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Reducing Prison Violence

Reducing prison violence: the role of programmes

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As rising levels of violence in prisons are reported in England and Wales, managing prisoner behaviour has become a pressing concern for managers. This paper considers the role that programmes, particularly treatment programmes, can have in helping to reduce levels of prison violence.

The research in this area stems mostly from America where prisoner antisocial behaviour is typically described in terms of prison 'misconducts.'¹ High levels of misconduct mean reduced safety for both prisoners and staff.² Further, research suggests that prisoners are more likely to reoffend if they are released from jails with high levels of misconduct.³ High rates of misconduct are also more likely to lead to stress amongst staff and job dissatisfaction. There is a subsequent impact on absenteeism and turnover.⁴

Rates of prison misconduct are also important because of their association with recidivism. Several studies have found that prison misconduct, particularly violent misconduct, significantly predicts recidivism.⁵ Researchers suggest that the link between misconduct and recidivism should not come as a surprise, given that prison misbehaviour is a key indicator of continuity in delinquent and other anti-social behaviours.⁶ Misconduct is, therefore, important because it a) may contribute to recidivism, and b) may provide additional information about recidivism risk.⁷ There is an urgent need to identify effective management solutions to help reduce the levels of violence in prisons.

Can programmes help to reduce prison violence?

One possible management solution could be to use programmes. Programmes offering opportunities for self improvement, such as work, education and treatment programmes, can positively impact on levels

of institutional misconduct.⁸ Indeed, it seems that increasing the number of treatment programmes in a jail is one of the most frequently recommended techniques for maintaining order in a prison.⁹ Is this the right approach? What role should treatment programmes play in efforts to reduce prison violence?

There are many and varied kinds of treatment programmes. However, when it comes to programmes which reduce rates of recidivism, research has shown that some types of programmes perform consistently better than others. There is a substantial body of evidence which demonstrates that programmes which have been designed in line with the 'What works' literature, have a significant impact on reoffending rates.¹⁰ More specifically, effective programmes are designed and delivered in line with the principles of effective treatment; Risk, Need, and Responsivity (RNR). The risk principle states that treatment is most effective when it is applied to those who have an appreciable risk of offending; that is, the treatment of higher risk offenders should be prioritised over lower risk offenders. The need principle states that criminogenic needs (the dynamic or changeable characteristics that contribute to an individual's criminal activities such as criminal attitudes and criminal associates) must be assessed, identified and targeted in order for treatment to be effective. The responsivity principle states that treatment effectiveness can be maximized if cognitive behavioural treatment approaches are used, and if the content is adapted to accommodate specific individual needs (e.g., cognitive ability, cultural background). A fourth principle, sometimes described as the fidelity principle, also increases the likelihood of programme effectiveness. This principle stresses the importance of ensuring that staff are well trained and interpersonally

1. Prison misconducts are officially recorded incidents which include violent, nonviolent, unspecified, and institutional adjustment incidents. This definition therefore, unless explicitly stated, includes non-violent acts.
2. Goetting, A., & Howsen, R., (1986) Correlates of prisoner misconduct. *Journal of Quantitative Criminology*, 2, 31-46
3. Eichenenthal, D., & Blatchford, L., (1997) Prison crime in New York. *The Prison Journal*, 77, 456-466.
4. Cullen, F.T., Latessa, E.J., Burton, V.S., & Lombardo, L.X., (1993) Correctional orientation of prison wardens: Is the rehabilitative ideal supported? *Criminology*, 31, 69-92.
5. Cochran, J.C., Mears, D.P., Bales, W.D., & Stewart, E.A., (2012) Does inmate behaviour affect post release offending? Investigating the misconduct-recidivism relationship among youth and adults. *Justice Quarterly*, 1-30.
6. Trulson, C.R., DeLisi, M., & Marquart, J.W. (2011) Institutional Misconduct, delinquent behaviour, and rearrest frequency among serious and violent offenders. *Crime and Delinquency*, 57, (5), 709-731.
7. Bushway, S.D., & Apel, R., (2012) A signalling perspective on employment based reentry programming: training completion as a desistance signal. *Criminology and Public Policy*, 11, 21-50.
8. French, S.A., & Gendreau, P., (2006) Reducing prison misconducts: What works! *Criminal Justice and Behaviour*, 33, 185-218.
9. Gendreau, P., & Keyes, D., (2001) Making prisons safer and more humane environments. *Canadian Journal of Criminology*; 43, 123-130.
10. Andrews, D.A., and Bonta, J., (2010) *The psychology of criminal conduct*. (5th ed). Cincinnati, OH: Anderson.

sensitive. It also directs that programmes should be monitored and evaluated to ensure they are delivered as designed.

However, this paper is not concerned about the impact of programmes on recidivism. Rather, it is concerned with the impact of programmes on violent misconduct whilst the offender is still in prison. Surprisingly, there are few evaluations of the impact of treatment programmes on violent prison misconduct.¹¹ Further, the evaluations which do exist are often flawed (inadequate comparison groups, small sample sizes, limited follow up time and so forth). Nevertheless, there are some studies which, taken together, help us to understand the impact of these programmes on prison violence.

In this paper, I will review the studies which describe the impact of programmes for specific offender segments within a prison/ cluster of prisons. Second, I will describe an attempt to review the research in a more robust way using meta analysis. Meta analytical research designs combine the results from a number of studies to determine if there is an overall effect amongst the studies as a whole. By combining studies, a meta-analysis increases the sample size and thus the power to study effects of interest.

Determining the impact of programmes on prison behaviour: individual studies

Intuitively it makes sense that programmes which aim to reduce violent recidivism would also have a positive impact on levels of prison violence. Surprisingly, few studies have attempted to determine this. The 'Strategies for Thinking Productively' programme was designed to teach prisoners the basic principles of self change. The programme enabled prisoners to be able to observe their thoughts and feelings and recognise risks associated with these. They were also taught to use new thinking patterns to reduce this risk, and be able to apply this new

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understanding to real life situations. The programme was delivered to violent offenders who volunteered to complete treatment. Evaluation found that those who had completed at least ten months of the programme experienced a reduction in inmate assaults and refusals to obey direct orders as compared to those who were waiting for treatment.¹² The study also revealed that institutional misconducts were reduced even for those inmates who did not successfully complete all parts of the programme (i.e., they had started but not completed). Due to the success of this programme, a decision was made to extend it to a wider group of prisoners (including those who had not volunteered to attend). The results of this evaluation were not so favourable. There was no significant impact on misconducts among those who participated in the programme and those who did not.¹³ In a follow up study, where levels of misconduct were compared between 213 treatment participants (who had not volunteered to take part) with a control group of 91 prisoners, a similar finding emerged.¹⁴ There was no difference between the treatment participants and the control group. As such, it appears that treatment is most effective when participants volunteer to take part.

In another study, the impact of treatment on prisoners who had committed serious acts of violence while incarcerated was examined.¹⁵ The 'Aggressive Behavioural Control' (ABC) programme was designed for impulsively and/ or chronically aggressive offenders with an extensive history of violent crime and/ or significant institutional management problems. It targeted high risk and personality disordered prisoners in maximum security conditions. It used cognitive behavioural techniques to help prisoners identify and modify the thoughts feelings and behaviours that were influencing and maintaining their violence. It aimed to enable their progression to a lower security prison post-treatment. Thirty one prisoners were included in the sample. Eighty percent were progressed successfully

11. French, S.A., & Gendreau, P., (2006) Reducing prison misconducts: What works! *Criminal Justice and Behaviour*, 33, 185-218.

12. Baro, A.L., (1999) Effects of a cognitive restructuring program on inmate institutional behaviour. *Criminal Justice and Behaviour*, 26,4,466-484.

13. Lambert, E.G., Hogan, N.L., Barton, S.M., & Stevenson, M. T., (2007) An evaluation of CHANGE, a pilot prison cognitive treatment program. *Journal of Articles in Support of the Null Hypothesis*, 5 (1), 1-17.

14. Hogan, N.L., Lambert, E.G., and Barton-Bellessa, S.M., (2012) Evaluation of CHANGE, an involuntary cognitive program for high-risk inmates. *Journal of Offender Rehabilitation*, 51, 6, 370-288.

15. Wong, S.C.P., Van der Veen, S., Leis, T., Denkhuis, H., Gu, D., Liber, E. & Middleton, H. (2005) Reintegrating seriously violent and personality disordered offenders from a super-maximum security institution into the general offender population. *International Journal of Offender Therapy and Comparative Criminology*. 49 (4), 362-375.

into a low security facility without returning to maximum security conditions within 20 months. The treatment participants' rate of institutional offending was also lowered after treatment.

The impact of the ABC treatment programme with gang members has also been examined.¹⁶ Treated gang and non-gang groups were compared to matched untreated gang and non-gang comparison groups in relation to the impact of treatment on recidivism and institutional misconduct. Overall, criminal recidivism was significantly reduced in the treated groups compared to the untreated comparison groups. The treated groups also had lower rates of major (but not minor) institutional infractions than the comparison groups. There was significantly less violent misconduct such as fights and assaults. Researchers concluded that cognitive-behavioural treatment, designed according to the risk, need and responsivity principles, can reduce the likelihood and seriousness of criminal recidivism in the community and lower the rate of major institutional misconduct while incarcerated.

Researchers have also examined the impact of a faith-based programme on prison misconducts.¹⁷ As noted earlier, prison misconduct covers a whole range of behaviours from the very serious, such as murder or an escape, to the less serious, such as falling to follow a work order or smoking in an unauthorised area. The researchers were interested in the impact of treatment on both types of misconduct. The programme encouraged desistance from crime by encouraging offenders to develop pro social thinking, recognise offence related thinking errors, and accept responsibility for the harm they had caused. The researchers used different matching methods to create comparison groups. They found that participants who had received the faith based programme were just as

likely as comparison subjects to be involved in misconduct generally. However, when misconduct was divided into serious and less serious categories, results indicated that programme participation did lower the probability of engaging in serious forms of misconduct.

Prisoners with substance misuse needs have been found to be significantly more likely than other prisoners to commit institutional misconduct.¹⁸ A number of researchers have looked at the impact of substance misuse programmes on rates of prison misconduct. One American study compared a sample

of 462 prisoners before and after their attendance on the 'Drug and Alcohol treatment programme (DAP). This programme provided 500 hours of treatment over 9 months. It used a cognitive behavioural approach which addressed criminal lifestyle issues and included a relapse prevention Component It was delivered across 4 federal penitentiaries.¹⁹ Records from one year before treatment and one year after treatment were examined and compared to a comparison group which did not receive the programme. A decline of 45 per cent in overall misconduct rates for the treatment group, and a 23 per cent reduction rate for the non treatment group was reported. Similar levels of impact on prison misconduct following the DAP were also found in a

subsequent study where 600 federal prisoner programme completers, were matched against a comparison group of 451 prisoners who did not complete the programme.²⁰

Another interesting study used a peer led approach to reduce levels of prison violence.²¹ The 'Alternatives to Violence Project' was run for prisoners by prisoners in a medium secure correctional facility in Maryland, USA. The programme taught conflict resolution skills to participants via three day long

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16. DiPlacido, C., Simon, T.L., Witte, T.D., Gu, D., & Wong, S.C.P., (2006) Law and Human Behavior, 30 (1) 93-114.

17. Camp, S.D., Daggett, D.M., Kwon, O., & Klein-Saffran, J., (2008) The effect of faith program participation on prison misconduct: The Life Connections Program. *Journal of Criminal Justice*, 36, 389-395.

18. Chamberlain, A.W., (2012) Offender Rehabilitation: Examining changes in inmate treatment characteristics, program participation, and institutional behaviour. *Justice Quarterly*, 29, 2, 183- 228.

19. Innes, C.A., (1997) Patterns of misconduct in the federal prison system. *Criminal Justice Review*, 22, 157- 174.

20. Langan, N.P., & Pelissier, B.M.M., (2002) *The effect of drug treatment on inmate misconduct in federal prisons*. Washington, DC: Federal Bureau of Prisons.

21. Walrath, C., (2001) Evaluation of an inmate run alternatives to violence project: the impact of inmate to inmate intervention. *Journal of Interpersonal Violence*, Vol.16, No 7, 697-711.

sessions. Each of the days involved a series of structured exercises including role plays. Prisoner facilitators had successfully completed all of the five training stages (basic training, advance training, training for trainers, facilitation and management council membership). All participants volunteered to take part. Participants were compared to a comparison group on a range of self report (including psychometrics) and behavioural change measures. There was a positive impact on anger and rates of confrontation (including violent confrontations) for those who completed the programme in comparison to those who did not.

In conclusion, despite limitations, it seems that treatment programmes, like offending behaviour Programmes, can lead to reductions in the level and/or severity of prison misconducts. The results generally suggest that cognitive behavioural interventions are more effective, especially at reducing serious incidents of misconduct such as violence, than other types of treatment approaches. Further, it is possible that programmes are more effective when participants volunteer to take part. The positive results from the peer led intervention are also of interest.

Determining the impact of programmes on prison behaviour: meta analysis

The most significant contribution to the literature is a meta-analysis.²² In one example of this approach focusing on prison behaviour, the researchers were interested in a number of important areas. Firstly, they wanted to explore the impact of a range of programmes on prison misconducts. More specifically, they wanted to determine the impact of programmes based on the principles of effective offending behaviour treatment. That is, they were interested in finding out what the impact of behavioural treatment which targeted the criminogenic needs of high risk offenders was on prison misconducts. In order to determine this, the researchers categorised programmes into four areas; behavioural (i.e. radical behavioural, social learning, cognitive behavioural, or punishment), non behavioural (e.g., nondirective therapy, psychodynamic, group milieu), educational/vocational, and others, or a

non specified grouping. Second, they were interested in the therapeutic integrity of programmes; i.e., how well the programme is delivered and maintained. The researchers used the Correctional Program Assessment Inventory (CPAI 2000)²³ to assess programme factors. This assessment is similar in intent to the NOMS Intervention Integrity Framework. It seeks to identify how well the programme is being delivered and determine if it is being delivered in line with the evidence. Their final aim was to determine if there was a link between programmes which reduce prison misconducts and recidivism.

The researchers only selected suitable studies, or those who met certain standards of robustness, to be part of the research. For example, studies were only included if they used a randomised or comparison group control design, and contained sufficient numbers to enable statistical analysis. They found 68 studies generating 104 effect sizes between various types of programmes and prison misconducts. There were 21,467 prisoners included in this research. Eighty two percent of the effect sizes came from studies undertaken in American prisons. Seventy three percent of effect sizes came from male samples and 8 per cent came from female samples. The remainder came from studies with mixed samples, or studies where gender was not specified. Forty percent of the samples were adult, 49% per cent were juveniles.

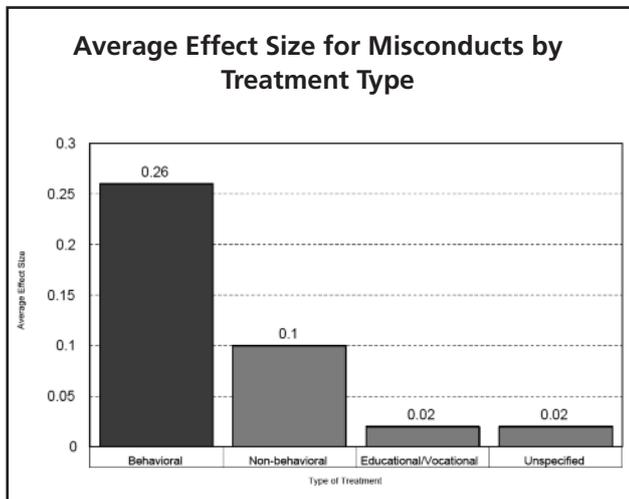
Findings indicated that behavioural treatment programmes produced the greatest reductions in prison misconduct. These treatment programmes were significantly more effective than educational, vocational and/or other programmes. Behavioural treatment programmes have several important characteristics. Firstly, they focus on the present (as opposed to focusing on the past which is the main focus of other treatment approaches like counselling). They target and change current risk factors that influence behaviour. They are also action orientated, rather than talk orientated. That is, they encourage prisoners to do something different, not simply talk about doing something different. They teach new prosocial skills to replace antisocial ones. Finally, they include techniques

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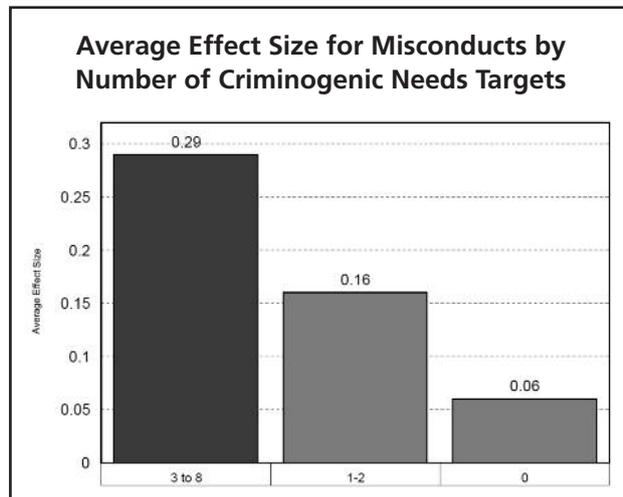
22. French, S.A., & Gendreau, P., (2006) Reducing prison misconducts: What works! *Criminal Justice and Behaviour*, 33, 185-218.

23. Gendreau, P., & Andrews, D.A., (2001) *Correctional Program Assessment Inventory – 2000 (CPAI 2000)*. Saint John, Canada: University of New Brunswick.

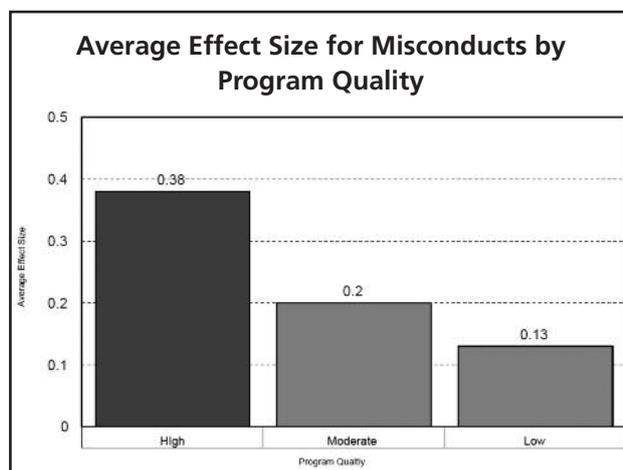
to model and reinforce appropriate behaviour. On average, when a prison offered behavioural programmes, the reduction in misconducts was 26 per cent, compared to 10 per cent from non behavioural programming and even less for educational, vocational or unspecified programmes. This is demonstrated in the table below.²⁴



The results also found that reductions in misconduct were greater in programmes which targeted multiple criminogenic needs. All prisoners have needs, but only some of these are known to have a relationship with reoffending, e.g. for example substance misuse, antisocial thinking, and problematic relationships. Research has found that certain criminogenic needs are predictive of institutional misconduct. These include antisocial thinking,²⁵ substance misuse, low levels of education, and unemployment.²⁶ Programmes which target non-criminogenic needs, or very few criminogenic needs, are unlikely to have an impact on prison violence. Reductions in misconduct for those studies that targeted three to eight criminogenic needs were greater 66 per cent of the time when compared to those that targeted only one to two criminogenic needs, and they had greater effects 79 per cent of the time versus those programmes that targeted no criminogenic needs. This is shown in the following table.²⁷



Analysis of the relationship between therapeutic integrity and misconducts was also conducted. That is, the relationship between quality of delivery (as assessed by the CPAI- 2000) and prison misconducts. The 36 items on the CPAI 2000 assessment were categorised. Treatment strategies receiving a score between 0–4 on the therapeutic score variable were designated as having a ‘low’ level of integrity. A score between 5–9 was classified as ‘medium’ integrity and ‘high’ integrity programmes were characterised by having a score of 10+. Programmes which were rated as high quality produced the strongest effects. The mean effect on misconduct for treatment programmes of high therapeutic integrity ($r=.38$) was higher than the mean effect for treatment programmes with medium therapeutic integrity ($r=.20$) and low ($r = .12$) levels. This is shown in the table below.²⁸



24. Reproduced from Latessa, E.J., (2011) What Works and What Doesn't in Reducing Recidivism: The Principles of Effective Intervention. Accessed from http://www.txcorrections.org/PDF/Dr_Latessa_What_works_and_What_Doesn%27t_in_Reducing_Recidivism.pdf on 27.5.15

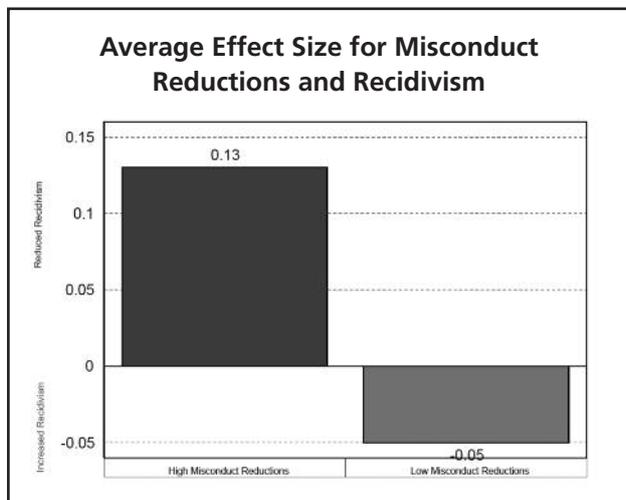
25. Baro, A.L., (1999) Effects of a cognitive restructuring program on inmate institutional behaviour. *Criminal Justice and Behaviour*, 26,4,466-484.

26. Chamberlain, A.W., (2012) Offender Rehabilitation: Examining changes in inmate treatment characteristics, program participation, and institutional behaviour. *Justice Quarterly*, 29, 2, 183- 228.

27. Reproduced from Latessa, E.J., (2011) What Works and What Doesn't in Reducing Recidivism: The Principles of Effective Intervention. Accessed from http://www.txcorrections.org/PDF/Dr_Latessa_What_works_and_What_Doesn%27t_in_Reducing_Recidivism.pdf on 27.5.15.

28. Reproduced from Latessa, E.J., (2011) What Works and What Doesn't in Reducing Recidivism: The Principles of Effective Intervention. Accessed from http://www.txcorrections.org/PDF/Dr_Latessa_What_works_and_What_Doesn%27t_in_Reducing_Recidivism.pdf on 27.5.15.

The researchers found that the programmes that had the greatest effect on prison misconducts were also associated with larger reductions in recidivism. Of the 12 high misconduct—reduction effect sizes, 92 per cent were attributed to programmes that were behavioural in nature. Fifty per cent were derived from programmes that targeted three or more criminogenic needs, and 92 per cent had therapeutic integrity scores in the medium to high categories. In the low misconduct-reduction effect sizes, 36 per cent came from programmes designated as behavioural, 10 per cent from programmes that targeted three or more criminogenic needs and 36 per cent from programmes considered to be medium to high in therapeutic integrity. This finding reinforces the view that prison misconduct behaviour is a reasonable proxy for recidivism. This is shown in the table below.²⁹



In conclusion, this meta analysis tells us that behavioural treatment programmes are more likely than other types of programmes to have a positive impact on prison misconducts. Moreover, programmes which were designed and delivered in line with the principles of effective rehabilitation (RNR) were the most successful. These programmes were behavioural in nature, focused on multiple criminogenic needs, and had high levels of therapeutic integrity. Further, these programmes were not only the most successful in reducing misconduct whilst the offender was still in prison, they were also the most likely to reduce recidivism once the offender had left prison.

However, we must apply some caution when interpreting these results. It is important that we pay attention to the various reported limitations, including the fact that missing information may have affected the results. Further, the findings are not classified by type of misconduct and so caution must be applied when considering the specific relevance to violent incidents. That is, we cannot tell from this study whether violence was reduced or whether the effect was on other sorts of rule-breaking. Nevertheless, it is encouraging to note that programmes which have been devised and delivered in line with the RNR principles, can have a significant impact on changing prison behaviour as well as offending after release.

Recommendations

The research from both individual studies and the meta analysis suggest that treatment programmes can be effective in reducing levels of prison misconduct. Although the research in this area is not conclusive, it does show that a number of the same factors are important in reducing both recidivism and misconduct.^{30,31}

NOMS has a range of accredited programmes which are designed in line with the RNR principles. These programmes were designed to reduce reoffending, but they share the properties identified as being important in reducing prison misconducts. That is, they are mainly cognitive behavioural in approach, target a range of criminogenic needs, and are monitored and quality assured by an independent assessors to ensure that programme integrity is not compromised. Accredited programmes are, therefore, likely to have a positive impact on prison misbehaviour and, as such, it is recommended that they be used as part of a strategy to reduce violence in prisons.

The literature also highlights the relationship of misconduct to recidivism and, as such, it is likely that information about misconducts might be important in the risk assessment process. Some researchers have recommended that information about prison experiences is included to improve risk prediction.³² Prison misconducts may indicate changes in the likelihood of offending that are not captured adequately by static risk measures. Further, they may pick up on desistance factors such as willingness (or

29. Reproduced from Latessa, E.J., (2011) What Works and What Doesn't in Reducing Recidivism: The Principles of Effective Intervention. Accessed from http://www.txcorrections.org/PDF/Dr._Latessa_What_works_and_What_Doesn%27t_in_Reducing_Recidivism.pdf on 27.5.15.

30. Cochran, J.C., Mears, D.P., Bales, W.D., & Stewart, E.A., (2012) Does inmate behaviour affect post release offending? Investigating the misconduct-recidivism relationship among youth and adults. *Justice Quarterly*, 1-30.

31. Trulson, C.R., DeLisi, M & Marquart, J.W., (2011) Institutional misconduct, delinquent background and rearrest frequency among serious and violent delinquent offenders. *Crime and Delinquency*, 57 (5), 709-731.

32. Mears, D.P., & Mestre, J., (2012) Prisoner reentry, employment, signalling, and the better identification of desisters: Introduction to the special issue. *Criminology and Public Policy*, 11, 5-15.

lack of willingness) to change.³³ Further research is needed to determine the relationship between prison misconduct and reoffending within the prison population in England and Wales.

A recent study has found that offenders with high levels of criminogenic needs are more likely to engage in institutional misconduct than those who do not.³⁴ This research indicates that those with high levels of needs might disproportionately account for the majority of misconduct in prisons. As such, it would be useful to replicate this study to determine the relevance of these findings to our population. If we were able to identify those who at greatest risk of prison violence based on their criminogenic need profile, prison managers would be able to target resources at those who need it most. Treatment providers could also use this information to ensure that treatment programmes were targeted appropriately.

NOMS may need to revisit eligibility criteria for treatment programmes so that all programmes are accessible to those who engage in prison violence. Some accredited programmes (notably the accredited programmes that aim to reduce violent reoffending) are already available to men and women who have engaged in institutional violence, but others may need to consider how they can respond to the needs of this group. Given the reported relationship between prisoners with substance abuse needs and prison misconduct, it seems particularly pertinent for treatment approaches which address this criminogenic need to take institutional behaviours into account in the selection process.

Finally, evaluation of programmes has historically focused on reducing recidivism, but it takes a long time to complete this type of evaluation. Follow up times need to be lengthy; at least one or two years after release from prison, and it can be hard to compare programme participants with others who have not completed treatment. Given the likely relationship between levels of prison misconduct and recidivism, it is recommended that evaluation of programmes should focus on the impact on prison behaviours as well as recidivism.

Conclusion

This paper has shown that treatment programmes are a useful investment for managers in the effort to reduce prison violence. Indeed, it appears that they can reduce prison misconducts by 26 per cent. This is a significant reduction which could result in a more stable prison environment and enable considerable physical and emotional savings. Although, it is difficult to quantify the potential cost savings to NOMS, one study³⁵ reported that a six figure cost saving can result from even a modest reduction in misconducts for some prisons. The greatest impact can be made by programmes which are behavioural in nature, target multiple criminogenic needs, and are delivered well. Accredited programmes meet these criteria and are, therefore, recommended as part of the strategy to reduce violence in prisons and improve the likelihood of prisoners leading a crime free life.

33. Maruna, S., (2012) Elements of successful desistance signalling. *Criminology and Public Policy*, 11, 73-86.

34. Chamberlain, A.W., (2012) Offender Rehabilitation: Examining changes in inmate treatment characteristics, program participation, and institutional behaviour. *Justice Quarterly*, 29, 2, 183- 228.

35. Lovell, D., & Jemelka, R., (1996) When inmates misbehave: The costs of discipline. *Prison Journal*, 76, 165-188.