1. Shuker, R. (2010). Forensic therapeutic communities: A critique of treatment model and evidence base. The Howard Journal of Criminal Justice, 49 (5), 463-477.
2. See N.1.
3. Rapoport, R. (1960). Community as Doctor: New perspectives on a therapeutic community, in: Shuker, R. & Sullivan, E (eds), Grendon and the Emergence of Forensic Therapeutic Communities: Developments in Research and Practice. Chichester: Wiley-Blackwell.
4. Parker, M. (2007). Dynamic Security: The democratic therapeutic community in prison. London: Jessica Kingsley Publishers.
5. Haigh, R. (1999). The quintessence of a therapeutic community: Five universal qualities. In: P. Campling & R. Haigh (Eds) *Therapeutic Community: Past Present and Future* (246-257). London. Jessica Kingsley.

traditionally seen as focused on control and security. Recent descriptions in the academic literature highlight that 'prison work is based upon the use of power and authority deployed through human relationships' and 'enforcing rules by the book.[6] The role of a prison officer is seen as an 'authoritative' role where the staff member has 'control' over the prisoner. However, over time the role of a prison officer has adapted to encompass more of the rehabilitative aspect of the prison environment. TC prisons take these principles further. Indeed, Grendon is unique as some security principles and procedures need not apply as they could damage therapy.[7] For example, a 'segregation unit' does not exist at the prison as unacceptable behaviour is primarily challenged in group work with the whole wing and staff. Through this example we can see how staff members must relinquish some control to the residents in order to collaborate and work within a TC.

There are three main aspects to security within a prison setting: *Physical Security; Procedural Security;* and *Dynamic Security*. The latter captures a practical way that prisons might be managed safely as well as decently.[8] Dynamic Security essentially explores a way of working that relies upon the traditional strengths of prison staff, developing relationships with residents, establishing trust and effective communication, therefore 'knowing what is going on'.[9] This aspect of security is based on the understanding that good relationships with prisoners will mean that they will communicate more effectively with staff. Furthermore, residents are thought to be less likely to be disruptive if they regard officers as fair, reasonable and trustworthy.[10] At the same time staff members must maintain their authority and distinctiveness from prisoners. When considering this in relation to the principles of security outlined previously, it is clear that a well-balanced relationship between prison officer and prisoner is vital. The additional benefits of a respectful relationship between resident and prison officer may be that staff can glean information that may indicate what 'has' or is 'about' to happen within the prison,

thereby demonstrating that effective dynamic security is the most valuable and unobtrusive form of control.[11]

While existing literature has looked at how the reliance on dynamic security may impact residents,[12] no research to date has explored any effect on the performance or personal experiences of prison staff. However, some studies have begun to explore the experience of staff working in TC prisons more broadly.[13] These studies have adopted a qualitative approach, allowing us to increase our understanding of the issues affecting staff working in these relatively unique environments.

There is a clear case for furthering our understanding of aspects of control in a TC prison, how staff experience this, and how it may affect them. This current study employed semi-structured interviews with nine prison officers working at Grendon. Five participants had worked within other establishments, while four had only ever worked at Grendon. Participants had worked within the prison service from three years to twenty-four years.

Discussion of Findings

The findings are presented under the key themes that emerged from thematic analysis of the research interviews: 'You have to wear two hats': Security versus therapy; Benefits of dynamic security; The importance of interaction; Looking past the uniform; and finally, Adapting to a therapeutic community. Sub themes are also discussed. Quotes that represent the majority view are provided throughout the findings presented below.

'You have to wear two hats': Security versus therapy

A number of themes emerged when participants were asked about their role within HMP Grendon. All nine participants spoke about their experiences and struggles of balancing their role as an officer (security) and the role of a group facilitator (therapy). In an attempt to fully explain and represent the experiences of staff, this theme

> Through this example we can see how staff members must relinquish some control to the residents in order to collaborate and work within a within the TC.

6 .   Liebling, A. (2011). Distinctions and distinctiveness in the work of prison officers: Legitimacy and authority revisited. European Journal of Criminology, 8 (6), 484-499.
7 .   Parker, M. (2007). Dynamic Security: The democratic therapeutic community in prison. London: Jessica Kingsley Publishers.
8.   See n.7.
9.   See n.7.
10.   See n.7.
11.   See n.7.
12.   Greenall, P.V. (2004). Life in a prison- based therapeutic community: One man's experience. The British Journal of Forensic Practice, 6, 33-38.
13.   Kumari, N., Caulfield, L.S. & Newberry, M. (2012). The experiences of women working in a therapeutic community prison. Prison Service Journal, 201, 7-11.

is presented as two sub themes; *Dual Role* and *Finding a Balance*.

Dual Role:

All nine participants interviewed within this study acknowledged that they had a dual role as a prison officer in a TC, referring to this as 'wearing two hats'. This was something that participants understood and explained they were comfortable in switching between the two roles.

Participants explained that there were certain tasks they had to carry out as an officer and some they had to carry out as a group facilitator. Although, participants stated that sometimes the roles 'knit together quite nicely and other times the gap is huge, you have got the HMP side and you have got the TC side' *(participant 3)*.

When the officer and therapy roles overlapped, participants explained that they sometimes needed to 'change their approach' when moving from security based tasks into therapy, in order to work effectively with the residents. Participant one explained how he had to 'wear two hats, up on the landing and when you get into groups and they are baring their bones you have to take a step back and say I'm not an officer now' *(participant 1)*.

'Finding a Balance'

Participants spoke about the importance of finding a balance between the role of an officer and involvement in therapy, expressing that this balance is important for their own 'sanity' and also 'safety' as being involved in therapy can at times be 'overwhelming'. The general consensus was that their 'primary role is an officer and their secondary is a group facilitator' *(participant 3)*. Participants acknowledged that this can be a struggle; however they explained that 'first and foremost we are here as prison officers and we are here for that very reason the traditional security and secondly we are here to do therapy, so it's like wearing two hats' *(participant 7)*. Participants explained that in order to find this balance, 'boundaries' need to be set within the community. Participants stated that their relationship with residents really helped them to 'switch' between the roles, as the men on their wing 'understood'. Participant eight supported this in stating; 'they get to understand you have got a uniform job and you have got a therapeutic job'.

> Participants spoke about how the principles of a TC allow them to be more aware and that this is not seen as 'grassing' by residents, unlike in a mainstream prison, but is seen as 'challenging'.

Benefits of Dynamic Security

All nine participants spoke about how residents are 'encouraged to bring a lot of what goes on upstairs, downstairs', meaning that what happens in cells and corridors should be discussed in therapy groups. This is explained as residents being 'open and honest' with staff and relates to dynamic security. Participants made 32 references to how dynamic security facilitates a greater awareness of the prison outside of group sessions. Through this, prison staff get a better understanding of 'what is going on rather than just the surface, you get to see underneath' *(participant 5)*.

Participants placed importance on dynamic security: 'the control is that there is less and less mechanical restraints, like locked doors, the residents have more freedom to wander around, you rely more on dynamic security so you know them better and when something doesn't feel right, you think they don't normally do this' *(participant 8)*. The benefits of dynamic security were discussed, further explaining that when certain residents are 'challenged', they will often thank the staff and fellow residents as they often felt 'they were going off the rails a little bit and that has brought me back on track' *(participant 3)*.

When discussing the effects of dynamic security at Grendon, participants referred to it as a 'helpful part of security'. One participant used a specific example to explain his experience; 'the last act of self-harm was reported by a prisoner, they felt comfortable enough to come to us and say what was going on, it wouldn't happen anywhere else I don't think' *(participant 3)*. Participants expressed that through residents telling them 'more about what is going on', helps to 'make the job easier'. Participants spoke about how the principles of a TC allow them to be more aware and that this is not seen as 'grassing' by residents, unlike in a mainstream prison, but is seen as 'challenging'. Participants explained that this is due to the 'culture of enquiry', which focuses on equality and tolerance to progress in therapy.

The Importance of Interaction

All nine participants acknowledged that being able to listen and communicate was a main skill required to work in a TC, as it 'promoted a better atmosphere' and allowed them to 'get to know the person better'. The shared community and 'living within a democracy' were highlighted as a factor contributing to effective

communication and that this in turn helps to 'break down barriers and really get to know the individual'. This was a dominant theme within the data set, and three sub-themes emerged; *Challenging behaviour therapeutically*, *'We have control through talking'* and *Positive Staff Relationships*.

Challenging Behaviour Therapeutically

All nine participants spoke about the importance of 'seeing challenging behaviour' as it is essential to 'challenge it therapeutically'. Participants stated that they will always challenge behaviour therapeutically and if this fails they will go down the 'HMP side, such as using nicking's[14] or adjudications[15] if the same thing happens again'. However, participants regarded challenging behaviour as residents 'displaying their offending behaviour'. Interestingly, all nine participants stated that they 'encourage certain behaviour as this allows them really explore and fix it' *(participant 3)*. Participants stated that it is valuable to look at behaviour therapeutically and to really work with the residents at Grendon. Residents coming to Grendon must display a desire to change and officers expressed that because of this 'there is a chance of talking them down and understanding what's behind it' *(participant 4)*.

It was interesting to note that all participants spoke about how Grendon 'gives residents the space to be angry'. When this occurs prison officers explained that it allows them 'to see something in them that's not just their crime, to see an actual person and understand what motivates them' *(participant 8)*. Participants explained how this anger was contained by staff members ability to 'not react themselves'. Through talking and therapy participants were able to challenge behaviour. Participant five summarises this in saying 'if you don't see the anger you can't see the problem, if they don't talk about it, it will still be with them.

'We have control through talking'

Participants did not speak about wanting more control as a prison officer within a TC prison. Participants felt they had 'overall control' as they were 'responsible' for the 'day to day regime'. While participants did speak about times they had felt 'frustrated' in community meetings, they ultimately felt comfortable as they knew the 'final decision' came to staff.

Aspects of control in a mainstream prison were briefly discussed: in a 'system prison we have control over every minute of their day'. However, the majority of participants stated that they felt a different type of control at Grendon, such as 'control through talking' and dynamic security as discussed above. Overall participants felt that 'sitting down and talking is more effective than rolling around on the floor and putting someone in handcuffs' *(participant 1)*.

Participants stated that if they needed to they would use physical control. However participants felt that they could 'de-escalate' the situation as they have 'the communication skills here'. The relationship with the residents and the environment of a TC were two main reasons why participants felt they had control through talking, as opposed to more 'traditional methods of constraint'.

Participants spoke about how important it was to have effective communication and listening skills as this was a main contributing factor to the relationship they formed with residents. By seeing and challenging behaviour participants concluded that they were able to 'open up a better dialogue' with residents, which made them understand individuals more. In doing this a great deal of tolerance was needed 'to deal with a lot of behaviours' *(participant 7)*. Tolerance was discussed as a vital trait to work in a TC. Tolerance underpinned this whole theme as by having tolerance, participants felt they were able to challenge behaviour therapeutically and exercise control through talking.

> Tolerance underpinned this whole theme as by having tolerance, participants felt they were able to challenge behaviour therapeutically and exercise control

Positive Staff Relationships

When talking about the tolerance needed to work in a therapeutic community, all nine participants placed importance on the positive relationships and teamwork of the staff they worked with at Grendon. Participants spoke about how a 'TC wouldn't work without staff teamwork', whether they 'have a rant in the tearoom' or being sensitive towards one another.

Participants expressed how they felt that both sensitivity and supervision helped them a great deal at Grendon. Supervision was highlighted as a way to 'get your point across, an avenue to voice your opinions or frustrations' *(participant 3)*. Participants felt this helped them to release concerns and opinions, so they 'didn't build things up' and helped them to 'get their head

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14. *Nicking:* A slang term for being accused of breaking prison rules and placed on report.
15. *Adjudication:* The formal term for a 'nicking'.

around it'. Similar to this, feedback between colleagues was noted as an important method for officers in a TC, as it helped them to 'learn on the job'. Overall participants felt the relationship and interaction with other staff helped them in their role as a prison officer and in turn helped them to work effectively within a TC.

Looking past the uniform

All nine participants placed emphasis on the unique relationship between staff and residents at Grendon. Firstly, all participants stated that their role as a prison officer was 'accepted and respected' by residents. The phrase 'looking past the uniform' was used a great deal, meaning participants felt they were more than just a 'black and white shirt'. Participants stated that they felt accepted by residents as the 'nature of a TC' allows them to 'learn a little bit more about you and respect the role you play'. It is interesting to note that all nine participants felt that by using first name terms within a TC a different relationship could be formed with residents, forming 'mutual respect' that 'breaks down barriers'. The use of first name terms was expressed as contributing to a 'different relationship with residents'. In discussing this, participants referred to the 'us and them' culture that exists in mainstream prisons. Participant three stated that 'calling them by their last name and expecting them to call you Mr, that's what creates that them and us'. The majority of participants regarded the unique relationship between staff and residents as a main benefit to working in a TC as it 'allows you to work together'. Breaking down 'barriers' and working together on a 'level basis' were highlighted throughout discussions with all participants. As a result, participants felt this contributed to dynamic security and really emphasised the effectiveness of a TC.

The relationship between staff and residents was regarded as positive, and eight of the participants spoke about how this can sometimes affect their decision making process. Participants spoke about how they 'got to know the individual more' therefore certain behaviours that they displayed could be understood by the member of staff. Participant eight explained that 'this worked both ways as you get to know the person better, so you are better informed with your decisions'. Overall, knowing the individual better made it possible to 'see the bigger picture' and 'view situations differently'.

Adapting to a therapeutic community

When talking about their experiences of working within Grendon, all participants focused on the nature of

> The majority of participants regarded the unique relationship between staff and residents as a main benefit to working in a TC as it 'allows you to work together'.

a TC, explaining that there are a lot more 'grey' areas. Furthermore, all participants spoke about their *'transition into a therapeutic community'*.

Black, White and Grey Areas

Five participants regarded Grendon as a 'more relaxed environment' than other prisons. In explaining this, participants discussed that the 'different processes' and 'culture' meant a lot of the daily 'responsibility is given to the residents'. Although the relaxed nature of Grendon was seen as a positive for participants, six out of ten participants expressed that 'everything was not black and white,' meaning there were a number of 'grey' areas.

These grey areas were regarded as a main challenge for participants, in relation to aspects of control. Participant three explained that, 'it's about where that line is really, it's not second nature here so you can sometimes go past that line'. There was general consensus amongst participants about this as in 'mainstream prisons there is a firm line that if they don't do what they are told they are restrained'. By not having a 'firm line' and defined 'black and white' boundaries within a TC, participants felt they were 'going against training in some aspects'. The decision making process within Grendon was seen as 'unique' and participants felt that these 'grey areas' made them deal with things on a 'case to case basis'.

Transition into a therapeutic community

Eight participants stated that they found their transition into a TC 'challenging'. Participants felt that within their training they were just 'taught the regime in a normal prison'. Therefore participants felt there was a real 'struggle' between what they had learnt in training and coming to Grendon. All participants expressed that their training did not include the Grendon 'way' or 'regime'. As a result participants stated they experienced a 'culture shock' when coming to Grendon, as they didn't feel 'prepared'. Participants felt that their prison training was very 'generic' and an emphasis was given on a 'broad overview of the prison system'.

Seven of the participants felt that they were 'not prepared' for the differences of a TC, from either training or previous employment. Participants who were still relatively new to Grendon (2-5 years), stated their training did mention how Grendon would be different but 'no detail was given'. Participants regarded training as a 'guide' but explained that it was 'totally different' when they came to the prison. As a result of this, six participants stated that they 'learnt on the job'. This process was

considered easier at Grendon, as participants felt they were 'eased into the job'. However, participants sometimes felt confused in the beginning when it came to handling situations related to discipline.

When reflecting on their transition to Grendon, all nine participants gave suggestions about what did or would have helped them when adapting to working in a TC prison *(see figure 1)*.

Conclusions

All participants held the view that aspects of control are differ between HMP Grendon and the main prison estate, and explained that they used such methods as dynamic security and control through talking, as opposed to a reliance on physical and/or procedural control. All nine participants expressed they did not need more control at Grendon. When expanding upon this, participants placed importance on their ability to challenge behaviour therapeutically, addressing challenging behaviour on a case-by-case basis, as they had the ability to understand the residents and why they were displaying certain behaviours. Participants reported that they felt comfortable as an officer working in this environment. However, they drew attention to their dual role, switching between security based tasks and involvement in therapy.

When discussing the effectiveness of a TC, participants placed emphasis on the relationship they had with residents at Grendon. This relationship was described as the primary reason for successful and respectful control

and security. Participants explained that due to resident's individual desire to engage in therapy, everybody 'was working to achieve the same goal'. However, officers within this study felt that there were a number of 'grey' areas within a prison TC, which made them question themselves and their role. When exploring this issue further, participants discussed aspects of their training. Participants often felt that they were going against their original officer training, and suggesting a need for more TC focused training to help understand better the boundaries and processes of a TC. Figure one includes suggestions put forward by participants, which would help in the training of officers specifically working in a TC. Participants often felt that they were going against their original officer training, and suggesting a need for more TC focused on training to help understand better the boundaries and processes of a TC.

Overall, participants did not focus on the idea of relinquishing control to residents at Grendon, but more on the shared decision making structure of a TC. Participants explained how this allowed everybody to work together and ultimately support the goals of the TC prison.

Through employing a qualitative methodology this research has captured the views and experiences of nine officers at HMP Grendon, providing an insight into this under-researched area. While it is important to note that the sample size is small and so not representative of all staff working in TC prisons, the findings provide a depth of data upon which further research might be based.

Figure 1		
Participant	**Suggestions**	**Why?**
1	Open Day Hand-outs/Information pack DVD	To see how Grendon works and highlight the main aspects of a TC
2	Induction booklet	A programme to teach you the terms/ ethos of Grendon
3	Work in a mainstream prison before coming to Grendon	'Learn your jail graft first. Seeing the ugly side of prisoners in mainstream will help you to be more aware at Grendon'
4	Mentor/ buddy system	To provide a formal structure to help individuals adapt
5	Personality Disorder Training	To gain further awareness and knowledge of the different personality disorders officers are likely to encounter
6	Being trained at Grendon	'This really helped as tutors were from Grendon, they could prepare us'
7	TCAT[16] training	Before coming to Grendon to fully prepare staff for working in this environment
8	Individual coping skills training	To understand how material can affect you (realisation)
9	TCAT before Information booklet Mentor	Having a TCAT before to be more aware. Information booklet to highlight the terms and processes at Grendon

16. TCAT – Therapeutic Community Accredited Training is specific training related to a TC. Students complete 3 modules of study and there must be a gap of approximately six months between completing each module.

Masculinity and Imprisonment for Public Protection

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The IPP sentence, now abolished for newly sentenced prisoners, has had a lot of issues during the course of its development. In an earlier edition of the Prison Service Journal, Addicott[1] argued that there are numerous frustrations experienced by IPP prisoners, including a lack of information and legitimacy, feelings of uncertainty and indeterminacy, a disruption to the life course, a loss of independence and identity, and the frustrations of trying to achieve release via the Parole Board. Drawing on theories of 'responsibilization'[2] or the imposition of new pains of imprisonment,[3] the sentence was intended to force individuals to change their behaviours and risk levels as conditions of release. What works surrounding IPP sentences rarely mention however, is the arguably gendered — specifically masculine — heart to many of the frustrations experienced by men, and the impacts such conditions have upon masculine identity. Although note has been made of the damage that the threat of indeterminacy of incapacitation can cause,[4] the implications for gendered identity are rarely theorised. Many would perceive such a shift in risk to impact upon identity, but not necessarily gendered identity. Yet gender is sensitive to external pressures in ways that many other identity markers such as race and ethnicity, are not. For a white man in prison, for example, it is unlikely that his 'whiteness' will be called into question or put to the test, whereas his manliness almost certainly will be.

This article contends that IPP sentences for men actually result in a process of 'gendered risk-shift' — the risks that the offender was originally perceived to pose to the public (which resulted in the imposition of the IPP sentence), are shifted back onto the male prisoner.

Dangerousness, Specified Offences and Masculinity

Consideration of gender and identity is important in the adult male prison estate as prisons are highly masculinised spaces, filled with many men that have often demonstrated their masculinities in socially illegitimate ways in order to merit incarceration in the first place. Messerschmidt argues that 'For many men, crime may serve as a suitable *resource* for 'doing gender''.[5] As such, crime can be a means through which men perform their gendered identities, particularly when other legitimate resources for such gendered displays such as heterosexual relationships, fatherhood, and employment are seemingly unavailable or restricted. The notion of gender being a form of construction and/or performance has been posited by numerous theorists,[6] and has been noted in the prison setting through the corporeal displays of masculinity on, through and by prisoners' bodies.[7] Such performances occur for the benefit of an audience — Kimmel[8] argues that masculinity is enacted for the benefit of other men who in turn grant masculine status and achievement, whether that be self imposed through the male prisoner's own personal gendered identity structures, or more forcibly by the prisoner community within which he lives (including staff and prisoners). As such, prisons are filled with men who have already often displayed the fact that they lack access to legitimate resources for acting out their

1. Addicott, P. (2012) "Frustrations within': Imprisonment for Public Protection (IPP)' *Prison Service Journal*, No.201, May, 24-30.
2. Garland, D. (1996) 'The Limits of the Sovereign State: Strategies of Crime Control in Contemporary Society' *British Journal of Criminology*, Vol. 36(4), 445-471.
3. Crewe, B. (2011) 'Depth, weight, tightness: Revisiting the pains of imprisonment' *Punishment and Society*, Vol. 13(5), 509-529.
4. Jewkes, Y. (2005) 'Loss, liminality and the life sentence: managing identity through a disrupted lifecourse' in Liebling, A. and Maruna, S. (Eds.), *The Effects of Imprisonment*, Cullompton: Willan Publishing; Mason, G. L. (1990) 'Indeterminate Sentencing: Cruel and Unusual Punishment, or Just Plain Cruel?' *New England Journal on Criminal and Civil Confinement*, Vol. 16(1), 89-120.
5. Messerschmidt, J. W. (1993) *Masculinities and Crime*, Maryland: Rowman and Littlefield Publishers, Inc., p84
6. West, C. and Zimmerman, D. H. (1987) 'Doing Gender' *Gender and Society*, Vol. 1(2), 125-151; Butler, J. (1999) *Gender Trouble: Feminism and the Subversion of Identity*, London and New York: Routledge.
7. Sloan, J. A. (2011) *Men Inside: Masculinity and the Adult Male Prison Experience*, Unpublished PhD Thesis, September 2011, University of Sheffield.
8. Kimmel, M. S. (1994) 'Masculinity as Homophobia: Fear, Shame, and Silence in the Construction of Gender Identity' in Brod, H. and Kaufman, M. (Eds.), *Theorizing Masculinities*, Thousand Oaks and London: Sage.

masculine personas, and when in prison, such resources become even scarcer.

Prior to the abolition of IPP sentences in the 2012 Act, Schedule 15 of the Criminal Justice Act 2003 specified particular violent offences which qualified for an IPP sentence — over 150 of them, including manslaughter, soliciting murder and malicious wounding. If, as Messerschmidt[9] argues, criminality is the means through which men who lack access to other ways of doing their gender can achieve masculine status, violence must be the most significant of such forms of criminality, albeit taking into account the fact that certain violent offences may actually undermine masculine credentials, such as certain forms of sexual offence and offences against the vulnerable.[10] Violence is the means through which an individual can demonstrate physically that he can dominate and control others — that he is stronger and more powerful, and often to be feared.[11]

Yet the IPP sentence, by the very fact that an individual must demonstrate a reduction in his risk profile to be considered for release, removes the option of many gendered performances for the prisoner, framing his prison experience through the restriction of options of gendered identity performance. Many signifiers of masculinity in prison become unavailable due to their implications in terms of heightening an individual's risk status. In addition, legitimate options for demonstrating masculinity are also restricted. For example, the Sainsbury Centre for Mental Health found that 'Indeterminacy damages relationships with family and friends, particularly for prisoners with children.'[12] Such relationships enable an individual male prisoner to position himself within a normative masculine familial framework and act as signifiers of masculine self — when these are lost, such an establishment of masculinity and male identity becomes somewhat eroded.

> Many signifiers of masculinity in prison become unavailable due to their implications in terms of heightening an individual's risk status.

With such limited resources available, many men in prison use other prisoners in order to assert their relative masculinities, often through processes of differentiation in order to assert individuality.[13] This process, in combination with Kimmel's[14] argument that men attain masculinity through and from other men, means that processes of hierarchical negotiation and individual comparison often occur. One manner in which this occurs is through comparison and differentiation according to sentences being served.

Indeterminacy: IPP vs. Life

Comparisons between sentences are important in prisoners' experiences of imprisonment, with processes of differentiation from other prisoners being a central method through which men attempt to negotiate their masculinities in prison.[15] Although life sentences work in a similar manner, there has been a perception of difference between life sentence prisoners and IPP prisoners within the prison estate. When comparing life to IPP sentences, duration is a key difference. Although both sentences are indeterminate and have the potential to be for life, tariffs for IPP prisoners are often considerably lower than those for life sentence prisoners.[16] The initial use of IPP sentences (and the associated problems) tended to include individuals with extremely short tariffs, and even after the Criminal Justice and Immigration Act 2008 there was a 2 year minimum tariff, substantially shorter than many life tariffs.

It could be argued that the experience of IPP sentenced prisoners is the same as that of life sentenced prisoners in all ways bar the licence conditions — both are potentially for life (despite in reality often being for different durations), require proof of reduced risk to qualify for release, and have a tariff attached — however, it could also be argued that there is another subtle distinction. Both sentences have similar impositions of

9.   Messerschmidt, J. W. (1993). See n. 5.
10. Jewkes, Y. (2002) *Captive Audience: Media, Masculinity and Power in Prisons,* Cullompton: Willan Publishing; Bandyopadhyay, M. (2006) 'Competing Masculinities in a Prison' *Men and Masculinities*, Vol. 9, 186-203.
11. Connell, R. W. (2005) *Masculinities*, Second Edition, Cambridge: Polity Press, p83.
12. Sainsbury Centre for Mental Health (2008) *In the dark: The mental health implications for Imprisonment for Public Protection*, London: Sainsbury Centre for Mental Health, p8.
13. Sloan, J. (2011). See n. 7.
14. Kimmel, M. S. (1994). See n. 8.
15. Sloan, J. (2011). See n. 7.
16. Ministry of Justice (2011b) *Provisional figures relating to offenders serving indeterminate sentence of imprisonment for public protection (IPPs)*, Ministry of Justice: London, p2

indeterminacy, and both are imposed for serious offences, yet the imposition of a 'life' sentence has a different resonance to that of an IPP. 'Life' is associated with certain distinct crimes (such as murder) and there is a certain symbolic status afforded to a life sentence that does not seem to extend to the IPP sentence. Indeed, the Criminal Justice Act 2003 which initially introduced the sentence stated that an IPP could be given in cases where individuals *did not* fall into the categories of being liable to imprisonment for life or justifying a life sentence (see Criminal Justice Act 2003, s225(2)). In the same way that there is a perceived difference in seriousness between rape and sexual assault,[17] life and IPP sentences are seen differently by prisoners. Indeed, the Sainsbury Centre for Mental Health found that 'There are serious and volatile tensions on prison landings because of IPP. It is hard for IPP prisoners to live alongside prisoners with fixed sentences who know when they are getting out of prison regardless of how they behave. Life prisoners, who are also being held in long queues for programmes, blame IPP prisoners for the perceived delays to their sentence progression'.[18]

Finally, the IPP sentence, potentially, is even more challenging than a life sentence — for a life sentence prisoner, they know that this sentence, whether served in the prison or in the community on licence, is for life — there is no escape from this sentence and an individual is able to resign themselves to this fact. There is no such certainty for IPP prisoners, who could — if they change their risk profiles enough — escape from the IPP sentence and, eventually, its licence. This leaves IPP sentenced prisoners in a position of difference, falling neither into the lifer nor determinate sentence identity — both of which are well known and have certain identity markers and expectations ascribed to them. This has the potential to exacerbate the existing uncertainties regarding the prisoner and his identity, as was noted in a piece of research I undertook in 2009 where one of my participants so aptly observed '… *we're not even lifers, we don't know what we are*'.[19]

The gendered state of these anxieties is arguably connected to the hierarchical powers attributed to

> It is hard for IPP prisoners to live alongside prisoners with fixed sentences who know when they are getting out of prison regardless of how they behave.

certain crimes at the expense of others. In the same way that Connell (2005) contends a hegemonic idea of masculinity, with associated *subordinated, complicit* and *marginalised* masculinities, prisoners' offences serve a similar hierarchical positioning function in many instances within the prison estate. Certain offences — such as murder — have intrinsic power and respect afforded to them within the prisoner community (and beyond). Arguably such identity labels applied by virtue of offence-type can be altered and mitigated whilst in prison through other demonstrations of masculinity (and often violence), but the offence a prisoner is serving time for is the easiest means for others to judge the 'type of man' he is, and how to treat him in response. In this way, sentence type plays an important role in the demonstration of one's (gendered) identity to others in the prison. Although not all life sentence prisoners can rely on being granted such symbolic power (sex offenders, for example, are seen very negatively and often fall into the 'subordinated masculinities' arena) the fact that an individual has expressed sufficient violence to be deemed worthy of a life sentence does grant them a different identity to other prisoners. Due to the fact that IPP sentences have been given for a range of offences of variable seriousness (some only being given a 2 year tariff period), these prisoners do not have the immediate masculine power symbol that those serving 'life' are granted, despite them having committed violent offences deemed serious enough by a Judge to deserve an indeterminate sentence. As Kimmel notes, 'the hegemonic definition of manhood is a man *in* power, a man *with* power, and a man *of* power'.[20] The symbolic power of the IPP sentence is diminished through its variable and extensive application. As such, IPP prisoners, despite having committed violent acts, still have the potential to be positioned as subordinate masculinities, putting their gendered identities at risk of being perceived negatively by those granting masculine status (both other men[21] and the individual himself).

17. Kahn, A. S., Jackson, J., Kully, C., Badger, K., Halvorsen, J. (2003) 'Calling it Rape: Differences in Experiences of Women Who Do or Do Not Label Their Sexual Assault as Rape' *Psychology of Women Quarterly*, Vol. 27, 233-242.
18. Sainsbury Centre for Mental Health (2008). See n.12, p7.
19. Sloan, J. (2011) . See n7.
20. Kimmel, M. S. (1994). See n. 8, p125.
21. Kimmel, M. S. (1994). See n. 8.

'Gendered Risk-Shift' and Masculine Identity

Gendered risk-shift, that of the shifting of risk from the public onto the gendered identity of the male prisoner, is subtle. As has been noted, male prisoners are most often sent to prison on an IPP sentence for crimes of violence and sexual offences, which in themselves tend to be highly gendered — either the playing out of masculine dominance and hierarchy struggles with other men,[22] or dominating women.[23] As such, the risks to the general public that these men display are inherently gendered, and it is this gendered dimension of risk that is shifted back onto the male prisoner and his masculinity. When a man is incarcerated, in addition to being immersed within a hyper-masculine sphere in which pressures exist to appear masculine, strong and independent, he is removed from the majority of signifiers of legitimate masculine identity and attributes of masculine hegemony[24] available to him. Instead, he must refer to more limited legitimate sources of masculine identity performance, or — as is often reported from within the prison estate — illegitimate signifiers such as violence, controlling behaviours or other forms of harm.

Where this links to the IPP sentence is in the fact that an indeterminate prison sentence may reduce the risks experienced by the general public, but instead challenges the individual's masculine self. Such subjection to an indeterminate period of limited access to legitimate signifiers of masculine identity performance has implications for how such men can practice their masculine selves, and how they must adapt and change their gendered identities as a result. In addition, the IPP prisoner has even more limitations placed upon his performed gender. Not only are socially acceptable signifiers of masculine self limited, but by virtue of the

> Where this links to the IPP sentence is in the fact that an indeterminate prison sentence may reduce the risks experienced by the general public, but instead challenges the individual's masculine self.

need to demonstrate a reduced risk of dangerousness to the Parole Board in order to be deemed safe enough for release, the socially illegitimate masculine signifiers (such as violence, controlling behaviours, participation in illegal activities, etc.) become less of an option.

The Implications of Gendered Risk-Shift

Control is central to the adult male prison experience.[25] Incarcerated men lose control over their lives for the length of time that they are sentenced — their autonomy is undermined and they have restricted control over who they can be as men (and how to go about doing this), who they can associate with, where they can go, and what they can do. For men serving indeterminate sentences, this removal of personal control has implications for their well-being, removing control from the prisoner regarding his life course, how he lives out his identity, and what he does with his time.[26] Within the prison, it has been found that exerting this lost control in other ways is important in men's abilities to cope with the prison experience through imposing control on others, the self and spaces.[27] As such, the indeterminacy of an IPP sentence, the removal of the individual from many elements of control over their release and the other associated implications of the imposition of an IPP sentence in terms of a prisoner's masculine identity are greater than one might initially see.

Schmid and Jones have proposed a model of identity transformation, whereby there is movement from a pre-prison identity to the eventual development of a 'dualistic self' between a prisoner's 'true' identity and that created for the benefit of the prison world.[28] When one ascribes a gendered state to this identity, it is easier to see the problematic nature of indeterminacy — the individual must negotiate a gendered masculine

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22. Whitehead, A. (2005) 'Man to Man Violence: How Masculinity May Work as a Dynamic Risk Factor' *The Howard Journal*, Vol. 44(4), 411-422.

23. Adams, P. J., Towns, A. and Gavey, N. (1995) 'Dominance and Entitlement: The Rhetoric Men Use to Discuss their Violence towards Women' *Discourse & Society*, Vol. 6(3), 387-406.

24. Connell, R. W. (2005) *Masculinities*, Second Edition, Cambridge: Polity Press.

25. Sloan, J. (2011). See n. 7.

26. Jewkes, Y. (2005). See n. 4, p366.

27. Sloan, J. (2012a) 'Cleanliness, Spaces and Masculine Identity in an Adult Male Prison' *Prison Service Journal*, No. 201, 3-6; Sloan, J. (2012b) "You Can See Your Face in My Floor': Examining the Function of Cleanliness in an Adult Male Prison' *The Howard Journal of Criminal Justice*, Vol. 51(4), 400-410.

28. Schmid, T. J. and Jones, R. S. (1991) 'Suspended Identity: Identity Transformation in a Maximum Security Prison' *Symbolic Interaction*, Vol. 14(4), 415-432. P419

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self, based upon the (limited legitimate) resources available to him within the jail context, which is purely for the benefit of the prisoner community. In addition, he must attempt to maintain a gendered state which conforms to his 'true' and pre-prison identity. Herein lies the conflict — maintaining dual forms of gendered self is difficult (if possible at all). Where men are subjected to indeterminate sentencing, they may be unable to retain their pre-prison masculinities, both in a tangible sense by virtue of their limited ability to maintain and formulate relationships of masculine significance (as fathers, sons, husbands, boyfriends, etc.), and in a more intangible manner through their loss of more symbolic means of legitimate masculinity demonstration such as through employment, clothing, hobbies, and so on. In addition, where individuals are not guaranteed some form of symbolic power and status in the prison by virtue of their sentence — not being 'true' lifers — engagement with a fully prison-based identity, embracing some of the more illegitimate and illegal aspects of masculinity becomes problematic if that individual wishes to progress through his sentence and leave the prison on tariff, with the need to demonstrate a reduction in risk and dangerousness. Often, such dangerousness is actually the means through which the individual has been able to demonstrate his own masculinity in the first place. When one throws in the concept of indeterminacy, the resources available to sustain the pre-prison masculinity begin to dwindle further, leaving the prisoner limited to his prison gendered self in a form of gendered prisonization, yet also not able to engage fully with a prison masculinity due to the potential implications regarding his perceived risk, and subsequent chances of release.

> . . . the very 'use' of such serious crimes that warrant IPP sentences arguably demonstrates the need for some men to impress their masculinities upon others through physical and sexual violence showing their abilities to control and dominate.

Conclusions

IPP prisoners have, arguably, already proven their lack of resources and capabilities in terms of legitimately displaying their masculine credentials: the very 'use' of such serious crimes that warrant IPP sentences arguably demonstrates the need for some men to impress their masculinities upon others through physical and sexual violence showing their abilities to control and dominate. These needs are then undermined through the IPP sentence, lacking the symbolic status of other lifers, where individuals lose control over their lives through the imposition of indeterminacy and their lack of abilities to control and own even their own time.[29] As such, the IPP sentence has the tendency to make men choose between two forms of masculine 'self'. On the one hand, the IPP prisoner can adhere to a 'low risk masculine identity' in order to show a reduced risk and greater potential for eventual release from the sentence, but which has the potential not to be seen as masculine within the prison. This can create risks in the hyper-masculine prison sphere where being seen as 'weak' is problematic and imposes risks on an individual both physically and mentally.[30]

Alternatively, the IPP prisoner can prove his masculinity clearly for others. This becomes problematic when one considers the fact that he will already have demonstrated his limited capabilities to do so in a socially legitimate or constructive fashion by virtue of being an IPP prisoner in the first place. It becomes even more problematic when considering that resources for 'doing masculinity'[31] legitimately are inherently restricted and limited within the prison sphere through the pains of imprisonment.[32] In addition, the problem is compounded by the fact that the offending behaviour courses IPP prisoners need to complete before being eligible for initial release are heavily over-subscribed.[33] As such, the IPP prisoner is arguably placed in a gendered bind, having to choose the sort of man he appears to be for different audiences, resulting in a complex state of gendered identity negotiation that many individuals will lack the skills to manage effectively.

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29. Sloan, J. (2011). See n. 7.
30. McCorkle, R. C. (1992) 'Personal Precautions to Violence in Prison' *Criminal Justice and Behaviour*, Vol. 19(2), 160-173.
31. West, C. and Zimmerman, D. H. (1987) 'Doing Gender' *Gender and Society,* Vol. 1(2), 125-151.
32. Sykes, G. (1958) *The Society of Captives: A Study of a Maximum Security Prison*, Princeton University Press (2007 edition).
33. Jacobson, J. and Hough, M. (2010) *Unjust Deserts: imprisonment for public protection*, London: Prison Reform Trust.

Although the sentence was intended to reduce risk through the removal of a 'dangerous' individual from the community setting, such risk is merely shifted onto the prisoner and his masculine identity due to the limited means available for him to display his credentials as a 'man' (both legitimate and illegitimate), combined with being immersed in a setting which is highly masculinised with pressures — both from others and internalised through the perceived expectations of incarcerated manhood[34] — to demonstrate one's masculinity. The 'dangerousness' which shaped his masculinity on the outside must be removed, but few resources remain to replace this masculine performative tool. The indeterminate element of the sentence means that engaging with any form of masculine identity is a difficult balancing process, with risk reduction and release being pitted against being able to demonstrate manliness 'acceptably' and according to normative methods within the prison, as well as such uncertainty undermining masculine attributes of control and autonomy. Whereas such implications could be argued to be the same for life sentence prisoners, the actual crime that caused the IPP sentence to be given is perceived to be less serious and the outcome, therefore, less 'justified' (and less easy to 'come to terms with'). The symbolic seriousness that is associated with the title of a 'life' sentence is lost, whilst the implications are generally the same. In spite of being a large number of serving prisoners, these men are, in a sense, in a masculine world of their own.

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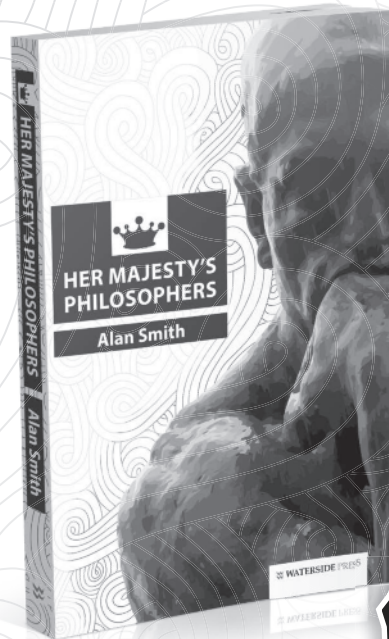
34. Schmid, T. J. and Jones, R. S. (1991). See n. 28.

Psychological and Cognitive benefits of Yoga among UK Prisoners

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Introduction

This paper reports a recent pioneering study conducted in 7 West Midlands prisons on the effects of a 10-week yoga course on mood, wellbeing, and cognition. The main findings will be discussed, as well as potential implications for yoga as a rehabilitative intervention for incarcerated individuals.

Yoga, which finds its ancestral roots in Hinduism, is widely popular in the West. Its practice usually consists of poses (asanas; physical movement and postures), breathing techniques, and relaxation or meditation. Yoga is associated with numerous physical benefits[1] and, in individuals with psychiatric difficulties, psychological benefits such as the reduction of depression and anxiety.[2] In line with this, findings in the general community have linked yoga to improvements in mood,[3] reductions in anxiety, anger and aggression,[4] and reductions in perceived stress.[5] There is also some indication that yoga practice may have cognitive benefits: for example, yoga improves performance in memory tasks[6] and attention[7] in non-incarcerated samples.

These findings suggest that yoga may be an effective practice in UK prisons, where there is a clear need for interventions that address high rates of psychological problems and reduced wellbeing experienced by prisoners.[8] By addressing known criminogenic agents, including negative affective states,[9] impulsivity, and difficulties regulating emotions,[10] yoga may serve rehabilitative functions and help reduce high rates of re-offending that are observed in the UK[11] and other countries.[12]

Prior research into the effects of yoga within correctional settings is very limited, but promising. Yoga practice has been associated with improvements in psychological symptoms of depression and anxiety in a small group of female prisoners (N=6) who completed a 12-week, bi-weekly Iyengar yoga course.[13] In a larger study conducted in India, 1013 prisoners who completed 15 days of daily yoga, meditation, and

1.   Innes, K. E., C. Bourguignon and A. G. Taylor (2005). 'Risk indices associated with the insulin resistance syndrome, cardiovascular disease, and possible protection with yoga: a systematic review.' *J Am Board Fam Pract* 18(6): 491-519, Sherman, K. J., D. C. Cherkin, J. Erro, D. L. Miglioretti and R. A. Deyo (2005). 'Comparing yoga, exercise, and a self-care book for chronic low back pain: a randomized, controlled trial.' *Ann Intern Med* 143(12): 849-856.
2.   Woolery, A., H. Myers, B. Sternlieb and L. Zeltzer (2004). 'A yoga intervention for young adults with elevated symptoms of depression.' *Alternative Therapies in Health and Medicine* 10(2): 60-63, Vadiraja, H. S. and R. M. Raghavendra (2009). 'Effects of a Yoga Program on Cortisol Rhythm and Mood States in Early Breast Cancer Patients Undergoing Adjuvant Radiotherapy: A Randomized Controlled Trial (vol 8, pg 37, 2009).' *Integrative Cancer Therapies* 8(2): 195-195.
3.   Shapiro, D. and K. Cline (2008). 'Mood Changes Associated with Iyengar Yoga Practices: A Pilot Study.' *International Journal of Yoga Therapy* 1(14): 35-44.
4.   Nagendra, H., N. Raghuram and S. Deshpande (2008). *A randomized control trial of the effect of yoga on verbal aggressiveness in normal healthy volunteers*, Yoshihara, K., T. Hiramoto, N. Sudo and C. Kubo (2011). 'Profile of mood states and stress-related biochemical indices in long-term yoga practitioners.' Biopsychosoc Med 5(1): 6.
5.   Kirkwood, G., H. Rampes, V. Tuffrey, J. Richardson and K. Pilkington (2005). 'Yoga for anxiety: a systematic review of the research evidence.' *British Journal of Sports Medicine* 39(12): 884-891.
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8.   Department of Health and HM Prison Service (2001). *Changing The Outlook: A Strategy for Developing and Modernising Mental Health Services in Prisons*. London, Department of Health.
9.   Day, A. (2009). 'Offender emotion and self-regulation: implications for offender rehabilitation programming.' *Psychology, Crime & Law* 15(2-3): 119-130.
10. Farrinton, C. J. (2000). *Individual differences and offending*. Oxford, Oxford University Press.
11. Mnistry of Justice (2012). Criminal Justice Statistics: Quarterly Update to December 2012. London, The Prison Reform Trust (2013). Bromley Briefings — Prison Factfile. London.
12. PEW Centre on the States (2011). State of Recidivism: The revolving door of America's prisons. Washington.
13. Harner, H., A. L. Hanlon and M. Garfinkel (2010). 'Effect of Iyengar Yoga on Mental Health of Incarcerated Women: A Feasibility Study.' *Nursing Research* 59(6): 389-399.

devotional practice reported experiencing improved sleep, mood, and social behaviour.[14] Although positive, it is unclear whether these findings from non-Western cultures may be applicable to prisons in the UK. After all, there are cultural differences in the attitude towards yoga between India and the UK, and the specific format of the classes may also differ. The need for further research in the UK is therefore clear.

There is a different body of research, which overlaps to some extent with yoga practice, focusing on the benefits of meditation and 'mindfulness' in incarcerated samples. These studies suggest that meditation can improve psychosocial functioning,[15] reduce rates of recidivism,[16] and reduce levels of substance use.[17] It's important to consider this work, given that yoga classes frequently involve elements of meditation, such as focussing on the breath. Yoga and meditation may share some mechanisms of action for conferring benefits — including stilling the mind, bringing focus into the present moment, improving emotional awareness and control, and increasing self-esteem.[18]
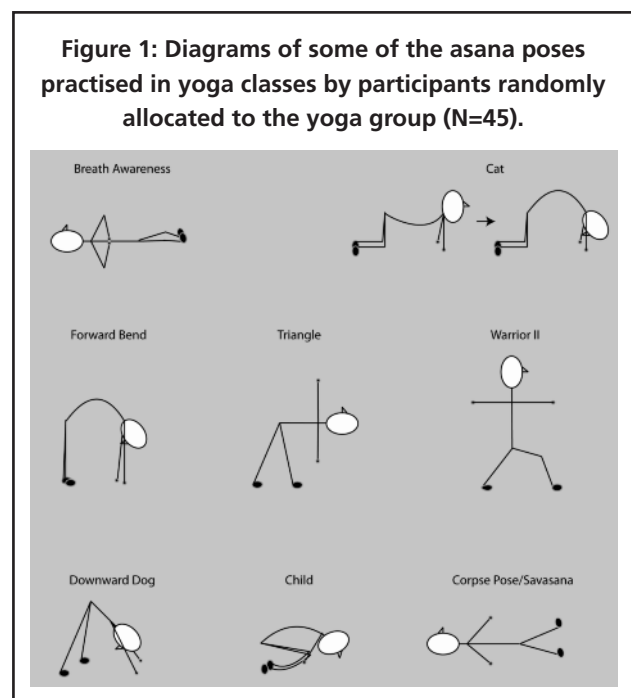
Study Design

The pioneering study we conducted, including an in-depth description of the methods and tasks used, can be seen in our original publication.[19] Here, we will provide key information about our study design and our primary findings.

We aimed to investigate the effects of a 10-week course of yoga in a sample of UK prisoners. We selected a rigorous study design based on a Randomized Controlled Trial (RCT), the gold-standard for intervention research. This involved randomly allocating prisoners to a 'yoga' group or a 'control' (no-yoga) group. Such designs are rarely employed in yoga and meditation research,[20] resulting in a relatively low quality of research in this area. In addition, there is an over-reliance on the use of self-report measures (questionnaires) in prison research, which although potentially effective[21] are limited in their capacity to

detect subtle changes in cognition and behaviour. In this study, we addressed this issue by collecting both self-report measures as well as measuring performance variables using a computer-based cognitive task.

Yoga classes were managed by the Prison Phoenix Trust, a charity supporting yoga and meditation in UK and Irish prisons (www.theppt.org.uk). For the current research, yoga classes were held once a week and had a two-hour duration. They were held in a quiet room and consisted of a set of yoga postures and stretches (see Figure 1). To complement the poses, the final 10-20 minutes of each class were spent doing meditation (seated, formal meditation on the breath) and relaxation.

Figure 1: Diagrams of some of the asana poses practised in yoga classes by participants randomly allocated to the yoga group (N=45).

We collected self-report questionnaire measures of mood, stress, and mental health at two time-points, before and after the 10-week course period. Scores provided by participants in the yoga and control groups could then be compared. Self-report questionnaires

14. Bhusan, L. I. (1998) 'Yoga: An Instrument of Psychological Transformation.' *Yoga Magazine.*
15. Chandiramani, K., S. K. Verma, P. L. Dhar and V. Vipasyana Visodhana (1998). *Psychological effects of vipassana on Tihar Jail inmates : research report*. Igatpuri, Nashik, Maharashtra, Vipassana Research Institute, Samuelson, M., J. Carmody, J. Kabat-Zinn and M. A. Bratt (2007). 'Mindfulness-Based Stress Reduction in Massachusetts Correctional Facilities.' *The Prison Journal* 87(2): 254-268.
16. Bleick, C. R. and A. I. Abrams (1987). 'The Transcendental-Meditation Program and Criminal Recidivism in California.' *Journal of Criminal Justice* 15(3): 211-230, Alexander, C. N., M. V. Rainforth, P. R. Frank, J. D. Grant, C. V. Stade and K. G. Walton (2003). 'Walpole Study of the Transcendental Meditation Program in Maximum Security Prisoners III.' *Journal of Offender Rehabilitation* 36(1-4): 161-180, Rainforth, M. V., C. N. Alexander and K. L. Cavanaugh ibid.'Effects of the Transcendental Meditation Program on Recidivism Among Former Inmates of Folsom Prison.' 181-203.
17. Bowen, S., K. Witkiewitz, T. M. Dillworth, N. Chawla, T. L. Simpson, B. D. Ostafin, M. E. Larimer, A. W. Blume, G. A. Parks and G. A. Marlatt (2006). 'Mindfulness meditation and substance use in an incarcerated population.' *Psychology of Addictive Behaviors* 20(3): 343-347.
18. Sumter, M. T., E. Monk-Turner and C. Turner (2009). 'The benefits of meditation practice in the correctional setting.' J *Correct Health Care* 15(1): 47-57; quiz 81.
19. Bilderbeck, A. C., M. Farias, I. A. Brazil, S. Jakobowitz and C. Wikholm (2013). 'Participation in a 10-week course of yoga improves behavioural control and decreases psychological distress in a prison population.' *J Psychiatr Res* 47(10): 1438-1445.
20. Shonin, E., W. Van Gordon and M. D. Griffiths (2013). 'Mindfulness-based interventions: towards mindful clinical integration.' *Front Psychol* 4: 194.
21. Thornberry, T. P. and M. D. Krohn 'The self-report method for measuring delinquency and crime.'

included (1) the Positive and Negative Affect Scale (PANAS);[22] (2) the Perceived Stress Scale (PSS);[23] and (3) the Brief Symptom Inventory (BSI),[24] which measures psychological symptoms of mental distress. We also asked participants to complete the Barratt Impulsiveness Scale or BIS-11,[25] since scores in the BIS-11 have been shown to relate to performance in cognitive-behavioural tasks like the one employed here.[26] We selected these questionnaires because of their ease of use and comprehensibility; all have been used in forensic samples, and/or other vulnerable participant groups, such as those experiencing psychiatric illness.[27]

Participants also completed a computerized 'Go/No-Go' task after the 10-week yoga period. In this task, participants are asked to respond ('Go', 70 per cent of the trials) when they see one cue appear on the screen (the letter 'X'), but must withhold that response ('No-Go', 30 per cent of the trials) when presented with a second cue (the letter 'O'). Figure 2 helps to illustrate our task.

Figure 2. Trial sequence for the Go/No-Go task.
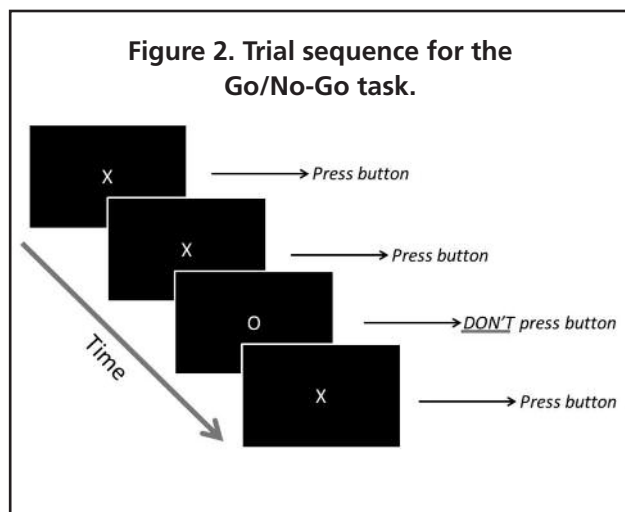
These instructions establish a dominant response tendency to the Go cue, such that more inhibitory cognitive resources are needed to inhibit pre-potent responses on No-Go trials. Thus, this task has been used to tap aspects of executive function related to impulsivity.[28] We know of no previous research that

measures, behaviourally, whether yoga might enhance cognitive-behavioural control in prisoners.

Participants

A total of 167 participants (155 male, 12 female) with no previous yoga experience were recruited from prisons in the West Midlands, to take part in a 10-week study (range 16-68; mean 36.08 years). Seven prisons took part in the study,[29] including a young offender's (aged 21-25) and a women's prison. The imprisonment conditions, as well as the crimes committed by participants, varied considerably. For example, the prisoners at one of the prisons (HMP Hewell) were part of the open regime there, which means they were able to leave the prison grounds for work, volunteering, or courses. Another institution (HMP Shrewsbury) had a very high proportion of sex offenders. The study was approved by ethics committees of the British National Health Services and the Ministry of Justice, and all participants provided written informed consent to take part. Individuals assigned to the control group were informed that they would be given priority places in future yoga courses to be run shortly after the completion of the study.

Of the 167 participants, 30.5 per cent (51 individuals) were not present at the second, post-intervention assessment, session and a further 9.5 per cent (16 individuals) attended less than half of the yoga sessions (<5). All these participants were excluded from the analysis. The final sample included 100 participants, 45 of which were in the yoga group, and 55 in the control group.

Results

All statistically significant effects described below are significant at a threshold of $p < 0.05$. Where effects were marginally significant ($0.05 < p < 0.10$) we have reported the corresponding p-values.

For full details of the statistical results and methods employed, we ask readers to consult our original publication, available for free at the website of the Prison Phoenix Trust.[30]

22. Watson, D., L. A. Clark and A. Tellegen (1988). 'Development and Validation of Brief Measures of Positive and Negative Affect — the Panas Scales.' *Journal of Personality and Social Psychology* 54(6): 1063-1070.
23. Cohen, S. and G. Williamson (1988). Perceived Stress in a Probability Sample of the United States. *The Social Psychology of Health*. S. Spacapan and S. Oskamp. Newbury Park, CA, Sage.
24. Derogatis, L. R. (1993). *BSI, Brief Symptom Inventory : administration, scoring & procedures manual*. Minneapolis, MN, National Computer Systems.
25. Patton, J. H., M. S. Stanford and E. S. Barratt (1995). 'Factor structure of the Barratt impulsiveness scale.' *J Clin Psychol* 51(6): 768-774.
26. Spinella, M. (2004). 'Neurobehavioral correlates of impulsivity: Evidence of prefrontal involvement.' *International Journal of Neuroscience* 114(1): 95-104.
27. See n.20.
28. Band, G. P. H. and G. J. M. van Boxtel (1999). 'Inhibitory motor control in stop paradigms: review and reinterpretation of neural mechanisms.' *Acta Psychologica* 101(2-3): 179-211.
29. Participating prisons were: HMP – YOI Drake Hall; HMP Dovegate; HMP Hewell; HMP Featherstone; HMP Stafford; HMP Shrewsbury; and HMP – YOI Swinfen Hall. HMP = Her Majesty's Prison. YOI = Young Offenders' Institution.
30. http://www.theppt.org.uk/documents/Bilderbeck_Farias_2013_J_Psych_Res.pdf

Demographics

Our final sample included 100 prisoners, 55 (50 men, 5 women) in the control group, and 45 (43 men, 2 women) in the yoga group. Groups were matched for age, gender composition, and socio-demographic variables (see Table 1), and provided similar measures at baseline (T1) of positive and negative affect, perceived stress, psychological distress, and impulsivity.

Table 1: Participant demographics for 100 participants who either did (yoga group, N=45) or did not (Control group, N=55) participate in a 10-week yoga course. There were no significant differences between the groups.
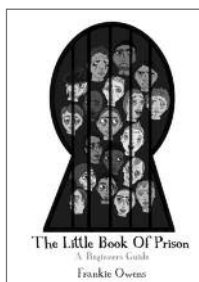
	Yoga	Control
Gender (M / F)	43 / 2	50 / 5
Age (± S.E.)	37.38 (± 1.77)	39.42 (± 1.89)
Education: qualifications obtained		
None	10 (22.2%)	18 (32.7%)
O-levels / GCSEs	21 (46.6%)	13 (23.6%)
A levels and higher education	14 (31.1%)	24 (45.5%)
Ethnicity		
Caucasian	33 (73.3%)	47 (85.5%)
Black	7 (15.5%)	2 (36.4%)
Asian	2 (4.4%)	5 (9.1%)
Mixed	2 (4.4%)	1 (1.8%)
Relationship / Marital status		
Single	24 (53.3%)	24 (43.6%)
Current partner	10 (22.2%)	12 (21.8%)
Married	3 (6.6%)	7 (12.7%)
Divorced	6 (13.3%)	10 (18.2%)
Separated	1 (2.2%)	2 (3.6%)
Widowed	1 (2.2%)	-

Questionnaire Measures

Firstly, our results suggested that participation in the yoga course significantly improved positive affect as measured by the PANAS questionnaire. At baseline (Time 1), before the yoga course, participants in the yoga and control groups reported similar levels of positive affect — as would be expected. However, after the 10-week yoga course (Time 2) the yoga group reported significantly higher positive affect than the control group (see Figure 3). Although we found evidence that yoga influences positive affect, as described above, there was no significant evidence for an influence of yoga on negative affect.

The yoga and control participants reported similar levels of perceived stress, and psychological distress, and Time 1. Participation in the yoga course was,

Figure 3. Average ratings of Positive affect using the PANAS (a, left), psychological distress using the Brief Symptom Inventory (b, centre), and perceived stress using the Perceived Stress Scale (c, right) and for 100 prisoner participants who either did (yoga group, light grey triangles, N=45) or did not (control group, dark grey circles, N=55) participate in a 10-week yoga course. Error bars: ± 1 standard error of the mean. T1=Time 1, or baseline. T2=Time 2, or +10 weeks.
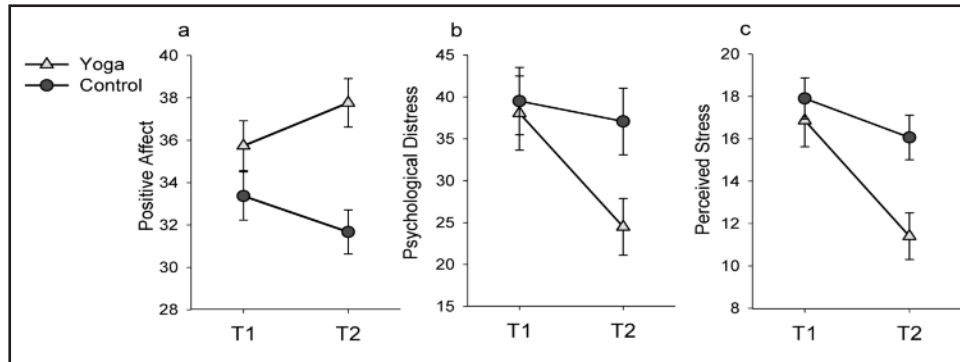
however, associated with improvements in both these (see Figure 3a). The yoga group showed a significant decrease in perceived stress at Time 2 compared to Time 1, and a similar significant decrease in psychological distress.

Cognitive-Behavioural task

A subset of 93 participants completed the Go/No-Go task (7 participants did not complete the cognitive task due to technical malfunctions). We excluded from the analysis individuals who had performed more poorly than at chance level in this task (fewer than 50 per cent correct responses over all trials), leading to the removal of 3 datasets (3.2 per cent). Of those remaining, 40 (38 male, 2 female) had participated in the yoga course and 50 (45 male, 5 female) were in the control group. Participants in the two groups remained matched in terms of demographics and trait measures, including trait impulsivity as measured with the BIS-11.

Participants who completed the yoga course showed a significantly higher proportion of correct responses across all trials of the game. When looking separately at 'Go' and 'No-Go' trials (see Figure 4), we found that participants in the yoga group were significantly more likely to make correct button-responses in Go trials. Participants in the yoga group were also more likely to appropriately withhold any response in No-Go trials, but at a marginally significant level, (p=0.072), perhaps because variability of accuracy in these trials was higher than for 'Go' trials.

Across all prisoner participants, and as can be seen in Figure 4, participants tended to be better at making

correct button-responses on 'Go' trials than correctly inhibiting responses on 'No-Go' trials. This is similar to what has been reported in previous studies[31] and demonstrates how the task is designed to make it difficult for participants to inhibit motor responses to the No-Go stimuli.

Figure 4. Accuracy in the Go/No-Go task. Average percentage of correct responses for Go and No-Go trials for 90 prisoner participants who either did (yoga group, dark grey bars, N=40) or did not (control group, light grey bars, N=50) participate in a 10-week yoga course. Error bars: + 1 standard error of the mean.
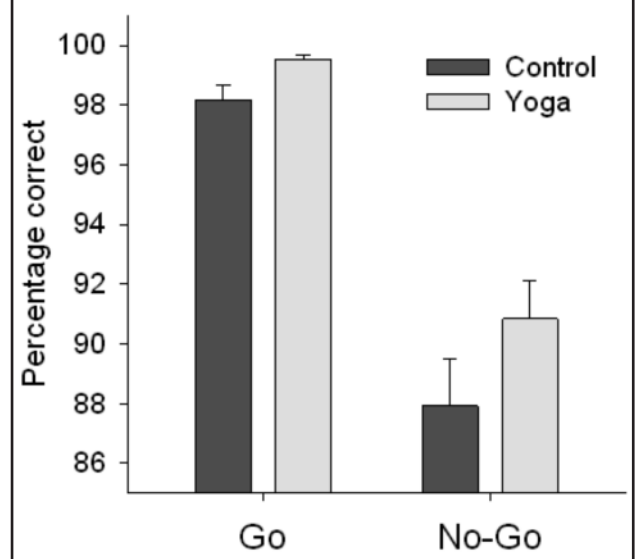
31. de Bruijn, E. R., S. F. Miedl and H. Bekkering (2008). 'Fast responders have blinders on: ERP correlates of response inhibition in competition.' *Cortex* 44(5): 580-586.

Discussion

A case for yoga within prisons

We found that prisoners who had been randomly assigned to attend a ten-week yoga course reported improved mood, reduced stress, and reduced psychological distress, when compared with a control group of prisoners. Furthermore, participants in the yoga group demonstrated improved performance in a cognitive-behavioural task compared to the control group. Together, these results suggest that yoga has beneficial effects on subjective wellbeing and mental health, as well as enhancing cognitive-behavioural functioning. These results represent, to the best of our knowledge, the first evidence of the benefits of yoga in a UK prison population using a randomised, between-groups design, and drawing on behavioural data in addition to self-report measures.

The enhanced performance in our cognitive-behavioural task among participants in the yoga group is particularly compelling. Compared to the control group, prisoners who practised yoga demonstrated significantly greater accuracy during Go trials. Go trials engage simple stimulus-response functions (requiring the participant to press a button when a stimulus, 'X' is presented), and the improved performance on these trials suggests that yoga practice may enhance basic processes of sustained attention and concentration. Also, performance in the yoga group was enhanced on No-Go trials (i.e. correct *inhibition* of the button press response to the 'O' trials). The improved performance on No-Go trials suggests that practising yoga helps prisoners inhibit unhelpful responses and increases their capacity for cognitive control.[32] The fact that the groups did not differ at baseline (T1) helps rule out the possibility of unintended confounding variables influencing our data, and suggest instead that improvements in mood and

> Together, these results suggest that yoga has beneficial effects on subjective wellbeing and mental health, as well as enhancing cognitive-behavioural functioning.

enhanced cognitive performance are specifically associated with participation in the yoga course.

These results have particular relevance when considering problematic behaviour amongst prisoners. If yoga practice is associated with greater behavioural inhibition, this may mean that yoga helps alleviate problems of reactive aggression and substance abuse. Supporting this idea, previous research has linked general antisociality with impairments in cognitive control[33] and potentially less effective patterns of brain activity in certain experimental tasks.[34] It is therefore possible that, by facilitating cognitive-behavioural control, yoga practice may lead to improved neural processing and, eventually, reductions in the frequency or severity of antisocial acts.

The findings also have implications for policy making. Thus far, research and policy surrounding mental health interventions in prisons has largely focused on psychological and psychosocial treatments. However, interventions provided by psychologists and psychiatrists tend to be costly, and psychosocial treatments in prison can be perceived as inaccessible, stigmatizing, and undesirable because of their time-consuming and emotionally demanding nature.[35] It is possible that alternative interventions, like yoga, may provide a socially acceptable and cost-effective complement to other rehabilitation programmes.

Strengths and limitations of this research

Our findings are consistent with the past literature documenting the beneficial effects of yoga on emotional and psychological wellbeing in healthy volunteers and in clinical samples. Our results also corroborate the very few studies conducted in prisons, where yoga practice has been associated with improvements in psychological symptoms of depression and anxiety,[36] as well as improved sleep, mood, and

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32. See n.28.
33. Morgan, A. B. and S. O. Lilienfeld (2000). 'A meta-analytic review of the relation between antisocial behavior and neuropsychological measures of executive function.' *Clinical Psychology Review* 20(1): 113-136, Ogilvie, J. M., A. L. Stewart, R. C. K. Chan and D. H. K. Shum (2011). 'Neuropsychological Measures of Executive Function and Antisocial Behavior: A Meta-Analysis*.' *Criminology* 49(4): 1063-1107.
34. Gao, Y. and A. Raine (2009). 'P3 event-related potential impairments in antisocial and psychopathic individuals: a meta-analysis.' *Biological Psychology* 82(3): 199-210.
35. Marlatt, G. A. and K. Witkiewitz (2002). 'Harm reduction approaches to alcohol use: Health promotion, prevention, and treatment.' *Addictive Behaviors* 27(6): 867-886.
36. See n.13.

social behaviour.[37] Given the methodological limitations of past research, including the lack of a control group, the non-randomization of participants, small sample sizes, and reliance on self-report data,[38] our study represents a significant step towards understanding the effects of yoga in a prison setting.

Other strengths of this study include the recruitment from a number of prisons, including category B and category C prisons, young offender institutions, and one female prison; correspondingly our sample of participants is diverse, and includes individuals with a range of backgrounds and convicted of a range of offenses and of differing severity. Our results are therefore likely to be generalizable to larger population of British prisoners. However, due to various legal and ethical limitations, it was not possible to gather individual information on the nature of offence or the length of sentence of participants, or to recruit participants from category A prisons. These limitations should perhaps be addressed in future studies, to ascertain whether particular offender groups — including those who are considered to be the most dangerous — can benefit from yoga practice.

Future directions

The findings of this study point to the therapeutic and rehabilitative potential for yoga among prisoners. A natural next step would be to conduct longitudinal research to ascertain whether yoga practice within prison was associated with decreased rates of reoffending, perhaps assessed via adjudication records or records of proven convictions. Qualitative research methods could be employed to understand how prisoners experience the potentially transformative effects of yoga. It would also be beneficial to look at neurocognitive changes induced by yoga practice, potentially by using non-invasive techniques like EEG or fMRI. A further question, which remains unanswered, concerns the specific elements of yoga practice which give rise to the benefits observed in studies such as this one. The yoga poses, breathing techniques, or meditation components; the yoga teacher, the social community of the yoga class, and the generalized effects of doing physical exercise, may each have helpful effects and some of these may be more key than others. It may be possible to calibrate these elements in such a way as to 'tailor' yoga classes specifically for prisons, or particular offender groups — for example targeting anger and aggression, or substance abuse, or other compulsive behaviours. Although more research has been conducted on the benefits of meditation-focussed interventions, it is possible that programmes primarily involving yoga have particular strengths in helping to combat restlessness, engaging the body in mindful movement, and building community through class participation. Finally, there is anecdotal evidence through the Prison Phoenix Trust that yoga classes for prison staff can help prison officers to improve personal wellbeing and deal with stressful situations in the workplace. This is also a worthwhile focus for future research.

In sum, we found evidence that yoga significantly improves measures of prisoners' mood and psychological wellbeing, as well as facilitating cognitive processes relating to sustained attention and behavioural inhibition. These changes are indicative of the potential for yoga to influence affect and behavioural regulation in a prison setting. We hope this research will act as a springboard for wider research into the use of yoga within the criminal justice system, and encourage institutions to explore how yoga might be useful within their particular context.

Acknowledgements

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37. See n.14.
38. See n.20, and Birdee, G. S., G. Y. Yeh, P. M. Wayne, R. S. Phillips, R. B. Davis and P. Gardiner (2009). 'Clinical Applications of Yoga for the Pediatric Population: A Systematic Review.' *Academic Pediatrics* 9(4): 212-220.

Does the Thinking Skills Programme have a positive effect on prison behaviour?

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Introduction

Cognitive skills programmes have been delivered in the Prison Service for years and the impact of these programmes have been consistently evaluated to determine the effectiveness of the programmes on reducing re-offending. In 2009 the Thinking Skills Programme (TSP) was introduced across the prison estate.

Research has focused on previous cognitive skills programmes delivered by the Prison Service such as ETS and R&R. The majority of research has focused on evaluating the effect of the programme on re-offending rates. Friendship *et al*. (2003)[1] evaluated the effectiveness of R&R and ETS using re-conviction as an outcome measure. The findings showed a significant difference in reconviction rates for medium to low and medium to high risk offenders but no significant differences for low and high risk offenders. A factor not controlled for was motivation to change. The study was useful for identifying reconviction rates for those completing the R&R and ETS programmes but is now over 10 years old. A later study by Falshaw *et al*. (2004)[2] also looked at two year reconviction rates. It was found there were no statistically significant differences in reconviction rates between the two groups. These findings contradict previous findings and the authors give some possible explanations of this, such as lower motivation levels, expansion of the programme and matching of static factors only with the comparison group. Sadlier (2010)[3] examined the impact of ETS on one year re-conviction rates. Three outcome measures were used, proportion of prisoners reconvicted, frequency of re-offending and proportion reconvicted of a severe offence. Findings indicated those who completed ETS had a significantly lower reconviction rate and frequency of general offending (Sadlier 2010: 19). However, once non-completers were removed from the sample, the finding was no longer significant. There was no measure of motivation used in this study and despite the variables identified in both the treatment sample and the comparison group to ensure they are matched, none of these factors were used in the analysis.

Evaluation studies have also focused on psychometric results as an outcome measure. Blud *et al*. (2003)[4] evaluated the short term impact of those who attended R&R and ETS by using psychometrics. They found the majority of measures evidenced modest change and higher need offenders evidenced greater change. However, they did not identify if the change on the psychometrics was clinically significant change or not. No behaviour measures were used to identify any short term impact on behaviour. Therefore, although the psychometrics show short term change in some aspects, they cannot identify if change is translated into behaviour. One study that looked at the impact on prison behaviour also included outcomes of psychometrics, three additional questionnaires and environmental measures. McDougall *et al*. (2009)[5] found there was a statistically significant reduction in impulsivity and in frequency of security reports three months after the completion of ETS. However there were no significant differences in other measures of prison behaviour such as number of warnings, minor reports and adjudications (McDougall *et al*. 2009). This study did identify clinically significant change on the psychometrics. It uses several measures to evaluate the impact of ETS, including behaviour change. Prison behaviour three months after the course was also evaluated and discussed. These measures were not significant, perhaps indicating change on the psychometrics had not yet been translated into behaviour. One possible way of checking this is for future research to assess a longer term behaviour change.

In summary, the majority of research has focused on evaluating cognitive skills programmes using reconviction rates or psychometric change on ETS and R&R. No research has yet been conducted on TSP. Of the research that has incorporated prison behaviour, the follow up period has been three months. Previous research has also not taken into account treatment readiness and their behaviour prior to attending the course. Clinically significant change is also not taken into account in the majority of the studies conducted. It is unclear whether participants can be classed as 'treated' if they are still within offender norms and outside of non-offender norms as the ultimate goal is to 'treat' offenders so they behave in ways that do not lead them to offending (Friendship, Falshaw and Beech 2003:

1. Friendship, C., Blud, L., Erikson, M., Travers, R. and Thornton, D. (2003) 'Cognitive-behavioural treatment for imprisoned offenders; An evaluation of HM Prison Services' cognitive skills programmes.' *Legal and Criminological Psychology* 8, 103-114.
2. Falshaw, L., Friendship, C., Travers, R. and Nugent, F. (2004) 'Searching for 'What Works': HM Prison Service accredited cognitive skills programmes.' *The British Journal of Forensic Practice*, 6 (2) 3-13.
3. Sadlier, G. (2010) *Evaluation of the impact of HM Prison Service Enhanced Thinking Skills programme on reoffending outcomes of the Surveying Prisoner Crime Reduction(SPCR) sample*. London: Ministry of Justice.
4. Blud, L., Travers, R., Nugent, F. And Thornton, D. (2003) 'Accreditation of offending behaviour programmes in HM Prison Service: 'What Works' in practice' *Legal and Criminological Psychology* 8, 69-81.
5. McDougall, C., Perry, A. E., Clabour, J., Bowles, R. and Worthy, G. (2009) *Evaluation of HM Prison Service Enhanced Thinking Skills Programme: Report on the outcomes form a randomised controlled trial*. London: Ministry of Justice.

120).[6] As well as looking at reconviction data it is also useful to look at change in behaviour whilst still in prison. Friendship, Falshaw and Beech (2003) discuss the importance of problems with using reconviction data and suggest this should be supplemented with other outcome measures to give a better view of treatment effectiveness (p124). Many prisoners who complete offending behaviour courses will not be released for a considerable period of time after they have completed the courses. Behaviour change can begin in prison and is of use to the prison system as anti-social behaviour in prison also costs the Prison Service time and money.

A longer follow up period in terms of behaviour measures would also be useful. It will be helpful for research to take other factors into account that may impact on the effectiveness of TSP, for example, risk and need level of participants, motivation levels, offence and sentence type, as well as a starting point so the level of change can be evaluated. Finally, clinically significant change on the psychometrics should be considered and compared to the analysis of prison behaviour. Studying the results of psychometrics alone does not indicate whether any changes have translated to behaviour.

The aim of this study was to take the factors discussed above into consideration when evaluating the effect of TSP on prison behaviour and by exploring how other key factors, such as risk, need for the programme and treatment readiness relate to any outcomes. The relationship between psychometric results and short term behaviour is also explored. The hypotheses are therefore as follows:

☐ Hypothesis one — When offenders complete TSP, their prison behaviour will improve.

☐ Hypothesis two — Factors such as risk, need, treatment readiness, sentence type and offence type will impact on improvement in prison behaviour after completion of TSP.

☐ Hypothesis three — Completion of TSP will result in Clinically Significant Change (CSC) being shown in the psychometrics of those who completed the course.

☐ Hypothesis four — Factors such as risk, need, treatment readiness, sentence type and offence type will impact on CSC after completion of TSP.

☐ Hypothesis five — There will be a positive correlation between improvement in prison behaviour and CSC shown in psychometrics.

Method

Participants

The sample in this study included all who completed TSP between April 2010 and March 2013 at a male Young Offenders Institution in England (n = 199). Of these, 103 were of white origin, whilst 95 were from another ethnic background and the ethnicity of two were unknown. 21 per cent of the sample had a sentence of Imprisonment for Public Protection (IPP), 11 per cent were life sentenced prisoners and 68 per cent were determinate sentenced prisoners. 57 per cent of the sample had been convicted of a violent offence, 27 per cent of a sexual offence and 16 per cent of another type of offence.

Procedure

The data was collected from sources including:

1. An existing database held by the programmes department, which records risk information, sentence and behaviour information.

2. An existing database held by the TSP Treatment Manager which records information regarding the need for the course, treatment readiness and offence.

3. PNOMIS — the prison system for recording notes on prisoners behaviour. This was used to gain missing data not included on the programmes database.

4. Interventions Unit (IU)[7] psychometric information. This includes pre and post treatment scores on psychometrics administered for each of the participants.

Assessment measures

Risk level

This was identified using the Offender Group Reconviction Scale version 3 (OGRS3).[8] In the majority of cases, offenders should score over 50 per cent to be suitable for TSP, although some clinical override is allowed by treatment managers. The average risk score of participants was 66 per cent.

Need score

Offenders are also assessed for TSP based on their need for the course. This is assessed using the Offender Assessment System (OASys) which identifies if the offender has deficits in the area covered by the course. The average score for participants was 9/13.

Treatment Readiness

Treatment Readiness was assessed using the Corrections Victoria Treatment Readiness Questionnaire (CVTRQ, Casey et al. 2007).[9] A provisional cut off score for treatment is less than 72/100 (Casey et al. 2007: 1436). No offenders were excluded from programmes based on their score on the CVTRQ. The average score for participants was 76. Treatment readiness scores were missing for 33 participants, either because they did not complete it or the information could not be found.

Behaviour measures

Prison behaviour was measured using the Prison Service Incentives and Earned Privileges (IEP) scheme. Offenders are allocated to basic, standard, or enhanced status, depending on their behaviour. At the establishment where the research

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6. Friendship, C., Falshaw, L. and Beech, A, A. (2003) 'Measuring the real impact of accredited offending behaviour programmes' *Legal and Criminological Psychology* 8, 115-127.

7. IU – Interventions Unit is the department that oversees accredited interventions programmes delivered in the Prison and Probation service. They are responsible for the auditing of sites running the programmes and in the research and accreditation of programmes delivered.

8. Offenders are given a score out of 100% based on static information such as age at first offence. A higher score indicates a higher risk of reconviction and 2 year reconviction scores were used as this is the score used to determine suitability for TSP.

9. Casey, S., Day, A., Howells, A. and Ward, T. (2007) 'Assessing suitability for Offender Rehabilitation: Development and Validation of a Treatment Readiness Questionnaire'. *Criminal Justice and Behavior*, 34, 1427-440. The CVTRQ is a 40-item self-report questionnaire that assesses readiness to engage with a cognitive skills programme.

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was undertaken, the level is determined by a behaviour score. Each offender starts each month with 50 points and points are taken away during the month for poor behaviour. At the end of the month a final score is given and the offender's IEP status decided. A behaviour score was gained for each offender who completed the course before the course started, at the end of the course and six months after the course was completed. Scores were unable to be obtained for the start stage for 4 of the participants, the end stage for 10 of the participants and the six month stage for 84 of the participants.[10]

Psychometric measures

Offenders participating in TSP complete psychometrics at the start and end of the course. A list of the different psychometrics administered can be found in Appendix A. Pre and post treatment scores on each of the psychometrics were obtained from Interventions Unit (IU) for each participant. These were unable to be obtained for the most recent TSP groups, meaning 19 participants were eliminated from this analysis.

Analysis

❑ Hypothesis one — pre and post treatment prison behaviour scores were analysed using a one way repeated measures ANOVA.

❑ Hypothesis two — A multiple regression was conducted to identify the impact of the factors listed on change identified.

❑ Hypothesis three — Syntax provided by IU was used to analyse the psychometric data to identify if there was CSC[11] in psychometric scores.

❑ Hypothesis four — Logistic regression was conducted to identify the impact of any of the factors on CSC.

❑ Hypothesis five — The results from the analysis of the prison behaviour and analysis of the psychometrics was compared to identify if there were any correlations.

Results

Hypothesis one

A one way repeated measures ANOVA was conducted to compare behaviour scores at the start of TSP, at the end of TSP and six months after completing TSP. The means and standard deviation are presented in Table 1. There was a significant effect for time, Wilks Lambda = 0.92, $F(2, 113)$ = 4.82, $p < 0.05$, multivariate partial eta squared = 0.08, indicating a moderate effect size. Post-hoc comparisons indicated the mean score for the six month behaviour score ($M = 45.98$, $SD = 7.13$) was significantly different from the behaviour score at the start of the course ($M = 42.4$, $SD = 11.33$). Cohen's d effect size was calculated as 0.38, indicating a small effect size. End of group behaviour scores ($M = 44.4$, $SD = 8.7$) did not differ significantly from either of the other groups, although Cohen's d effect sizes were small (0.2 for both comparisons).

Table 1
Descriptive statistics for prison behaviour scores at the start, end and six months after completing TSP.

Time period	N	Mean	Standard Deviation
Time 1 (pre TSP)	115	42.40	11.33
Time 2 (post TSP)	115	44.40	8.70
Time 3 (six months post TSP)	115	45.98	7.13

Hypothesis two

Standard multiple regression was conducted to explore the relationship between the six month behaviour scores and the other variables of risk, need, treatment readiness, offence type, sentence type and starting behaviour score. Preliminary analyses were conducted to ensure no violation of the assumptions of multiple regression. This revealed the data for behaviour scores and for risk scores were negatively skewed and violated the assumptions of normality. The data was transformed to modify the distribution which then did not violate the assumptions of normality. The results of the regression indicated the predictors explained 15.7 per cent of the variance ($R_2 = .15$, $F(7, 92) = 2.45$, $p < 0.05$). End of course score significantly predicted change after six months ($\beta = .23$, $p<.05$) as did sentence type ($\beta = .21$, $p <.05$). No other variables were significant in explaining the six month behaviour score. To identify what sentence type was explaining the difference the sample was split into sentence types and then paired samples t tests were conducted on each sentence type. This revealed determinate sentence prisoners were the group to show significant change in behaviour six months after TSP in comparison to before TSP ($M = 1.67$, $SD = .90$), $t(57) = 3.671$, $p < .001$.

Hypothesis three

IU provided a blank syntax code for SPSS which could be populated with data to identify if each participant had made a CSC from their pre to post psychometrics. The results are presented in Table 2.

Hypothesis four

Logistic regression was performed on each psychometric to assess the impact of the factors on the likelihood participants would show CSC on psychometrics.

Three psychometrics had independent variables that significantly predicted CSC. For the General Attitude to Offending (GAO) psychometric, Cox and Snell's R^2 of .11 and Nagelkerke's R^2 of .232 showed the model as a whole explained between 11 per cent and 23 per cent of the variance in change and correctly classified 90.1 per cent of cases. Goodness of fit statistics were calculated to assess the fit of the model. The Hosmer-Lemeshow statistic[12] was not significant indicating there was goodness of fit and support for the model (chi square = 4.600, df = 8, $p = .80$), therefore the model containing predictors is better than a constant only model in distinguishing between the outcomes.

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10. This was mainly due to the data not being able to be obtained because records did not allow it due to the offender being released or recalled (meaning previous information was unable to be accessed). 19 participants had only just completed TSP at the time of the research, therefore six month data was unable to be gathered for them.

11. Statistical significance only shows the changes are real and not due to chance, it does not mean change is clinically relevant. When change means they have moved into the normal level of functioning it is 'clinically significant' (Jacobson and Traux, 1991).

12. The Hosmer – Lemeshow Goodness of Fit was used as SPSS states this is the most reliable test of model fit available in SPSS (Pallant 2005: 167)

Table 2

A table to show the percentage of participants who achieved CSC.

Psychometric	Percentage showing CSC
Eysenck's Impulsivity (Imp)	10.2
Locus of Control (Loc)	0
General Attitude to Offending (GAO)	7.1
Anticipation of Re-Offending (ARO)	6.1
Victim Hurt Denial (VHD)	0
Evaluation of Crime as Worthwhile (ECW)	3
Perception of current Life Problems (PLP)	0.5
Confusion (Conf)	4.6
Defensiveness (Def)	3.6
Mollification (Moll)	3.6
Cut Off (Cut)	4.6
Entitlement (Ent)	1
Power Orientation (Pow)	3
Sentimentality (Sen)	0.5
Superoptimism (Sup)	3.6
Cognitive Indolence (Cog)	7.6
Discontinuity (Dis)	4.6

Table 3

A table to show logistic regression predicting CSC on the GAO psychometric from the factors analysed.

Variables	B	S.E.	Wald X²	df	p	EXP(B) (Odds ratio)[14]
Constant	6.851	4.154	2.720	1	.099	944.728
Sentence (IPP)	-1.435	1.135	3.634	2	.163	-
Sentence (Life)	-1.635	1.243	1.731	1	.188	-
Sentence (Determinate)	-1.283	.721	3.161	1	.075	-
Treatment Readiness	-.098	.042	5.438	1	.020	.906
Need	-.203	.187	1.169	1	.280	.817
Offence (Violent)	1.467	.892	2.955	2	.228	-
Offence (Sexual)	1.163	.677	2.955	1	.086	-
Offence (Other)	-18.557	9033.715	.000	1	.998	-
Start score	.002	.219	.000	1	.994	1.002
Risk	.119	.202	.346	1	.556	1.127

The Wald criterion demonstrated only Treatment Readiness made a unique statistically significant contribution to the model (p = .020). The odds ratio (EXP(B)) of 0.91 for Treatment Readiness was less than 1, indicating for lower scores on the Treatment Readiness questionnaire, participants were 0.91 times less likely to show CSC, controlling for other factors in this model.[13] It did not improve the classification success rate which remained at 90.1 per cent for both models (Table 3).

For the Cognitive Indolence psychometric, Cox and Snell's R^2 of .076 and Nagelkerke's R^2 of .153 showed the model as a whole explained between 7.6 per cent and 15.3 per cent of the variance in change and correctly classified 89.2 per cent of cases. The Hosmer-Lemeshow statistic was not significant indicating there was goodness of fit and support for the model (chi square = 8.738, df = 8, p = .37).

The Wald criterion demonstrated Treatment Readiness (p = .040) and behaviour score at the start of the course (p = .029) made a unique statistically significant contribution to the model. The odds ratio for Treatment Readiness of 1.075, indicating participants who had higher motivational scores were nearly 1.1 times more likely to show CSC.[15] The odds ratio for the behaviour score at the start of the course was 1.52, indicating those with a higher behaviour score were 1.5 times more likely to show CSC.[16] It did not improve the classification success rate which remained at 89.2 per cent for both models (Table 4).

For the Discontinuity psychometric, Cox and Snell's R^2 of .141 and Nagelkerke's R^2 of .342 showed the model as a whole explained between 14.1 per cent and 34.2 per cent of the variance in change and correctly classified 93.4 per cent of cases. The Hosmer-Lemeshow statistic was not significant indicating there was goodness of fit and support for the model (chi square = 4.065, df = 8, p = .85).

Sentence type (IPPs) made a statistically significant contribution to the model. An odds ratio is not recorded due to the categorical nature of sentence type.

No other factors significantly predicted CSC on any of the psychometrics (Table 5).

Hypothesis five

The relationship between the six month behaviour score and CSC on the psychometrics was investigated using Pearson product-movement

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13. There is a 95% confidence that the odds ratio will fall between 0.84 and 0.98.
14. Odds ratios are not available for sentence type or offence type due to the categorical nature of the data.
15. There is a 95% confidence that the odds ratio will fall between 1.0 and 1.15.
16. There is a 95% confidence that the odds ratio will fall between 1.04 and 2.21.

Table 4

A table to show logistic regression predicting CSC on the Cognitive Indolence psychometric from the factors analysed.

Variables	B	S.E.	Wald X²	df	p	Odds Ratio
Constant	-11.15	3.792	8.648	1	.003	.000
Sentence (IPP)	.591	1.137	.828	2	.661	-
Sentence (Life)	.607	1.048	.335	1	.563	-
Sentence (Determinate)	.719	.796	.816	1	.366	-
Treatment Readiness	.073	.035	4.225	1	.040	1.075
Need	.130	.149	.759	1	.384	1.139
Offence (Violent)	.625	1.059	1.214	2	.545	-
Offence (Sexual)	.586	.726	.651	1	.420	-
Offence (Other)	-.669	1.178	.322	1	.570	-
Start score	.419	.192	4.770	1	.029	1.520
Risk	.119	.193	.346	1	.556	1.127

correlation co-efficient. Correlations were conducted between the six month score and each psychometric. There were only very small correlations found between the six month scores and the psychometrics. Of these the strongest, although not significant, was a small, positive correlation between the six month scores and ARO, $r(81) = .16$, $n = 83$, $p > 0.05$.

Discussion

Hypothesis one

This hypothesis was supported for behaviour change after six months but not immediately after the course had finished. The finding there was a significant difference between prison behaviour at the start of TSP and six months after TSP but not at the end of TSP suggests some time is needed for change to be implemented by those completing the course. It suggests there is not going to be an immediate effect of attending the course which could help those working with ex-group members have realistic expectations about their behaviour at the end of the course. Professionals can sometimes dismiss the course as not working for a group member if they do not use the skills once the course has finished whereas this finding suggests, in the case of Young Offenders (YOs) at least, time needs to be given before a judgement is made. There are also implications for putting group members on a TSP course just before they are released as this finding suggests they may not implement change immediately and therefore may not use the skills immediately upon release. This is supported by research that suggests change is not maintained until an individual has maintained behaviour for at least six months (DiClemente, Schlundt and Gemmell 2004[17]). Until this point, relapse into problem behaviour is more likely, which supports prison behaviour scores only being significant after six months, as participants would have to maintain at least a month of changed behaviour. However, caution needs to be taken when interpreting these results, due to the lack of a control group and other factors (such as other programmes completed, time spent in prison, maturation etc) that have not been accounted for. It is likely these could all influence change in behaviour after completing TSP and therefore it cannot be said with certainty that TSP caused the behaviour change found. This is discussed further in the Limitation section.

Hypothesis two

This hypothesis was only supported in regards to the factors of sentence type. The finding that only the sentence type and end of course score are the only variables statistically significant in explaining the difference in the six month behaviour, is a little

Table 5

A table to show logistic regression predicting CSC on the Cognitive Indolence psychometric from the factors analysed.

Variables	B	S.E.	Wald X²	df	p	Odds Ratio
Constant	-21.995	6697.130	.000	1	.997	.000
Sentence (IPP)	.082	0.043	6.525	2	.038	-
Sentence (Life)	20.935	6697.128	.000	1	.998	-
Sentence (Determinate)	18.579	6697.128	.000	1	.998	-
Treatment Readiness	-.047	.051	.833	1	.361	.955
Need	.004	.236	.000	1	.986	1.004
Offence (Violent)	.127	1.212	.053	2	.974	-
Offence (Sexual)	-.213	1.048	.041	1	.839	-
Offence (Other)	.075	1.334	.003	1	.955	-
Start score	.374	.261	2.047	1	.153	1.453
Risk	.495	.272	3.318	1	.069	1.640

17.   DiClemente, C.C., Schlundt, D., & Gemmell, L. (2004). 'Readiness and stages of change in addiction treatment'. *American Journal on Addictions*, 13(2), 103-119.

surprising. It was expected that, based on previous research, factors such as risk, need and treatment readiness may also contribute to it. The sentence type explaining the difference was determinate sentence prisoners. This can be explained by Life sentenced prisoners having higher behaviour scores to start with and being a smaller sample so any changes would be difficult to identify. IPPs are likely to be a higher risk group with more problems due to the fact they are an IPP so perhaps one intervention such as TSP was not enough to sufficiently address problems and show behaviour change, whereas it may have been for determinate sentence prisoners who are likely to have less serious crimes and fewer risk areas to address.

In regards to risk and need not being statistically significant in explaining the change, this could be a result of the participants in the study mainly being at the higher end of the risk and need measurements. This was shown by the skewed distribution and it also fits with the population of the prison. However, it does fit with the 'What works' principle as the finding has shown the programme is effective for those with higher risk and higher need as all participants who attend TSP have a risk above 50 per cent (except in a few override cases) and all have a certain level of need, therefore the participants included were generally higher risk and higher need than people not suitable for TSP. However, it does not account for why there are no differences between those in the medium risk range and those in the higher risk range. Most previous research in the determination of 'What works' focuses on adult offenders. However, it may be this is not as applicable to YOs and those assessed as medium risk/need, benefit as much as those assessed as high risk/need and vice versa.

In regards to Treatment Readiness, the average score of 76 was above the suggested cut off point of 72 (Casey *et al.* 2007: 1436). This could suggest this is a useful cut off point because of the fact Treatment Readiness did not contribute significantly to the finding. If the sample had included more with lower scores on the CVTRQ, significance may have been found as the lower scores may have resulted in showing those with lower scores do not significantly change their behaviour. Therefore through the lack of a finding in this area, it does help to confirm participants with higher CVTRQ scores are more likely to benefit from the course.

That behaviour at the start of the course did not significantly explain change is also a positive finding. This would suggest prisoners with all types of behaviour benefit from the course and therefore should not be excluded from the course, based on poor wing behaviour. It also suggests, even if their wing behaviour is poor at the start of the course, TSP can help them to change this. This is particularly useful information for YOs. Their behaviour can typically be worse than adults and therefore it is positive that programmes such as TSP can help them improve this.

Hypothesis three

This hypothesis was supported for 4 of the 17 scales measured, based on a percentage of CSC being 6 per cent of the sample or more.[18] The psychometric that showed the most CSC was Eysenck's Impulsivity scale. This is consistent with the

areas TSP addresses as well as the population of the prison of YOs who tend to be characterised by impulsivity. Victim Hurt Denial and Locus of Control showed no CSC, which is not surprising given TSP does not directly address these areas and the nature of the population means being defensive and blaming of others is quite a common issue, likely due to the young age. General Attitude to Offending (GAO) and Anticipation of Re-offending (ARO) were also areas which showed some CSC. This may fit with the finding Treatment Readiness of the sample was quite high as Treatment Readiness reflects motivation and the GAO and ARO are also likely to be affected by this. Cognitive Indolence[19] also showed some CSC. Again this could be related to the Treatment Readiness of those participating as well as the course content, which teaches the issues with taking short cuts and not thinking of consequences. The results are similar to previous ETS research which found modest improvement on impulsivity scales, cognitive indolence and also Locus of control (Blud *et al.* 2003) and CSC on impulsivity and significant change on Locus of Control (McDougall *et al.* 2009). As discussed, the Locus of Control finding may be due to the difference in the programme or, more likely a difference in the population, with YOs perhaps more likely to attribute blame to others than themselves.

One factor which may help to explain there only being a small number of participants who showed CSC is the timing of the psychometrics. These were completed immediately post course and, as the findings from the behaviour scores show, there is less likely to be an effect at this time. If psychometrics are implemented six months post course, a bigger change may be found. The quality of programme delivery should not be a factor in this case as the TSP programme at the establishment was recently audited and received an 'exceeded' marking. However the method used to determine CSC, by using the Reliable Change Index (RCI), has been suggested that it may be a 'too stringent criterion for determining clinically meaningful change' (Eisen *et al.* 2007: 286). It may be that the criterion reduced the likelihood of finding CSC.

Hypothesis four

This hypothesis was only supported by two factors, Treatment Readiness and sentence type (IPPs), significantly contributing to three psychometric measures. Treatment Readiness significantly contributing to the GAO is not necessarily surprising as a high Treatment Readiness score reflects a positive attitude towards changing offending behaviour. Treatment Readiness and good behaviour at the start of the course, contributed significantly towards clinical change on Cognitive Indolence. This may indicate those with treatment ready attitudes and already good behaviour are less likely to want to take short cuts and more ready to improve this. In regards to Discontinuity, IPPs being the factor that contributes towards clinical change also makes sense as Discontinuity measures ability to keep goals in mind and remain focused, which is something that is important for IPPs in order to gain release.

The fact no other factors contributed significantly to CSC may be due to timing of the administration of psychometrics and can also be related back to the same

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18. Advice taken from Interventions Unit was that 10% of the sample achieving clinically significant change would be what they would expect to see – only Eysenck's Impulsivity scale achieved this percentage.

19 . Those who take short cuts and the easy way and are lazy, unmotivated and irresponsible.

reasoning as to why more factors were to found to contribute to behaviour change.

Hypothesis five

This hypothesis was not supported as only very small correlations were found between the six month behaviour change and CSC on the psychometrics. Of these, the ARO was the largest which measures optimism of behaviour change so it appears those that were optimistic in their attitude, did show some behaviour change. The lack of correlations may be to do with the different timings of the measures and six month psychometric scores may correlate better. Psychometrics are not administered as standard six months post TSP but it may be useful for this to be investigated further as it may give a more accurate representation of change achieved, for YOs at least.

Limitations

One of the main limitations of this study is there was no comparison group. A comparison group was not used as it was felt to retrospectively match the participants to those who had not completed treatment would be problematic. Previous research has cited the problem with retrospective matching and, due to the nature of the data, this would have been the only way to gain a comparison group. A comparison group may have helped give more confidence that any findings were as a result of completing TSP, however this would have still been difficult to ascertain due to the nature of the population and the many issues that affect behaviour change that cannot be controlled for. One such issue is the completion of other programmes after TSP, which was not accounted for in the current research. Of the sample, approximately 47 went on to complete the Controlling Anger and Learning to Manage it (CALM) programme at the establishment, although this was not always within six months of completing TSP and does not account for those completing it at another establishment or completing a programme of a different type. There could be many other factors that could also have contributed to

change that could not be controlled for, such as movement to an adult prison, moving of wings or a significant event happening. As the research only took place in one prison, the results could have been limited by staff-prisoner relationships.[20] At a prison where these are more positive and consistent, a different effect on behaviour change may be found. A further limitation was the missing data for the six month behaviour scores. A more robust follow up of behaviour for this type of individual would be useful.

Conclusion and recommendations

In conclusion this research has analysed the impact of TSP on short term behaviour change in prison and shown prison behaviour is improved six months after completing TSP. This is an important point as much previous research has focused on re-offending but many prisoners still spend periods of time in prison after completing TSP so a change in their behaviour in prison is still useful to the criminal justice system. This has been conducted with YOs and is helpful in considering what the specific issues are with them and any differences compared to adult prisoners. It also included the use of CSC when looking at the outcome of the psychometrics, which is important as it indicates whether participants are improving to the extent that they are functioning in a way similar to non-offending populations. Finally the comparison between behaviour change and psychometric change has been useful in identifying how useful the psychometric outcome measures are. Further research should concentrate on psychometric measures a period of time after the course has finished, as well as taking into account other factors that could impact on change, such as other programmes completed. It would be useful if future research can incorporate a comparison group into its design, looking at non-completers and their behaviour. It may also be useful to look at their pre-course psychometric scores and other characteristics to identify if there are common factors between non-completers.

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20 .   The recent HMCIP (April 2013) found that staff-prisoner relationships at the establishment showed 'some positive and caring staff, but also too many who were indifferent. Personal officers focused mainly on prisoners' behaviour rather than on a holistic approach to their sentence'.

Reviews

Book Review
What Works in Offender Rehabilitation: An evidence-based approach to Assessment and Treatment
Edited by Leam Craig, Louise Dixon and Theresa Gannon
Publisher: Wiley-Blackwell (2013)
ISBN: 978-1119974574 (hardback)
978-1119974567 (paperback)
Price: £75.00 (hardback) £36.99 (paperback)

This book, quite simply, is an essential read for those interested in knowing how best to rehabilitate offenders, the importance of which cannot be underestimated. Rehabilitation is central to the Coalition Government's criminal justice policy with a rehabilitation revolution being at the core of the December 2010 Green Paper 'Breaking the Cycle — Effective Punishment, Rehabilitation and Sentencing of Offenders'. This was taken forward in the January 2013 Consultation Paper 'Transforming Rehabilitation: A revolution in the way we manage offenders'. The government's plans were then set out in May 2103 when 'Transforming Rehabilitation: A Strategy for Reform' was published.

While there may be many disagreements about the government's approach to achieving this revolution in rehabilitation one cannot doubt the government's commitment to reducing reoffending. As Chris Grayling, Lord Chancellor and Secretary of State for Justice, states in the Ministerial Foreword to the Transforming Rehabilitation Consultation Paper:

'Reoffending has been far too high for far too long…We need a tough but intelligent Criminal Justice System that both punishes people properly when they break the law and also supports them to get their lives back on track, so they don't commit crime again in the future… Offenders often lead chaotic lives: Broken homes, drug and alcohol misuse, generational worklessness, abusive relationships, childhoods spent in care, mental illness, and educational failure are all elements so very common in the backgrounds of so many of our offenders. And right now, we are failing to turn their lives around … Transforming rehabilitation is my top priority'.

Rehabilitation, consequently, is central to the National Offender Management Service's business priorities with the 'tagline' in the NOMS 2013-2014 Business Plan, above 'Our Statement of Purpose' being, 'preventing victims by changing lives'. Indeed, the second element of NOMS' Statement of Purpose is 'we will work to protect the public and reduce reoffending by delivering the punishment and orders of the courts and supporting rehabilitation by helping offenders to reform their lives.'

Given the above context, this book offers the evidence on how best to rehabilitate offenders. It contains chapters written by internationally renowned academics and practitioners but also contributions from those who are commencing their research and/or clinical careers.

All relevant areas of offender rehabilitation are covered. Theoretical models are explored: Risk Need Responsivity and Good Lives. Sexual and crimes of violence are considered, including chapters on intimate partner violence, those with schizophrenia who behave violently and female sexual offenders. Discussed also is What Works with juvenile, personality disordered and psychopathic offenders; those who have committed anger-related, arson related or substance misuse related offences; offenders with intellectual disabilities and, those on supervision in the community. There is a chapter on treating offenders in a therapeutic community and one on multi-agency approaches to effective risk management. Contained within the book are ethical, legal, cultural, social and psychological components of offender rehabilitation with contributors from the UK, USA, Canada, Australia, New Zealand and Norway.

The approach adopted by the editors is summarised in Tony Ward's foreword where he writes 'the heart of any rehabilitation initiative is the attempt to persuade individuals to reorientate (and at times replace) their core values and the way in which these values are instantiated in their lifestyles. It is simply not enough to target criminogenic needs and levels of risk when designing intervention programmes.' Embraced within this book is a much broader approach to rehabilitating offenders than when offending behaviour programmes were first developed in the late 1990's and early years of the 21st century.

Very much countered is the 1970's position[1] that there is very little that can be accomplished when seeking to prevent offenders from engaging in criminal activity. Those with a rehabilitative frame of reference and a positivist view of human nature always knew that this position did not reflect the reality of some offenders choosing, on leaving prison, not to continue with their

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1. For example, Martinson, R. (1974). What Works? — Questions and Answers About Prison Reform, *The Public Interest,* 35: 22-54.

criminal lifestyle and opting out of a life of crime. How to assist those offenders who do want to change and who have the capacity to do so, is captured within this book.

In the book's introductory section, there is a historical overview of 'What Works' by McGuire. This contains summary information from 100 meta-analyses or systematic reviews of individually focused outcome studies on reducing criminal conviction or anti-social behaviour published between 1985-2013. Following this Jonson, Cullen and Lux examine the importance of public support for the rehabilitation of offenders and the different dimensions of public response to crime: prejudiced, punitive, progressive and rehabilitative.

There are two chapters on risk assessment, one by Bonta and Worwith which includes consideration of clinical judgement/professional discretion vs quantitative risk assessment tools and another by Craig, Beech and Cortini. Craig, Beech and Cortini conclude their chapter by saying that a number of promising actuarial and structured approaches to sexual and violent risk assessment have been developed and evaluated. For the sexual offender sexual (deviant) interest, intimacy deficits and affect dysregulation have consistently identified sexual recidivists. For violent offenders, antisocial attitudes, values and beliefs, rule violation, poor insight, impulsivity and substance misuse are the salient reconviction risk factors.

The twelve chapters on offender rehabilitation include a review of cognitive-skills programmes by Hollin, Palmer and Hatcher and an evaluation by Tew, Harkins and Dixon on what works in reducing violent re-offending in psychopathic offenders. The debate continues on intervention efficacy with this difficult to treat

group whose risk of reoffending remains high.

Three chapters explore what works in secure settings with Shuker, in his chapter on therapeutic communities, commenting that treatment is more likely to be effective in an organisation where genuine and appropriate responsibility and ownership for personal recovery can be given to the person receiving this assistance. This applies to all rehabilitative programmes and in forensic mental health settings is represented in the movement in some services from psychiatric rehabilitation towards the adoption of a recovery focused model.[2]

The book's final section of five chapters are on cultural factors and individualised approaches to offender rehabilitation. Included are contributions that offer an Australasian perspective on offender rehabilitation. Firstly, Thakker considers the development of programmes for indigenous offenders: Aboriginal (including Canadian Aboriginal offenders), Inuit, Maori and Pacific and Torres Strait Islanders; while, secondly, Day and Collie provide an overview of different types of Australasian programmes.

This book is therefore a comprehensive, valuable and cogent reference source on offender rehabilitation that has an international perspective. One should also not forget too, that there is an argument[3] that offending behaviour programmes and individual interventions support desistance processes rather than cause them with perhaps more important social rehabilitative factors being obtaining a job, marriage, supportive peers and receiving training or an education.

Professor Michael Brookes OBE
Birmingham City University.

Book Review
Sport in Prison: Exploring the role of physical activity in correctional settings
By Rosie Meek
Publisher: Routledge
ISBN: 978-0-415-85761-1
Price: £80.00 (Hardback)

'PE can make a major contribution to the physical, mental and social well-being of prisoners.'[1] This quote from the Prison Service Order for Physical Education (PSO 4250) features early on in Meek's book, yet it is astonishing to discover that this is the first book to fully explore the role of sport in prison and the potential impact it can have on the rehabilitation of prisoners who take part. With re-offending rates at a high level, Meek's suggestion that sport offers an alternative way for prisoners to take risks, feel excitement, make new friends and, critically, engage them in behaviour change in the first place, seems obvious.

Meek is an established and credible psychologist, with a strong interest in Criminology and prisons in particular. The book, which forms part of a wider series by Routledge on sport and culture, is set out and reads like a psychology textbook or extended journal article, but at the same time the subject is engaging, and the prose surprisingly free enough from jargon, to peak the interest of the average curious layman.

It is the fact that Meek draws from more than just Psychology literature that makes the book so accessible. She also brings together research from Criminology, Criminal Justice, Sociology and Sports Studies, along with her own up to date original research in prisons across England and Wales, conducted over a number of years. The research recorded in the book

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2. See Drennan, G. and Alred, D. (2012) *Secure Recovery: Approaches to recovery in forensic mental health settings.* London: Routledge.
3. For example, McNeill, F. (2012) Four forms of 'offender' rehabilitation: towards an interdisciplinary perspective. *Legal and Criminological Psychology*, 12, 251-264.

1. HM Prison Service (2009) *Physical Education PSO 4250.*

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draws on interviews, surveys and focus groups with prisoners, prison gym staff, stakeholders and senior managers in the prison service, and is supplemented with analysis of HM Inspectorate of Prison reports and other broader data.

Despite the fact that most research in this area is concentrated on young people and the role of sport in the community rather than in prison, Meek pulls together 14 relevant, succinct and informative chapters. She starts with an overview of the history of physical education in prisons, highlighting the variations across the prison estate with regards to the opportunity to take part in sport, before moving on to the specific role of sport in relation to female and younger prisoners, and separate chapters on the positive impact sport can have on employment, education and rehabilitation.

The chapters of particular interest include those detailing Meek's research into football and rugby academies at HMP and YOI Portland, and the significant affects felt by prisoners, staff and managers from the operation of these academies. In addition, the chapter regarding the risks of providing sport in prison, bravely identifying some of the potential negative effects on prisoner behaviour that engaging in competitive activities can have, such as increased narcissism and illicit use of steroids, shows that while an advocate of sport in prison, Meek can remain objective and focussed on the appropriate application of sport. Finally, the short chapter focussed on the characteristics of prison officer Physical Education Instructors (PEIs) and the unique opportunities they have to interact with prisoners, was interesting and clearly demands further research as suggested by the author.

In light of current tough economic conditions, with sport sitting outside of the payment by results agenda, it is essential that, as with art, the impact of sport as a way of engaging with prisoners, helping them to rehabilitate or uniquely simply improving their health, is fully understood, and this book goes some way to achieving that. It is undoubtedly useful as an academic text, but also is written in a style that a PEI, Head of Reducing Re-offending or Governor could easily pick up and use to shape their thinking in a practical way. Meek has balanced literature from a combination of diverse fields and her own research, in an original, interesting, yet easily readable format for all types of readers.

Paul Crossey *is Head of Young People at HMYOI Feltham*.

Book Review
Her Majesty's Philosophers
By Alan Smith
Publisher: Waterside Press (2013)
ISBN: 978-1-904380-95-5
(Paperback)
Price: £16.50 (paperback)

Novelist and Guardian journalist Alan Smith draws on experiences teaching English and Philosophy in a Category C prison to paint an absorbing picture of prison life. Smith interweaves accounts of the triumphs and failures of 'Her Majesty's Philosophers' in his class with his own views on the purpose of prison and prison education.

Smith's prison career began modestly after an informal approach to cover a Shakespeare class. Admitting his sole knowledge of prisons was shared pre-conceptions that they were 'where … demons are…degenerate, violent, predatory' Smith recalls nervously entering prison and being struck by the physical environment. He describes the collection of 'gates … metal fences topped with wire, a brick cell block and numbered windows' and realising 'how dreadful prison was'.

From such inauspicious beginnings Smith embarked on a 14 year career teaching Philosophy in prison. Throughout this period he kept copious notes on each interesting comment, perspective, analogy and story offered by his students. This book is largely a knitting together of these stories into a narrative on the lives of long term prisoners.

These powerful yet humble stories are the book's great strength. Smith's prisoner descriptions are rich and raw; eliciting feelings of sympathy and annoyance in equal measure. We share his delight at those obtaining university places and empathise with individuals rebuilding lives after release. All too often we subsequently share his disappointment as a significant number return to custody. Thus Smith gives insight into both halves of prisoner worlds; the ordered prison structure on one side and the disordered life to which many return on the other.

In the classroom Smith portrays likeable and witty individuals who are creative and academically capable. He feels affinity with his students, admits to being intellectually inferior to them and sees similarities between his past and theirs. In the structured world of the prison classroom at least, Smith attempts to narrow the gap between those in prison and those outside and admits to a preference for teaching prisoners over university students because of their attitude and aptitude for learning.

Smith mimics the immediacy of prisoner language to paint his picture of the prison classroom. He revels in describing the larger than life characters he has met, often focusing on the dichotomy between their physical size and imposing stature and the sensitivity they display in class. He describes with wit and enthusiasm his

students' tendency to apply analogies from their fragmented, violent pasts to form complex philosophical arguments and describes in fond terms the way they translate Shakespeare's language into modern street slang.

Smith also replicates the dry humour of the prison environment. Partly in reverence to the much cherished prison story teller, Smith's delivery imitates the banter of prison landings. Humour and story telling performs dual roles in prisons; increasing an individual's standing within the group and masking weakness, fears and true emotions. Having experienced this humour and banter first hand, Smith reflects it in his writing to add depth to his prison insight.

Yet in amongst the varied compliments Smith pays his prisoners, he never shies away from the brutality and violence they have experienced and inflicted outside his classroom. He casually refers to a student having killed a police dog and another in prison for violence with an axe. His matter of fact delivery is designed to reflect prisoner perception that extreme violence is a routine occurrence. Smith emphasises the stark contrast between the reasoned and measured arguments prisoners create in class with the destructive power they have demonstrated outside it.

Violence is not always to the fore but permanently lingers in the background. Smith's narrative thus reflects the uneasy reality of life in prison wherein a threat of violence pervades periods of relative calm. Smith admits to surprise at the ease with which he became accustomed to living in this tense environment. It was only with hindsight he acknowledged the draining effect it had on his personal life.

Smith offers a very personal insight into the effects prison work had on him. He candidly describes the blurring between his lives inside and outside prison. He admits to eventually growing apathetic and sceptical towards prisoner issues, to becoming disillusioned at the changing objectives of the education department and becoming increasingly drained by the work. He finally resigned as the negative impact began to outweigh the contribution he could make.

Unfortunately the strength of this book is also its limitation. At the outset Smith dedicates a chapter to exploring the concept of 'truth' in a bid to explain whether prisoner stories amount to fact, fiction or something in between. This unfortunately highlights a credibility issue; the witty and engaging stories which are intended to bring 'fresh perspectives to the minutiae of prison life' cannot be relied upon as anything more than best recollection.

The purpose of the book is also unclear and it offers no solutions to the issues it raises. For instance Smith questions the purpose and priorities of prison education, offering a view it has become too obsessed with making prisoners employable to the detriment of harnessing their natural abilities. However he offers no viable alternative or direction forward save for a few lines on specialist education prisons.

Smith's book therefore amounts to a lively collection of prisoner caricatures but is nonetheless an engaging and thought provoking read. In the same way the series Porridge was not factual; many practitioners consider it the most realistic representation of prisons and cherish it for its portrayal of prison humour. Smith's book offers a similar insight and re-opens a debate about the contribution qualitative sources can make to our view of life behind bars.

Chris Gunderson is an Operational Manager working for NOMS Business Development Group.

Book Review
Inter-war penal policy and crime in England: The Dartmoor convict prison riot, 1932
by Alyson Brown
Publisher: Palgrave Macmillan (2013)
ISBN: 978-0-230-28218-6 (hardback)
Price: £50.00 (hardback)

The Strangeways Riots of 1990 still loom large over the contemporary prison system in England and Wales. For 25 days, prisoners took control of one of the largest prisons in the country, sparking a series of copycat incidents in other prisons and drawing the world's media to the scene. The subsequent inquiry conducted by Lord Woolf delved deep into the causes of the disorder, looking beyond the violence to the root causes and the state of prisons at the time. Woolf's recommendations were only partially followed up but nevertheless provided a positive and lasting legacy. This book, by Alyson Brown of Edge Hill University, revisits the 1932 riot at Dartmoor prison, which, like Strangeways, was a significant public, political and professional watershed but is now largely forgotten. Drawing upon recently released public documents, Brown offers a 'microhistory'; using a detailed examination of a particular event in order to illuminate wider themes and issues. In doing so, she provides a fascinating and revealing insight into the penal policy of the inter-war years.

The inter-war years are sometimes seen as a golden age of imprisonment. A low and declining prison population, combined with the liberal intentions of important personnel such as Alexander Paterson created the impression of a period of benign, patrician reform. It was the Dartmoor riot which broke out in January 1932 that threatened to undermine this façade. Although relatively short-lived, the riot did lead to a total loss of control, with aerial

photographs of the burning prison making this visible to the world. However, the mutiny was suppressed by force and then through the deployment of the processes of criminal law and official inquiry.

In her careful analysis of the public records, Brown is able to reveal the oppressive aspects of the regime and the poor conditions endured by prisoners. This raised questions of legitimacy and undermined the confidence and trust of prisoners. However, unlike the Woolf inquiry, these grievances were contained and given limited airing in the legal processes, the official inquiry or the press reports. Instead, the Du Parcq report blamed a small group of hardened prisoners,

the character of the Governor (who had unusually for the time come through the ranks and was therefore seen as lacking the right breeding), and the local culture of Dartmoor itself. By managing and limiting the public discourse about the riot, fundamental questions about penal policy were avoided and the political and public storm died away.

Under the surface though, Brown is able to excavate some of the tensions at play within the prison system of the 1930s. Class and elitism can be seen both in the haughty response to the Governor of Dartmoor, but also in the gulf between the intentions of the officials and the reality on prison landings. There were also changes in society with the threat of capitalist

urbanization and its dark underbelly of organized and serious crime. Uncovering these issues illustrate the intersection between the peculiar local culture and context of prisons and the broader social changes taking place at the time.

This book offers a fascinating insight into the hidden history of inter-war penal policy. Given the uncertain future of Dartmoor prison itself, it is also a poignant reminder of the iconic position that prison holds and how its sometimes troubled history profoundly reflects the history of English prisons as a whole.

Dr Jamie Bennett is Governor of HMP Grendon and Springhill.

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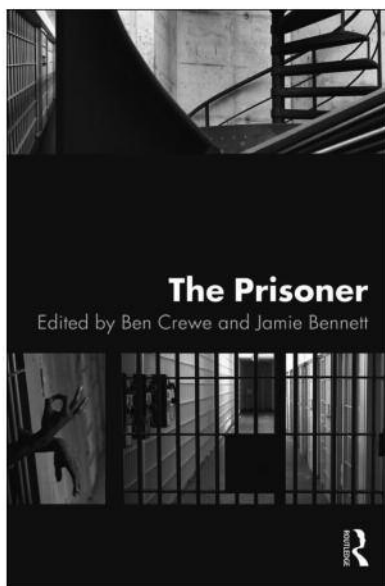| *Order Form* (Please photocopy this page)	Copies	Total
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