Working with female offenders:
A process of desistance

by

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Abstract

This thesis considers the experiences of female offenders in their efforts to desist from offending. It also explores the potential impact of an intervention programme in the process of desistance.

The first chapter introduces the idea of desistance and outlines the aims of the thesis. The second chapter comprises a systematic literature review of the risk factors associated with female offending. The evidence identified suggests that risk factors such as mental health needs, parental stress, substance misuse and adverse experiences are associated with female offending.

The third chapter explores the process of desistance in a sample of adult female offenders in the community and consists of two parts. The first part is an examination of the potential impact of a drama based programme in promoting desistance from crime. Quantitative analysis of a pre and post assessment measure, Intermediate Outcomes Measurement Instrument (IOMI), found that significant improvements were noted in areas of hope, interpersonal trust, agency/self-efficacy, well-being, motivation to change and impulsivity. The second part of the research focussed on interviews with female offenders which aimed to explore factors associated with desistance from crime. The following themes were identified as being associated with the process of desistance: Skills and Attributes; The Usefulness of Programmes; Support; Purpose Driven Life; Risk Factors and Consequences. The findings lent support to the desistance theories of cognitive transformation; self-control; self-identity; social control and social capital.

Chapter four provides a critique of the IOMI. Findings suggest that the IOMI has moderate reliability but is weak in validity. The IOMI is still in its draft stages and its

psychometric properties are currently being developed through a series of pilot projects across the country.

In the final chapter the findings of each chapter are discussed with reference to the need for further research and the implications for current practice.

<u>*Dedication*</u>

I would like to dedicate this thesis to my grandmother who sadly passed away before she could see me become the psychologist she wanted me to be. This is for you Chaiji.

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CHAPTER 1

Introduction to Thesis

1.1 Introduction

It is universally accepted that men engage in offending behaviour more than women (Blanchette & Brown, 2006). This trend is evident across England and Wales with approximately 82,000 male offenders in prison in comparison to approximately 4,000 female offenders (Ministry of Justice [MoJ], 2016). However, in comparison with male offenders, female offenders are substantially under-represented as they are less likely to be prosecuted for the same offences as compared to male offenders. For instance, between 2005 and 2015, the number of female offenders subject to prosecution increased by 6%, while the number of males prosecuted fell by a third. Nevertheless, in 2015, female offenders were still under-represented among those prosecuted as only 27% of those prosecuted were females (MOJ, 2016). Female offenders are most likely to engage in theft, criminal damage, being drunk and disorderly, drug related offences and offences against society such as fraud, forgery and prostitution related offences (MoJ, 2016).

Prior to providing an overview of the literature, consideration must be given to certain terminology. Firstly, the terminology in the literature varies as the term 'offender' is used interchangeably with 'ex-offender', 'inmate' and 'prisoner'. For the purpose of this thesis, the term 'offender' will be used as is 'female offender' when making references to the crimes committed by women. In addition to this, the term 'participant' is used in Chapter 3 when references are made to the findings of the research. Similarly, it was noted that the terms 'criminogenic needs' are used interchangeably with 'risk factors'. Criminogenic needs are problems or issues that directly relate to the likelihood an offender may re-offend. Risk factors in forensic psychology refer to a trait or a characteristic of an individual that increases the likelihood of engaging in offending behaviour. The two terms share similar attributes. When undertaking this thesis, careful consideration was given to the similarities between the two terms and their relevance when working with offenders. For example, the term

'criminogenic needs' is only used for offenders whereas the term 'risk factors' is used for those who have not been seen by forensic services.

Gender is considered to be a significant predictor of involvement in offending behaviour, yet historically research has focused on male offenders and, whilst there are some commonalities in risk factors for offending across genders, some gender differences in risk factors for offending may exist. For instance, a higher proportion of female offenders (as compared to their male counterparts) have undergone emotional, physical or sexual abuse as a child (53% in comparison to 27% of men); have a history of domestic violence (46%); have one or more dependent children (13%-19%) with most of them having children under the age of 18 years (54%) (Prison Reform Trust, 2016). In order to support female offenders to desist from offending and live by the law-abiding rules of society, it is important to gain a holistic understanding of female offending with a focus on risk factors for female offending, the process of desistance from crime and, subsequently, whether there is a need for gender specific interventions. A brief overview of each of these will be discussed in the next sections.

1.1.1 Risk factors for female offending

A number of characteristics of female offending have been identified in the research literature. These will be discussed in detail in chapter 2. For the purposes of this chapter, a brief summary will be provided below.

There is a consensus that the characteristics of female offending are rooted at different levels, known as the four levels of analyses of the ecological framework (Bronfenbrenner, 1977). The levels include: ontogenic (development, history, attitudes and thinking); microsystem (immediate context/environment or family where offending occurs); exosystem (immediate social aspects e.g., lack of/failure to access employment) and macrosystem

(influences and beliefs within the culture). Moffit (1993) identified that neuro-psychological factors (such as behavioural problems and cognitive abilities) and environmental factors (such as poor parental practices and poor socio-economic environments) can lead to difficulties with impulsivity and problem-solving abilities. This can cause deficits in language, resulting in difficulties in school and employment. Other characteristics associated with female offending include emotional and psychological trauma, previous victimisation, history of conduct disorder, substance misuse, previous history of offending, history of violent partners, economic needs, need for excitement and association with peers who encourage the use of drugs and antisocial acts (Chesney-Lind & Pasko, 2004; Daly, 1994; Simpson, Yahner, & Dugan, 2008).

The evidence above supports the four levels of analyses of the ecological framework. The work undertaken by Chesney-Lind and Pasko (2004) and Daly (1994), for example, demonstrates that ontogenic factors such as family life, conflicts arising from interactions with others (microsystem), influential social structures (exosystem) and values and beliefs (macrosystem) can help explain the risk factors for female offending.

1.1.2 Desistance

Few studies have offered an operational definition of desistance but there is currently no consensus amongst researchers on reaching a common definition. For example, Meisenhelder (1977) defined desistance as "successful disengagement from a previously developed and subjectively recognized, pattern of criminal behavior" (p.319). Uggen and Kruttschnitt's (1998) definition of desistance implies a shift from a state of offending to a state of non-offending and its maintenance. According to Maruna (2001), the definition of desistance needs to emphasise maintenance rather than termination. Maruna (2001) suggested that desistance should be seen as a process, as this may provide a more accurate picture of the

concept. Desistance from crime is acknowledged to be a challenging process, as the stigma of having a criminal record can reduce the opportunities for becoming a pro-social member of society and discontinuing a life of crime (Laub & Sampson, 2001) As a result, desistance from crime may involve some stops otherwise known as "relapses" (Farrall & Calverley, 2006).

As discussed in more detail in chapter 3, there are a number of theories which attempt to explain desistance. For the purpose of this chapter, a brief summary of these theories is provided below.

Hirschi's (1969) social control theory states that offenders who have strong social bonds are more likely to desist from offending behaviour. The theory argues that if an offender has a strong attachment they wish to preserve, they are less likely to go against the social norms to put the attachment at risk. Additionally, if an offender has invested time and energy in areas such as their career, they are less willing to risk their place by acting defiantly. In terms of involvement, Hirschi (1969) pointed out that if an offender's behaviour in employment, for example, is considered socially acceptable and they are heavily involved in legitimate activities, they are less likely to find opportunities or the time to engage in offending behaviour. Lastly, the theory states that if an offender has access to legitimate opportunities, they see no reason to deviate from the norms of the specified institution such as marriage, employment and school.

The age-graded theory of informal social control (Hirschi, 1969; Sampson & Laub, 1993) emphasises the importance of high-quality bonds at different stages of an offender's lifespan. It looks at the role of attachment and social bonds with family, friends and within the work setting in leading an individual to continue or desist from offending.

Moffitt's (1993) dual taxonomy of offending distinguishes between two types of offenders: 'life persisters' and 'adolescent limiteds'. Moffitt (1993) proposed that life

persister offenders are more likely to have neurological problems (such as cognitive or learning difficulties) and their subsequent psychological issues may result in difficulties with relationships and social skills which in turn lead them to engage in antisocial behaviour. He argued that as adolescent limiteds do not suffer from such neurological deficits, they are better able to change their behaviour and refrain from offending.

The social capital theory (Hughes, 1998) emphasises that certain 'turning points' such as age, concern for children, fear of physical harm or imprisonment and stable employment can mark an end to an individual's offending.

Gottfredson and Hirschi's (1990) self-control theory states that individuals who offend are impulsive risk-takers with low levels of self-control. They argued that offending can cease over time as an individual who socialises with pro-social peers can be influenced to engage in pro-social activities that can reduce an individual's levels of impulsivity.

Self-identity theory (Maruna, 2001) describes desistance as a process in which offenders see themselves as 'good' persons who have acted in 'bad' ways. The 'bad' identity employed by offenders is a way to understand their lives again and as a basis of making a contribution to society.

Lastly, the theory of cognitive transformation (Giordano, Cernkovich, & Rudolp, 2002) argues that the process of desistance involves stages which include 1) a general cognitive openness to change, 2) exposure and reaction to hooks for change or turning points, 3) the envision of a replacement self and 4) a transformation in the way the individual views offending behaviour. The process is considered to be complete when offending is no longer seen as desirable or relevant.

1.1.3 *What works* with female offenders

Researchers and clinicians have begun to recognise that female offenders needs differ from their male counterparts. While some associated factors may be similar for both male and

female offenders (such as unemployment and substance misuse), other factors are more pertinent to female offenders, such as previous victimisation (Hollin & Palmer, 2006). It has therefore been proposed that treatment programmes should ensure that the needs of female offenders are addressed in a safe and a non-threatening environment (Wright & Kemshall, 1994, as cited in Worral & Gelsthorpe, 2009). It has also been recommended that treatment programmes should be delivered in a setting compatible with female offenders' interactional style such as their need for and responsivity to social relationships. Active and interdependent roles for women and addressing their unique treatment issues such as trauma, parenting skills, coping mechanisms and self-esteem have also been recommended (Beckman, 1994). There is evidence that antisocial attitudes, anger, anti-social peers, drug dependency, and lack of transition planning are considered as risk factors for offending and that clinicians should address these risk factors in treatment (Lart, Pantazis, Pemberton, Turner, & Almeida, 2008). Prisons in the UK have taken these issues into consideration and responded by offering a range of programmes to female offenders in prison. Programmes currently offered include: Focus on Resettlement (designed to increase motivation and commitment in gaining qualifications, addressing substance misuse and accommodation for instance); Choices, Actions, Relationships and Emotions (CARE; narrative therapy, mindfulness training and cognitive behaviour therapy); The Rehabilitation for Addicted Prisoners Trust (treatment for drug and alcohol misuse) and Prison Addressing Substance Related Offending (drug treatment programme addressing the situations contributing to the development of substance misuse and offending; MoJ, 2012).

Despite the availability of such gender specific programmes, there is scarcity of research on the effectiveness of these programmes in the UK. Most of the research has been conducted in the US, Canada and Australia. Nonetheless, evidence from other countries indicates that a cognitive-behavioural intervention focusing on skills development by

emphasising existing strengths and competencies and skills acquisition can promote desistance from crime (Stewart, 2015).

It has been suggested that community-based treatment programmes should be "offering learning experiences after trusting relationships have been established and support women to understand that they can be professionally and emotionally successful in life and still have strong relationships" (Belknap, Holsinger, & Dunn, 1997, p.24). Taking this approach, psycho-educational group interventions on self-esteem, relationships, trauma prevention, parenting skills and substance misuse have been adopted for female offenders in the community. For instance, a UK based study by Durrance and Ablitt (2000) found that female offenders who attended a probation centre and undertook programmes on decision-making skills, personal development, managing relationships, health, employment and education were more likely to apply the coping skills to improve these issues in comparison to female offenders who did not participate in the programmes thus did not learn the coping skills needed to manage their problems. Similarly, Sarno et al. (2000) compared the re-conviction rates of female offenders who participated in vocational courses and employment and found that these programmes had a positive effect as only 11% of female offenders offended within a year.

It would therefore appear that certain criminological needs are more prevalent among female offenders; as such, female offenders may benefit from having gender specific interventions to address their needs. Furthermore, creating a safe environment in a treatment programme appears to be a priority in order for women to feel comfortable to share and engage in treatment. A safe environment makes women feel less threatened thus reducing their stress levels and thereby creating opportunities to form trusting therapeutic relationships with others. Additionally, the research evidence suggests that opportunities should be created for social interaction, to build self-esteem and that personal strengths should be

acknowledged where possible. These suggestions highlight the importance of using the following models in treatment: Risk Need and Responsivity (RNR; Andrews, Bonta, & Hoge, 1990) and Good Lives Model (GLM; Ward, 2002).

The RNR has three core principles: risk, need and responsivity. The risk principle states that offending can be reduced through risk assessment instruments that can then help guide the appropriate level of treatment needed. The need principle focuses on criminogenic needs that are dynamic risk factors directly linked to criminal behaviour. These criminogenic needs are assessed and intervention is targeted on a particular need. For example, as antisocial behaviour can be an indicator of impulsive and aggressive acts, it can be addressed by building on self-management and anger management programmes. The responsivity principle uses cognitive and social learning methods to influence pro social behaviour and this approach has been found to be effective with different types of offenders (i.e., female offender, sex offender etc.) It operates on the relationship principle (establishing a warm, respectful and collaborative working alliance) and the structuring principle (influence the direction of change through appropriate modelling, reinforcement, problem-solving, etc.). It also takes into account strengths, learning style, personality, motivation and characteristics of the individual.

The GLM is a strengths-based rehabilitation theory that augments the RNR principles. GLM's central assumption is that offending results from problems in the way an offender seeks to attain 'primary goods' that are important for all humans (such as happiness, relationships or mastery at work). Offenders are encouraged to identify the 'primary goods' that are important to them and those that are implicated in the offence process. This forms a fundamental component of assessment because treatment aims to assist offenders to attain these 'primary goods' in meaningful, rewarding and legitimate ways. As criminogenic needs are considered as obstacles for pro-social attainment of 'primary goods', they are directly

targeted in treatment as an important step towards assisting offenders to attain 'primary goods' in their lives. In this way, an offender becomes invested in the treatment process as the treatment explicitly aims to assist them live a fulfilling life by reducing and managing risk.

The literature above indicates that both RNR and GLM can effectively guide interventions by assisting offenders to develop and implement meaningful life plans that are incompatible with future offending.

1.2 Conclusions from research

The statistics and literature outlined above indicates that the prosecution of female offenders has increased over the last few decades (MoJ, 2016) and that it is an important issue that needs to be addressed. A number of theories have been developed exploring the pathways to offending and the risk factors pertinent to female offenders. What is less well understood is the process of desistance from crime for females as this is a relatively new area of study in the field of forensic psychology. Research has begun to emerge but more is needed in order to fully address the needs of female offenders. Lastly, although gender specific treatment is available for female offenders, there is a paucity of research available on the efficacy of treatment interventions offered to female offenders in enabling desistance.

1.3 Aims of thesis

In light of the limited research available to date, this thesis aims to add to the knowledge base regarding the process of desistance among female offenders in the UK. The current thesis will add to previous research by providing an in-depth exploration of female offenders' own experiences of *what works* in their efforts to desist from offending. The thesis will also explore female offender's views on what services can offer and how treatment programmes

can support the process of desistance. To achieve this, the following aims have been identified:

- To review the current evidence for the risk factors for offending and how these can be applied to female offenders

- To investigate the potential impact of a treatment programme with a sample of adult female offenders in the community and explore how such an intervention may promote desistance from crime.

- To explore the views and experiences of a group of female offenders regarding factors relating to committing offences and factors related to desistance from crime.

- To provide suggestions for current practice in working in the field of rehabilitation (i.e., services and interventions) of female offenders.

1.4 Current thesis (summaries of chapters)

To achieve these aims, chapter two comprises a literature review of the internal and external risk factors associated with female offending. Qualitative research conducted with a sample of adult female offenders from a large city in the UK, is reported in chapter three. The research explored the experiences of female offenders and factors associated with desistance from crime. In addition to this, the potential impact of an intervention programme delivered to adult female offenders was also investigated through the use of a psychometric measure completed pre and post programme completion. The overall aims of the current research are to develop a greater understanding of the process of desistance from female offenders' own perspective and also to identify the role services and treatment programmes can play in the process by exploring *what works* and how services may be improved.

In order to investigate the impact of an intervention (Geese Theatre group), reported in chapter three, the Intermediate Outcomes Measurement Instrument (IOMI; Maguire et al., 2014) was used. A critique of the IOMI is provided in chapter four. The aim of this chapter

was to analyse the reliability, validity and practical utility of this tool. Challenges regarding applying this measure with the current population are discussed along with using the tool to measure treatment effectiveness. The thesis concludes with a general review of findings and a discussion of the potential implications for services and professionals, as well as suggestions for future research.

CHAPTER 2

Risk factors for female offending: A systematic review of the

literature

2.1 Abstract

Aims:

To systematically review the literature on the risk factors associated with female offending. More specifically, to identify the key factors leading to offending in adult female offenders.

Method:

A search of electronic bibliographic databases was conducted using a systematic search strategy. Identified studies were subject to predefined inclusion/exclusion criteria and a quality assessment tool. Seven studies were found to be suitable and all studies were deemed good quality with quality assessment scores ranging from 69% to 94%. Of these, two were qualitative studies and five were quantitative.

Results:

All studies identified a range of risk factors associated with female offending including victimisation, addiction, mental disorders and emotion dysregulation, inadequate personal support, antisocial attitudes, parental stress and demographics such as low socio-economic status, lack of economic resources, lack of education, absence or difficulties with sustaining employment and familial involvement in offending behaviour.

Conclusions:

The evidence reviewed confirms that there are risk factors that are more prevalent in female offenders than male offenders. It was found that the two groups of offenders share some common risk factors and this needs further exploration. Furthermore, in comparison to male offending, research on female offending remains scarce. Further research is required into how

female offenders can best be supported and treated in order to address the risk factors associated with their offending.

2.2 Introduction

Offending behaviour by men has been well researched and the causes and characteristics of offending have been explored. This has allowed researchers to develop appropriate risk assessments and management strategies (Hare, 2003; Kropp, Hart, Webster, & Eaves, 1997). In contrast, research on female offending remains scarce. The number of female offenders engaging in offending behaviour has increased steadily over the past two decades, although arguably such increased rates are a reflection of an increase in reporting and recording of offences committed by female offenders (de Vogel, Robbé, Kalmthout, & Place, 2011, 2012; MoJ, 2016). Given this apparent increase, research to explore the causes and characteristics of female offending has become more pertinent.

When trying to understand the risk factors for female offending, risk assessments such as The Offender Assessment System (OASys) and Level of Service Inventory- revised (LSI-R) are important to consider. The OASys assesses the risk of harm an individual may pose to self and other. It helps identify the needs of an offender and informs the development of a plan to manage the risk of harm the offender may present. An evaluation of the pilot of OASys carried out between 1999 and 2001 (Howard, Clark, & Garnham, 2006) found that, in comparison to male offenders, female offenders had higher levels of needs in the areas of relationships and emotional well-being. The evaluation also found that in comparison with male offenders, female offenders had higher levels of need in the area of drug use and mental health. The research also found that when compared with male offenders, female offenders reported greater difficulties coping with psychological difficulties and relationships. More recently, relationships and emotional wellbeing were also highlighted as more pertinent key needs for female offenders when compared with male offenders (Palmer, Jinks, & Hatcher, 2010). It would therefore appear that there may be certain risk factors that are more relevant for female offenders.

LSI-R is used to assess criminogenic factors in probation and prison settings. Research by Holsinger, Lowenkamp and Latessa (2003) found that female offenders in the sample scored higher in the areas of financial and emotional/personal risk and need. In a further study, Manchak, Skeem, Douglas and Siranosian (2009) also found similar results that financial difficulties and emotional/personal risk and need were significant criminogenic needs for female offenders.

However, as yet, the relevant research literature has not been systematically reviewed. There are also growing concerns about whether the theoretical knowledge we have on male offenders and their risk assessment and management is valid and applicable to female offenders. The available research suggests that while male and female offenders share some characteristics, there are also a number of characteristics that are unique to female offenders (Zaplin, 2008).

2.2.1 Causes and characteristics of female offending

The earliest account of causes of female offending was put forward by Lombroso (1895), who reported that when a woman engages in offending behaviour, she is viewed as a 'monster' and that female offenders lack 'feminine qualities' such as maternity and piety. Lombroso's (1895) work was criticised on methodological grounds as his theory lacked empirical support and he also ignored the role of social, economic and cultural influences (Boritch, 1997). Despite these flaws, Shelden and Chesney-Lind (1993) argued that Lombroso's (1895) work set a precedent for later work with female offenders and paved the way for exploring gender differences in offending behaviour. Pollak (1950, as cited in Barker, 2009) suggested that offences committed by a woman are less often detected given a woman's 'natural' capacity to lie or deceive and also due to the social construction that a woman is seen as a passive and a dependent individual requiring protection from a man. Similar to Lombroso (1895), Pollak's (1950) theory also lacked evidence and ignored the role

of social and cultural factors (Barak, Leighton, & Flavin, 2007; DeKeseredy, 2000). Despite the flaws in their theories, their work had a profound and on-going influence on societal perceptions of female offending. A number of contemporary theories have been put forward, mostly contradicting Lombroso (1895) and Pollak's (1950) narrow biological theories, such as Power-Control (Hagan, Gillis, & Simpson, 1987), Women's Liberation/Emancipation Theory (Adler & Adler, 1975), Strain Theory (Cohen, 1955) and Labelling Theory (Wellford, 1975). These more recent theories emphasise the social and cultural causes of female offending.

Moffit (1993) highlighted that neuro-psychological factors (such as behavioural problems and cognitive and socio-cultural abilities) and environmental factors (such as poor parental practices and poor socio-economic status) can lead to conduct problems that are linked to impulsivity and poor problem-solving abilities. This can cause deficits in language and reasoning abilities resulting in difficulties in school and employment. Chesney-Lind and Pasko (2004) supported Moffitt (1993) as they found that environmental factors i.e., early exposure to violence within the family and limited opportunity or failure to access education and employment was associated with offending in their sample of female offenders.

Daly (1992) identified five pathways of female offending: a) *street women* who engage in drug related offences, prostitution or theft after leaving an abusive environment and violence; b) *drug-connected women* who use and traffic drugs in collaboration with antisocial family members, peers and intimate partners; c) *harmed and harming women* who present with a hostile demeanour and are chronic criminals as a result of abuse and neglect followed by school and delinquency problems; d) *battered women* engage in criminal behaviour as a result of victimisation from violent partners; and e) *"other" women* who engage in fraud and theft for survival, or economic gain due to their low socio-economic status. Simpson et al. (2008) supported Daly (1992) and identified previous history of criminal offending, history

of violent partners, economic needs and need for excitement as additional factors for female offending. Chesney-Lind and Pasko (2004) also supported Daly's (1992) pathway theory. They reported that substance misuse resulting in dependency can lead to higher rates of mental illness which is associated with offending behaviour. Research has also identified specific risk factors for specific offences such as violence, homicide, domestic violence and female sexual offending (Gannon & Cortoni, 2010; Miller & Decker, 1994, 2006; Verona & Carbonell, 2000). It would therefore appear there are a number of characteristics of female offending, including both general offending and offence-specific.

The research evidence suggests that characteristics of female offending can be explained by considering different levels of offending, also known as the four levels of analyses of the ecological framework (Bronfenbrenner, 1977). The first level is the ontogenic level, reflecting the individual's development, history, attitudes and thinking (e.g., substance misuse and mental health difficulties), followed by the microsystem level which is the immediate context or environment or family where offending occurs (e.g., like minded peers, violence within family and violent partners). The next level is the exosystem level, which is the immediate social aspect surrounding the individual that may impact on them (e.g., lack of or failure to access employment or education and attitudes condoning offending by peers). The outermost layer is the macrosystem, which contains influences and beliefs of the culture the individual lives in, which impacts upon all the other levels (e.g., living in a deprived area where the community condones the use of offending, patriarchal society or a strict regime creating expectations of how women should behave and act). Chesney-Lind and Pasko (2004) and Daly (1994) provide empirical evidence that ontogenic factors such as family life, conflicts arising from interactions with others (microsystem), influential social structures (exosystem) and values and beliefs (macrosystem) impact on the risk factors for offending. Such research has contributed to the introduction of female specific risk assessment tools

(e.g., Female Additional Manual; FAM) and treatment interventions (e.g., Dialectical Behavioural Therapy; DBT) whereby these risk factors can be examined and appropriate treatment can be offered.

2.2.2 Problems with existing reviews on female offending

Scoping searches were conducted on the Cochrane's Database of Systematic Reviews (CDSR), Campbell Collaboration and Google Scholar in February 2014 to investigate whether there were any existing literature reviews or meta-analyses on risk factors for female offending. Previous reviews have provided aggregate findings of factors associated with female offending. These literature reviews have varied in population and focus. For instance, some have examined the effectiveness of interventions (e.g., Dowden & Andrews, 1999; Mitchell, MacKenzie, & Wilson, 2012; Perry et al., 2014) while others have examined the validity of assessment tools (e.g., de Vogel et al., 2012, 2014). Some reviews have looked at the characteristics of female offending but inclusion of different age groups in the sample (e.g., adolescents or a mixed sample of adults and adolescents) has raised queries whether there are different risk factors for different age groups of offenders. (e.g., Garrido & Morales, 2007; Javdani, Sadeh, & Verona, 2011). Furthermore, where research has looked at offending in adults, it has often included both men and women. This has made it difficult to separate gender-neutral risk factors from gender-specific risk factors.

There is however some recent research evidence available on adult female offenders. For instance Stöckl et al. (2013) investigated offence specific characteristics in adult female sex offenders. However, the results obtained are difficult to generalise **to violent or non-violent female offenders.** Similarly, the work of Gannon and Cortoni (2010) on adult female offenders focussed primarily on sex offenders. It is reported that female sex offenders are typically younger when the offence takes place and have younger victims than violent or non-violent offenders. Furthermore, victimisation as a child or as an adult and being subjected to

poor parenting style as a child are key risk factors for their offending (Gannon & Cortoni, 2010). The authors emphasise that female sex offenders should be studied separately from non-sex offenders. This view has been supported by other researchers (Gannon & Rose, 2008; Tsopelas, Spyridoula & Athanasios, 2011).

From the search conducted on risk factors for female offending, it appears that there does not appear to be a systematic review investigating the risk factors for adult non-sex female offenders (hereafter referred to as general adult female offenders). Additionally, to date there is no systematic review available that has identified risk factors for general adult female offenders that also considered application of psychological theories and risk assessments. This is an important area to investigate as it will add to the current growing literature on female offenders and will allow researchers to consider appropriate models or theories that can explain female offending. In addition, knowledge regarding factors underlying general adult female offending may be useful in the development of appropriate risk assessment tools, rehabilitative interventions and approaches to offender management.

2.2.3 The current review

The aim of this systematic literature review is to examine the risk factors associated with offending behaviour in general adult female offenders. For the purposes of this systematic review, general offending means all types of offences except sex offences against adults or children. This includes aggression and violence, drug offences, arson, prostitution, criminal damage, fraud, driving offences, use of weapons, child neglect, burglary or theft or shoplifting, miscellaneous offences such as harassment, not paying fines, drunk and disorderly and offences against public justice such as perverting the course of justice and making false statements. It is acknowledged that there may be different risk factors for violent and non-violent offending (Flannery, Penk, Irvin, & Gallagher, 1998; Valliant, Gristey, Potter, & Kosmyna, 1999); the current review aims to explore risk factors that may

apply to both violent and non-violent offenders, hereafter referred to as general offenders. This was considered because there is a lack of a systematic review that looks at both types of offending behaviour. The review will determine the types of risk factors present in general adult female offenders in secure services (prison and in-patient) and community settings. The review will also consider psychological theories or models that explain risk factors in general adult female offenders and will also explore the psychometric assessment tools that measure risk factors in general adult female offenders.

2.3 Method

2.3.1 Sources of Literature

Based on a preliminary search of literature in the area of female offending, inclusion and exclusion criteria were developed. The eligibility of studies was determined by searching through abstracts or full articles to identify whether they fulfilled the predefined inclusion/exclusion criteria. The Population, Intervention/Exposure, Comparator, Outcome and Study design (PICOS) framework is recommended as a means of scaffolding research (CRD, 2009). However, this method could not be fully applied as the current review did not consider the effectiveness of an intervention or experimental studies. Inclusion/exclusion criteria were informed by the research question, previous meta-analytic reviews derived from the initial scoping exercise and discussion with the author's academic supervisors. The studies which met the inclusion criteria were obtained through e-library at University of Birmingham and by directly contacting the authors.

Definitions and terms

The term 'adult' refers to an individual over the age of eighteen years, in accordance with the legal classification of adults in the UK. 'Offender' is defined as a person who has

committed an offence and the person may have been subject to involvement with the Criminal Justice System. An offence is another word for a crime or unlawful act.

The terminology used by different researchers tends to vary but terms such as 'criminogenic needs' are used interchangeably with 'risk factors' or 'characteristics' and 'pathways' are used interchangeably with 'models' or 'theories'. This was noted throughout this literature review.

Considerations

This review only includes females as participants. Studies where comparisons were made with male participants were excluded. Whilst acknowledging that there may be separate risk factors for both male and female participants in mixed sample studies, it was noted that in such studies, the female sample is disproportionate to male sample hence the findings cannot be generalised to a greater extent. Also, as there are specific reviews with only a male sample, there is an opportunity for research to be carried with a solely female sample.

This review includes studies that look at a range of offences rather than studies that focus only on a particular offence (e.g., theft or fraud). This is because the aim of this review is to explore risk factors for a range of offences rather than offence specific. It was felt that there may be specific risk factors for specific offences and this would not provide an understanding of risk factors associated with a wide range of offences.

Only studies after 1987 were used for this review. This was following a discussion with experts (i.e., professors and researchers) in the area that research on female offending only started to flourish following this period.

Inclusion criteria

Population: Females aged eighteen and above (no limit on upper age) who have been convicted of a non-sexual offence against another person.

Comparator: Studies that makes comparisons with other adult female offenders or non-offenders.

Outcome: Studies outline/describe/analyse characteristics, variables or risk factors related to the population (adult female offenders).

Study Design: Quantitative study, Qualitative study, Longitudinal studies with adult participants.

Language: English only.

Other: studies published after 1987 only.

Exclusion: Studies that investigate adolescent, male or sex offenders, studies that make comparisons with adolescent, male or sex offenders, Studies outline/describe/analyse characteristics, variables or risk factors related to adolescents, males or sex offenders, studies only looking at specific offences, longitudinal or birth cohort studies with participants initially aged under eighteen years, editorials, commentaries, opinion papers, theses, dissertations, single case studies, grey literature, narrative reviews, non-English language. Studies were also removed if they were published prior to 1987.

2.3.2 Search Strategies

The format of the search terms and their entry into the search field was adapted depending on the requirements of each database (see Appendix 1). The individual search terms of the review were:

(Female, wom?n, female criminal, female delinquen*).

AND

(Offend*, crime, criminal, criminal conviction, legal arrest, criminal record, criminal behavio?r).

AND

(Risk factors, risk population, psychosocial factors, predisposition, causality, socio-cultural factor)

AND/OR

(Pathway*, model*, psychological theor)*

The following search strategies were employed:

a) A search was conducted using the above search terms on three electronic databases; PsychINFO (1987 to 4 May 2014, updated on 19 April 2017), Web of Science-WOS (1987 to 5 May 2014, updated on 19 April 2017) and Applied Social Sciences Index and Abstracts-ASSIA (1987 to 11 May 2014, updated on 19 April 2017). For PsychINFO, terms relating to sexual offending e.g., 'sexual violence' and 'sexual offending' were not used as the current review is related to general offending only. The option to 'de-select' sexual offending risk factors were not available on the other two databases, therefore any hits related to sexual offending were removed following examination of the articles.

b) The total number of hits were 1810 publications, 242 duplicates were removed leaving a total of 1568 publications. From this, a further 1485 publications were removed after the reading of their abstracts as they did not meet the inclusion criteria (See Appendix 2). This left 83 articles; from these articles, 73 further publications were excluded as they did not meet the inclusion criteria. This included three studies which could not be obtained. As a result, ten studies were left for the quality assessment. Figure 1 illustrates the process of study selection and how the final studies were obtained.

c) Reference lists from the reviews and articles were searched for relevant article titles using the same search terms. This was done to examine any further publications

appropriate for the review; however no studies meeting the inclusion and exclusion criteria were found.

2.3.4 Quality Assessments

Ten papers that met the criteria for inclusion needed to be quality assessed to ensure that the design of the study was appropriate for the study objectives. In reviewing existing tools, the CASP Critical Appraisal Tools (2010) and the Effective Public Health Practice Project (EPHPP, 1998) were identified. However, some sections of these tools were irrelevant to the design of this review; therefore an adapted tool was created using the CASP (2010) guidelines. As the current review looks at both qualitative and quantitative articles, two separate quality assessment forms were devised, one for qualitative data and one for quantitative data (See Appendix 3). The articles selected were subject to quality scoring based on the criteria outlined in the identified form. Each item was scored using a three point scale: item fully met (score of 2); item partially met (score of 1) and item not met (score of 0). Where the table states 'unclear' this indicates the information was not decipherable, insufficient or not included in the article. A high number of unsure responses would indicate less precise reporting. A minimum threshold level of 50% quality was used, as this was regarded a reasonable level to ensure appropriate studies were included. A cut-off score of 50% was identified through previous experience of the academic supervisors and the researcher and the aim of the study to capture as many relevant high quality studies as possible.

The score for each article was converted into a percentage. Higher percentages indicated better quality papers. For qualitative papers, a score of 16 or less (maximum=32) or 7 or more 'unclear' (maximum=15) were excluded and for quantitative data, a score of 18 or less (maximum=36) or 8 or more 'unclear' (maximum=17) were excluded.

During the quality assessment process, a second researcher assessed 50% of the papers and a good inter-rater reliability was reached (62-88%) on all assessed papers; any differences of more than five points were resolved via a discussion where an agreement of an appropriate score was found.

2.3.5 Data Extraction

Data were extracted from the studies that met the inclusion criteria *and* passed the quality assessment. In total, data from seven studies were extracted. This was recorded on a data extraction form and the information was recorded in a structured manner. This included study aims and objectives, outcome measures/intervention, methodology, results, strengths and limitations. The data extraction form can be found in Appendix 4. Information on the studies obtained from data extraction can be found in Tables 1 and 2.
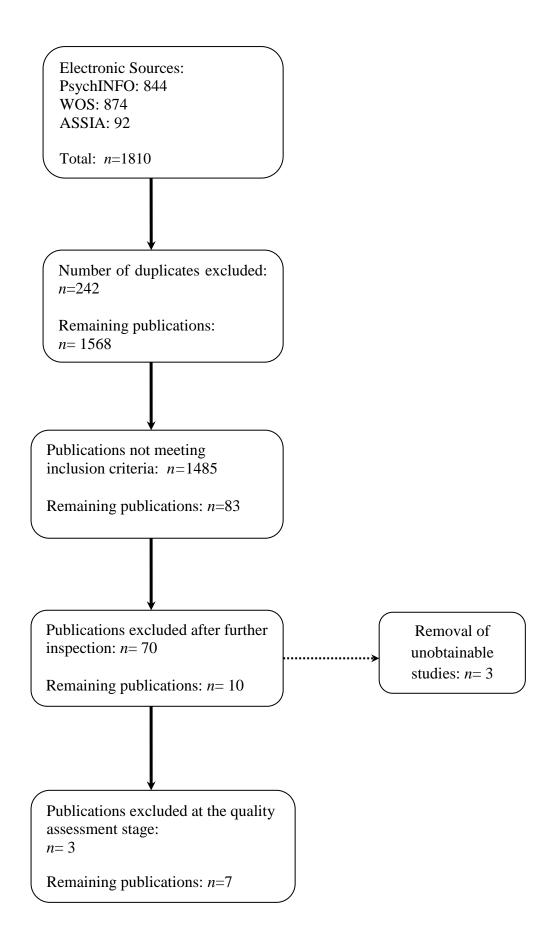
Figure 1: Flow chart of the search results

2.4.1. Included studies

All included studies met the minimum threshold criteria. The seven articles were given an identification number (see Table 1).

Table 1

Included publications in chronological order

Study ID	Title of study	Authors	Year of publication	Country of study
1	Psychological Risk Markers in Violent Female Behavior	Ghitta WEIZMANN-HENELIUS Vappu VIEMERÖ Markku ERONEN	2004	Finland
2	General Risk and Need, Gender Specificity, And The Recidivism Of Female Offenders	L. Jill RETTINGER D.A. ANDREWS	2010	Canada
3	Women's Risk Factors And Their Contributions To Existing Risk/Needs Assessment: The Current Status of a Gender-Responsive Supplement	Patricia V. VOORHIS Emily M. WRIGHT Emily SALISBURY Ashley BAUMAN	2010	USA
4	Women's Pathways To Serious And Habitual Crime: A Person-Centred Analysis Incorporating Gender Responsive Factors	Tim BRENNAN Markus BREITENBACH William DIETERICH Emily J. SALISBURY Patricia V. VOORHIS	2012	USA
5	If "60 is the New 40", is 35 the New 15? Late Onset Crime and Delinquency	Nicole T. CARR Roma S. HANKS	2012	USA
6	Using Dynamic Factors To Predict Recidivism Among Women	Leigh E. GREINER Moira A. LAW Shelley L. BROWN	2015	Canada
7	Female pathways to crime and prison: Challenging the (US) gendered pathways perspective	An NUYTIENS Jenneke CHRISTIAENS	2015	Belgium

2.4.3 Characteristics of included studies

Table 2

Summary of the aims, methodological characteristics and principal findings of the seven studies included in the review.

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
1	*(Only the aims relevant to the current review will be detailed here.)* 1. An examination of the psychological risk markers for violent offenders. 2. An examination of the adverse experiences in childhood and adulthood as well as personality disorders and stressful life events. 3. To compare the differences with non-offenders. 78%	61 violent offenders from prisons or in-patient settings. 30 unemployed non-offenders from a clinic attending courses. Mean age: 34.9 (offenders) and 37.0 (non-offenders).	Quantitative: A structured interview based on set risk factors in female violence. Interview was coded in variables and then analysed. The Structured Clinical Interview II for DSM-IV (SCID II). The Hare Psychopathy Checklist-Revised (PCL-R). The Wechsler Adult Intelligence Scale-Revised (WAIS-R).	*(Only the findings relevant to the current review will be detailed here.)* Offenders' Full Scale IQ (<86) was lower than Finnish norms (5.32, p<.005). Offenders reported significantly more problems within the family including adverse childhood and adulthood experiences. Offenders were more likely to have difficulties with alcohol and their children were more likely to be taken into custody or looked after by relatives. Offenders suffered from mental health difficulties and had received psychiatric treatment. Offenders also had a high rate of a personality disorder (80.3%). Offenders had difficulties in

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
				intimate relationships. They were more likely to victimise their partners i.e., physical abuse (64.3%), psychological abuse (57.1%) and substance abuse (71.4%).
2	1. Investigating the effectiveness of general personality and cognitive social learning (GPCSL) perspective in explaining offending. 86%	172 sentenced offenders in prison. 239 offenders under community supervision order. Mean age: 30.3 (both prison and community sample).	Quantitative: Archived data of interview schedules providing demographic, social history, and current need information using a set of variables. Level of Services/Case Management Inventory (LS/CMI). Level of Supervision Inventory-Revised (LSI-R).	Female offenders who had a prior history of incarceration (AUC .90) were more likely to engage in offending than offenders without a history of incarceration (AUC .70). Sexual and emotional abuse as a child was significant in predicting offending behaviour (Correlation of .11 in each case). Suicide attempts and self-harm were linked with future violence (correlation coefficients of .10 and .12). Difficulties with anger and emotion regulation linked with violent behaviour (correlation coefficient of.22). Problems with finances were

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
				linked with general offending (correlation coefficient of .20) and violence (correlation coefficient of .19).
				Poverty and personal misfortune positively correlated with reoffending (correlation coefficient of .77).
				A non-supportive family and criminal relatives were associated with general offending (correlation coefficient of .17 and .21) and violent offending (correlation coefficient of.17 for criminal relatives only).
				Substance abuse was strongly linked with general offending, violent offending and new offending (AUC of .87).
3	1. Examining the effectiveness of assessment tools designed to assess the risk factors for offending. 75%	626 sentenced offenders in three prisons. 296 pre-release offenders in prison. 704 offenders on	Quantitative: Level of Supervision Inventory-Revised (LSI-R). The authors devised an assessment tool which later in the literature was identified as	Prison sample: the following were found to be significant in predicting re-arrests: mental health, substance abuse, childhood trauma. All were significant at $p<.01$. Other gender specific variables found

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
		probation.	the Women's Risks/Needs assessment (WRNA).	to be significant were: relationship dysfunction, family conflict, criminal history, anti-social attitudes.
		Mean age: 34 (sentenced), 34.9 (pre-release) 33.4 (probation).		Pre-release sample: the following were found to be significant in predicting re-arrests: substance abuse, economic, education and financial variables. All were significant at $p <.01$. Other gender variables found to be significant were: mental health and anger/hostility. Adult victimisation was also significant in terms of gender specific variables.
				Probation sample: the following were found to be significant in predicting re-arrests: previous criminal history, substance abuse, financial problems, education, employment and housing. All were significant at $p <.01$. Other gender specific variables found to be significant were: parental stress, relationship

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
				dysfunction, adult victimisation.
4	1. Identify pathways to offending and estimate the sample proportions in each pathway. 2.Test each identified pathway for stability and replication. 3.Explore potential convergences, replications, and differences between the identified pathways and pathways from prior literature. 86%	718 soon-to-be-released offenders in prison who were within 60 to 180 days of their expected parole release date. Mean age: 36.7.	Quantitative: Women's Risks/Needs Assessment (WRNA) COMPAS Reentry Assessment	Drug abusing offenders: significant factors noted included substance abuse and multiples arrests. Battered women: significant factors noted were physical and sexual abuse (as a child and as an adult), mental health, substance abuse, lack of social support, conflicted relationships, violent relationships, unsafe housing and family involvement in crime. Low socio-economic status offenders: significant factors noted were poverty, stress, lack of education attainment, unstable housing including residency in higher crime areas, substance use in the family, low-self efficacy, poor social support , poor employment skills, financial problems and substance

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
				misuse.
				Aggressive antisocial offenders: significant factors noted were child and adult abuse, violent relationships, unsafe housing, education and vocational failures, poverty, unstable housing, in high crime areas, prior homelessness, mental health, low self-esteem, low self-efficacy, antisocial personality, lack of goals, pessimism and social isolation.
5	Exploring the theoretical constructs that female offenders link to their involvement in offending. 88%	8 offenders in prison Mean age: 44.6	Qualitative: In-depth interviews which were transcribed and analysed adopting a grounded theory approach.	Addiction (drugs and alcohol and gambling), care-taking (not being able to provide for the family, involvement with a partner with a criminal background requiring care resulting in lack of resources), children (children leaving home, dealing with the role of a mother), loss of a loved one were risk factors for offending.

Study ID	Hypothesis/Aim Quality Score	Population	Measures/Design	Findings
6	1. To investigate to the extent to which criminological needs change over time. 2. To assess the relationship of the risk factors at different stages in predicting recidivism. 69%	497 offenders in the community. Mean age: 36.8.	Quantitative: Community Intervention Scale (CIS).	Associates, attitudes, substance abuse, employment were significant at $p < .001$ in predicting reconviction. An AUC of .66 suggested associates and attitudes were most relevant and valuable predictors of time to failure in the community.
7	1. Exploring the pathways to crime and prison, and whether the pathways fit the pathways perspective outlined in the literature. 94%	41 offenders from four different prisons. Mean age:39.8	Qualitative: In-depth interviews which were transcribed and analysed by looking at common themes.	The following key risk factors were found: vulnerability (adult victimisation, troubled relationships) and abusive intimate relationship. Other risk factors noted were: financial need, addictions, limitation of appropriate choices and social isolation.

2.4.4 Descriptive Overview of Results

2.4.4.1 Methodology and population of studies.

The total number of participants across the seven publications was 3392. The studies varied in location with three studies conducted in the USA (Brennan, Breitenbach, Dieterich, Salisbury, & Voorhis, 2012; Carr & Hanks, 2012; Van Voorhis, Wright, Salisbury, & Bauman, 2010); two in Canada (Greiner, Law, & Brown, 2015; Rettinger & Andrews, 2010); one in Finland (Weizmann-Henelius,Vimerö, & Eronen, 2004) and one in Belgium (Nuytiens & Christiaens, 2016). All studies included a mix of ethnic groups. In the majority of the studies, participants were selected from either prisons or the community. Studies 2 and 3 looked at participants in both prison and community and Study 1 included participants from an in-patient secure hospital and prison. All the participants had contact with the Criminal Justice System and were either serving their sentence in prison or were in the community on probation or were previously imprisoned. One study (Study 1) included a comparison group. The comparison group was derived from a selection process which included checking for potential participants' criminal records. Another criterion was unemployment, which the authors said was associated with increased stress that can lead to offending. The participants were selected from a centre where they were undertaking classes for employment or self-improvement. The participants were matched with the study group according to age and educational level.

Two of the quantitative studies (Study 1 & 2), investigated the impact of risk factors such as victimisation and stress or the impact of a theory such as social learning theory on offending behaviour. Most of the studies were cross-sectional. Cross-sectional studies examine a sample of participants at a particular point in time. Therefore, all the quantitative studies were retrospective and could not determine direction of causality.

The studies were undertaken by a wide range of professions including psychologists (Study 1, 2, 5 and 6), professors/fellows/research associates of criminology (Study 3, 4, 5 and 7) and a psychiatrist (Study 1). The sample sizes for each study showed noticeable variation, ranging from 1626 (Study 3) to just eight (Study 5).

2.4.4.2 Measures and demographics of studies.

The majority of the publications aimed to examine the risk factors or pathways to female offending by drawing on the theories and literature, while one study examined the risk factors based on an assessment tool (Study 3). All the quantitative studies used a similar design (self-report psychometrics), taking a regression or correlation approach to analysis. The two qualitative studies (Study 5 & 7) applied unstructured interviews with open ended questions to gather information and opinions from the participants regarding their risk factors and pathways to offending. In terms of data analysis, Study 5 employed grounded theory (Charmaz, 2003) to analyse their collected data. Study 7 utilised a thematic framework (Braun & Clarke, 2006) to identify the emerging themes.

2.4.4.3 Themes within the literature.

The seven studies included in this review explore the different risk factors present in general adult female offenders. The studies are diverse in terms of aims, methodology and analysis, which makes it difficult to aggregate findings. However, they do provide an overview of the work undertaken to date, which begins to explore the aetiology of offending in this specific population. The risk factors are considered as 'themes' and are outlined below to aid understanding of the results.

Victimisation

Weizmann-Henelius et al. (2004) found that offenders were more likely to be victims of physical and sexual abuse as a child and victims of physical, sexual and psychological abuse as an adult. Carr and Hanks (2012) noted similar findings as offenders in their sample had history of physical and sexual abuse. From the findings of their research, Van Voorhis et al. (2010) concluded that child abuse and adult victimisation are criminogenic needs for offenders in prison and released offenders who have a history of aggression and violence and also engage in antisocial behaviours in secure settings (e.g., escapes, bringing in contraband and smuggling). The study however did not specify the categories of abuse as a child or as an adult. Brennan et al. (2012) found in a sample of offenders, that both child and adult physical and sexual abuse increased an offender's engagement in property related offences, drug related offences, trafficking offences, violent offences and use of weapons.

Nuytience and Christiaens's (2016) study showed that the offenders were likely to have been victims of physical, emotional and sexual abuse as a child and as adults. The authors reported that as a result of child abuse, the offenders left the family home at a young age, or engaged in drug use to cope with victimisation. The authors noted that such vulnerabilities contributed towards the difficulties they experienced in relationships in particular. The offenders were subject to manipulation from their intimate partners or peers who coerced them to engage in offending behaviour such as drug related offences and theft. The authors concluded that victimisation in adult relationships was an important precursor for adult offending. Rettinger and Andrews (2010) highlighted that emotional abuse, sexual abuse and physical abuse was reported by offenders as a child and as an adult but it was sexual abuse and emotional abuse as a child that correlated significantly with offending behaviour.

A large proportion of the offenders in the reviews were victimised as a child by a family member or someone close to them as a child. The average percentage of child abuse

noted in the studies varied between 31%-58% of the sample. The most common child abuse documented was physical and sexual abuse. As adults, offenders were victimised by their intimate partners. This included physical abuse, sexual abuse, bullying, intimidation and threats of violence. These findings indicate that there is a strong association between victimisation and offending.

Addiction

Weizmann-Henelius et al. (2004) found that offenders, who were violent towards their partners, reported they were under the influence of drugs at the time of the offence. The offenders also reported alcohol related arguments as the most frequent motive for their violent act. Similarly, Rettinger and Andrews (2010) found that substance abuse was strongly associated with property offences, assaults, trafficking and importing drugs offences. The researchers concluded that the offenders in their sample believed both drugs and alcohol were directly related to their offending. In another study, Van Voorhis et al. (2010) found that; drugs and alcohol were significant contributors of violent offences amongst offenders in prisons, released offenders and offenders who were on probation

Brennan et al. (2012) explained that female offenders in their sample who had chronic substance abuse problems also engaged in property offences, drug offences (possession and trafficking) and violent offences. The researchers concluded that the offenders' drug use had strong links to the crimes they had committed. Carr and Hanks (2012) carried out interviews with female offenders and found that the majority of the offenders in the sample described themselves as addicts. Some of these offenders linked their addiction to drugs and alcohol to their offending. The criminal records were consistent with the offenders' account as they were convicted of drug related offences, theft and robberies and embezzlement. In addition to drugs and alcohol, two of the offenders in the sample reported addiction to prescribed

medication and gambling contributed towards their offences of theft and embezzlement. More recently, Nuytience and Christiaens's (2016) work showed that offenders in the sample who had histories of drug use often got involved in financial difficulties resulting in convictions for drug and property offences and also prostitution.

Mental Disorders/Emotion Dysregulation

Weizmann-Henelius et al.'s (2004) study showed that 80.3% of the offenders had a personality disorder (PD). Of these, 55% were antisocial PD, 36.7% were borderline PD and 23.3% were paranoid PD. It was found that 19.7% of the entire offender group had forewarned the police and mental health professionals of their fear of losing control or of their intention to harm someone. The researchers concluded individuals with personality disorders were also violent offenders and that their problems to a great extent were a consequence of their personality disorder. Brennan et al.'s (2012) pathways of female offending found that within the 'aggressive antisocial' women, a high proportion of the offenders had an antisocial personality and also had a criminal history of drug related offences, parole revocations, property offences, violent offences, weapon related offences, violence in institutions and domestic violence.

Mental health difficulties noted in the studies mainly consisted of depression and psychosis. Depression was highlighted in three studies (Brennan et al; 2012; Nuytience and Christiaens, 2016; Van Voorhis et al.; 2010). Two of these studies also explored psychosis in their sample group and found there to be a link between a diagnosis of psychosis and offending behaviour (Brennan et al; 2012; Van Voorhis et al.; 2010.) For example, Brennan et al. (2012) looked at pathways of female offending and found that within 'battered woman' pathway, offenders diagnosed with depression were also involved in drug related offences and weapon related offences. Brennan et al.'s (2012) sample also consisted of 'aggressive

antisocial' women and a high proportion of the offenders in this sample suffered from depression, anxiety and/or psychosis. These offenders also had a criminal history of drug related offences, parole revocations, property offences, violent offences, weapon related offences, violence in institutions and domestic violence. In another study, Van Voorhis et al. (2010) found that offenders in prison and in the community diagnosed with depression or psychosis were more likely to engage in violent offences particularly if their past offending was driven by their mental illness (e.g., command hallucinations).

Difficulties with emotion regulation were noted in three studies. For example, Rettinger and Andrews (2009) found that difficulties regulating anger was linked with violent reoffending. In another study, difficulties regulating anger was related to return to prison in offenders who were released on probation (Van Voorhis et al., 2010). Brennan et al.'s (2012) pathways of female offending found that within the 'battered' and 'aggressive antisocial' pathways, offenders were above average for anger and hostility and had histories of drug related offences, weapon related offences, violent offences and violence in institutions. Carr and Hanks (2012) reported that death of a loved one was important. In Carr and Hanks's (2012) sample, offenders identified loss as a turning point in their lives. Coupled with other stressors and difficulties with appropriately managing emotions resulting from family conflict, the offenders turned to drug use. The researchers concluded absence of others (e.g., partners, family or children) or losing a role such as a mother was associated with emotion dysregulation which led to behaviours such as drug-use which then preceded criminal behaviour.

Inadequate personal support

Six studies highlighted difficulties with intimate/familial/peer relationships. Weizmann-Henelius, et al. (2004) found that the offenders were in unstable intimate relationships and that a year prior to their offending, they reported significant problems in the form of physical and psychological abuse and substance abuse in the relationship. It was found that such problems in the relationships made offenders a high risk for involvement in violent encounters and to behave aggressively towards their partners.

Other studies identified intimate partners who coerced offenders to engage in offending behaviour as an inappropriate source of personal support. For example, in Brenan et al's. (2012) study; 'battered' women who had limited social support from families and were in abusive intimate relationships; their abusive partners were seen to increase the offenders risk of contact with the Criminal Justice System (58%). Forty four percent of these offenders had a criminal record for offences related to property, drugs and violence. It was also found that 'aggressive antisocial' women were domineering and in violent relationships. Domestic violence was prominent in this group of offenders, with above average charges for domestic violence (23%). The 'poor marginalised socialised' women (refers to uneducated offenders who commit crime to manage poverty and to have a secure and a comfortable life) who had convictions of drug related offences suggested strong links to a subcultural crime or drug network. This indicates that these offenders had strong antisocial influences from their peers, family or partners.

Brennan et al. (2012), Nuytience and Christiaens (2016), Rettinger and Andrews (2009) and Van Voorhis et al.'s (2010), findings indicate that emotional or financial support from family, friends and partners was often absent or inadequate, leading up to the crisis period. For example, Nuytience and Christiaens (2016) noted that many offenders had an abusive partner and offenders found themselves in unequal power relations and feared their partners which resulted in isolation and dependence. Several of their participants in the

sample committed offences such as homicide, drug related offences, infanticide, forgery, property offences and complicity with their partners. The researchers concluded that an abusive intimate partner is an important factor in women's pathway to offending.

Greiner et al. (2015) carried out their research on female offenders released from prison. The researchers found that when offenders associated with peers who condoned the use of criminal and antisocial activities, they were more likely to fail in the community by reoffending (AUC= .60).

Antisocial attitudes

Two studies found that certain attitudes can lead to involvement in offending behaviour. Greiner et al. (2015) and Van Voorhis et al. (2010) identified that presence of antisocial attitudes condoning the use of violence, drug use and other antisocial behaviours are a significant risk factor for offending. For example, Van Voorhis et al. (2010) found that offenders both in prison and in community typically endorsed antisocial attitudes. However, no further details were provided. Greiner et al. (2015) also found similar results that when female offenders were released from prison, endorsement of antisocial and negative attitudes coupled with association with antisocial peers were relevant and valuable predictors of reoffending (AUC= .66).

Parental stress

Three studies highlighted stress associated with being a parent. For example, Brennan et al. (2012) found that 'battered', 'poor marginalised socialised' and 'aggressive antisocial' women reported high levels of parental stress as most were single parents (75%). In most cases, female offenders' children were under the age of eighteen years. The researchers reported when offenders care for young children, the combination of financial difficulties,

unsafe housing, unemployment and caring for children can be stressful and may lead them to engage in drug related and property offences.

Carr and Hanks (2012) explored parental stress and found that offenders struggled financially and due to limited social support, they committed robberies and shop-lifting in order to provide for their children and in some cases to treat children during special occasions such as birthdays. In two out of eight cases in the sample, mothers misused drugs and prescribed medication whilst dealing with the milestones in their children's lives such as child starting school or leaving the family home. The researchers noted that female offenders' criminal behaviour was linked with the children's absence. It was reported that when children were not present for extended periods of time, the offenders were free from their duties as a mother or of a primary caregiver and engaged in drug use which, over time, became problematic resulting in drug related offences.

Finally, Nuytience and Christiaens's (2016) research noted that for some female offenders in the sample, their offences were motivated by financial problems where their partners had spent the money and the offenders needed to provide for the children. As a result, they engaged in offences such as traffic violations, forgery and property offences.

Demographic characteristics

All seven studies noted that differences in demographics were important to consider as risk factors. The offenders predominantly came from low social economic backgrounds, which meant there were often housing issues such as their homes being considered unsafe and offenders lived in a neighbourhood with high rates of crime or offenders were homeless (Brennan et al., 2012; Rettinger & Andrews, 2010; Van Voorhis et al., 2010). Furthermore, in Weizmann-Henelius et al.'s; (2004) study, alcohol abuse by the mother was found in the offender group which indicated significant problems in the families. The researchers stated

that a mother's dependency on alcohol can have a harmful impact during a child's developmental years in particular and determine psychological risk markers in their violent offending.

Rettinger and Andrews (2010) found that reliance on social welfare and having non-legitimate sources of money were associated with property offences, assaults, trafficking and importing drugs offences. Additionally, poverty, social isolation, a non-supportive family , criminal relatives were also associated with the above-mentioned offences. Van Voorhis et al.'s (2010) research showed that financial problems and unsafe housing was correlated with re-arrests. It was also found that low socio-economic status and lack of education was a risk factor for reoffending in released offenders. Lastly, Brennan et al (2012) found that most of the female offenders in their sample were socially marginalised due to their low socio-economic status and had difficulties with accessing or failed to access education and employment opportunities.

2.4.4.4 Methodology and analysis

Difficulties were noted in the methodology in a number of studies. For example in Carr and Hank's (2012) research, the researchers only met the participants on the day of the interview, thus limiting the opportunity to a build a positive researcher-participant relationships prior to the interview. An ethical concern was also noted as offenders were not aware of the purpose of the study until the time of the interview, thus giving them limited time to reconsider their decision to participate and some may have agreed to take part due to the direct or indirect pressure from the researchers or the authorities. Another limitation of this study was that the researchers did not explain the rationale for the use of grounded theory as their choice of analysis. It is not clear why this method of analysis was selected and

whether other qualitative methods such as thematic analysis or contextual analysis were considered.

Information on missing data and drop-out rates is not always clear as noted in the work of Rettinger and Andrew (2010), Van Voorhis et al. (2010) and Weizmann-Henelius et al. (2004). Furthermore, although Rettinger and Andrew (2010) reported that they used a follow up period in their research, the process is not described and links with the initial findings are not explained. Additionally, Weizmann-Henelius et al. (2004) were not consistent in their data collection as some interviews were carried out after a substantial delay and as the details of this are not provided, this may have affected the level of consistency in the offenders' responses.

In a small number of studies (Brennan et al., 2012; Weizmann-Henelius et al., 2004) the researchers identified confounding variables but either did not address these or partially addressed these. Finally, the varying methodologies in the studies included in the review make the comparison of results challenging. In addition, studies that utilised quantitative methodologies did not allow participants to give explanation for their answers. It is plausible that with this opportunity participants may have described additional or contrasting views and feelings to their answers on the psychometrics.

Greiner et al's. (2015) findings are difficult to generalise as it is not clear whether the positive changes noted over time were a result of rehabilitation and positive changes made by the offenders as the questionnaire underwent a number of revisions during the two year duration of the study. Furthermore, as Van Voorhis et al. (2010) devised the WRNA assessment for the purpose of their research, it is not possible to determine the validity and reliability of the tool in this study.

All five quantitative studies in this review used self-report psychometrics as a form of data collection. This raises some concerns around possible social desirability (Fisher &

Katz, 2008) in participants, thereby influencing the results obtained. Some studies sought assistance of prison officers when selecting for participants. This raises the queries of selection bias as participants who may be more amenable to participate and those who were engaged in their rehabilitation were included. Participants who were challenging or not fully rehabilitated may have been unintentionally excluded.

2.5 Discussion

The key findings from this review highlight that there is a lack of qualitative research investigating risk factors for offending in general adult female offenders as the current review only identified two qualitative studies. Moreover, no relevant longitudinal studies were found. There is a dearth of longitudinal research to ascertain direction of causality for risk factors, making it difficult to establish whether they are causal or consequential. Furthermore, there was only one comparative study in this review, thus indicating that control groups are needed in order to make comparisons in order to fully assess what make female offenders different to female non-offenders. Despite some shortcomings, the studies included in this review highlight that there are a number of risk factors for female offending that are similar to those found in the male literature such as unemployment and substance misuse. Other factors however are more pertinent to female offenders such as abuse and parental stress. Furthermore, the gender neutral risk factors identified in the literature may function differently for men and women when explored in relation to their offending. The following sections summarise the risk factors for general adult female offending noted from the current literature review.

Previous victimisation as a child and/or as an adult is one of the predominant risk factors. Consistent with the literature, the current findings suggest that a female offender's previous experiences of victimisation can contribute to other risk factors such as emotion

dysregulation, poor mental state and further trauma (Convery, 2009; McIvor, 2007). Furthermore, female offenders may misuse alcohol and/or illicit substances to cope with such trauma (Convery, 2009; McIvor, 2007). Traumatic experiences may also evoke certain attitudes towards perpetrators or groups of individuals such as men in general. In some situations, this can lead to engagement in antisocial behaviour to protect self/others when faced with challenges from such individuals where one's/others' safety may be at risk of harm (Wincup, 2000; as cited in Liddell & Martinovic, 2013)

A risk factor that has been linked to offending in males is substance and alcohol misuse (Webster, Douglas, Eaves, & Hart; 1997). In the current review, this was also noted. Most studies found that both drugs and alcohol were significant, however they did not distinguish which one was most significant. None of the studies focussed solely on alcohol. This is an area that could benefit from further exploration in the future. As noted in the literature, misuse of drugs in particular can lead to engagement in acquisitive and drug related offences such as possession and supply. This has the potential to extend to more serious offences such as robbery, aggression and violence particularly once the individual starts to associate with peers who condone the use of such substances and antisocial behaviour (Berry, Johnson, Severson, & Postmus, 2009). Similarly, parental alcohol also has an impact on a child's developmental years which later in life marks a risk factor for offending behaviour in women (Weizmann-Henelius et al.'s; (2004).

Five studies identified mental disorders and emotion regulation as an additional risk factor for female offending. There is substantial evidence in the literature to suggest that personality disorders, psychosis and depression are associated with violent offending (McIvor, 2007). Emotion regulation refers to attempt individuals make to maintain and enhance emotional experience and expression (Calkins, 2011). Adaptive emotion regulation allows an individual to function successfully in their environment (Bridges, Denham, &

Ganiban, 2004). It happens when an individual is able to contain the emotion experience sufficiently using a variety of strategies and continue to engage in goal-directed behaviours (Gratz & Tull, 2010). On the other hand, maladaptive emotion regulation occurs when an individual is faced with a difficult emotion experience and is either unable to contain the emotion experience sufficiently and inhibit impulsive behaviour in order to engage in goal-directed behaviours or does not allow the emotion experience to run its course. Emotional dysregulation can be a result of previous trauma (e.g., abuse, death or a loss), early maladjustment (e.g., childhood victimisation or attachment disorder) or poor parenting style whereby the offenders emotions as a child were not regulated and as a result they did not learn how to do this for themselves. It can be present in individuals with mental disorders such as borderline personality disorders and schizophrenia. Studies on serotonin have shown that in individuals with borderline personality disorders, reduced serotonergic activity may inhibit their ability to control destructive urges such as self-harm (Schulz et al., 1985). These individuals also experience structural and functional deficit in brain areas central to affect regulation, self-control and executive function (Rüsch et al, 2003). The impulsive behaviours which are common among this population include self-harm, aggression and substance abuse, (also a form of self-medication) all of which are a common consequence of strong, negative emotions (Linehan, 1993).

Conflict with family members or partners in relationships increased a woman's risk of offending. Additionally, absence or inadequate support from others also contributed towards offending. Research indicates that a healthy support network can serve as a protective factor for offending whereas an unhealthy one can increase the risk of offending (Webster et al., 1997). Absence of an appropriate personal support network can make an individual feel isolated and they may seek intimacy and support from others. Unfortunately, they find people who may exploit or coerce them in acts that are antisocial in nature due to an individual's

lack of experience of healthy relationships following previous patterns (Benda, 2005; Leverentz, 2006). Such unsupportive support network can further or maintain an individual's engagement in offending behaviour as the individual's antisocial behaviour is negatively reinforced by their peers. For some female offenders, the inadequate personal support network within the family structure may have developed from a young age as a result of maladjustment at home. Research indicates that early secure bonds are crucial as they guide future relationships. Insecure attachments can lead to future difficulties including difficulties with emotion regulation as the individual may experience problems relating to others and may find it difficult to form healthy and stable relationships (Bowlby, 1969). In the current review, it was noted that some female offenders had difficult relationships with their parents due to parents' own psychological difficulties which resulted in the offenders feeling 'unwanted' (Nuytience & Christiaens, 2016). Insecure attachments can result in conduct problems. Conduct problems from an early age if left untreated can negatively reinforce such behaviour and over time the individual may adopt aggression as a problem-solving strategy, thereby increasing their likelihood of engagement in acts of aggression and violence (Levene et al., 2001, as cited in de Vogel et al, 2011).

Certain characteristics can increase engagement in offending behaviour. For instance, the need to seek thrills and excitement can be fulfilled by engaging in antisocial acts. Furthermore, attitudes condoning antisocial acts in order to problem-solve a difficult situation can heighten the risk of offending (Simpson et al., 2008). The findings from the current review noted that antisocial attitudes were linked to offending. Attitudes also interact with other risk factors such as previous victimisation, demographics and personality disorders. Past experiences or current difficult economic situation can evoke certain attitudes toward others/groups of individuals. Subsequently, when confronted by these individuals/groups, the attitudes may justify use of violence or antisocial acts in order to problem-solve the difficult

situation (Gelsthorpe, 2010). Some of the traits associated with Antisocial Personality Disorder include 'a failure to conform to social norms with respect to lawful behaviours by repeatedly performing engaging in acts that are grounds for arrest' (DSM-IV TR; APA, 2000) and irritability and aggressiveness by physical fights or assaults. Associations with peers who condone engagement in acts of aggression/violence/antisocial behaviour can influence an individual to adopt similar views which can lead to engagement in offending behaviour.   It would therefore appear that negative attitudes and an antisocial peer group may lead to disinhibition or engagement in antisocial behaviour and the repeated acts of antisocial behaviour may be associated with Antisocial Personality Disorder.

Parental stress was a unique risk factor for female offending. It was noted that the stress of caring for children and difficulties in providing for children increased an offender's risk of offending. Research has found that coupled with a female offender's economic marginalisation, substance abuse and minimal social support, stress levels can increase as well as overwhelming feelings about not being able to take care of and provide for their children. Maternal demands when accompanied with such stress factors may contribute to offending (Greene, Haney, & Hurtado, 2000). Additionally, when female offenders are imprisoned, adjusting to a prison regime and limited contact with children can be stressful. This is also related to an increase in the development of a mental illness (Tuerk & Loper, 2006). Parental stress is at its greatest among offenders who may be threatened with the loss of child custody, a fairly common occurrence with female offenders.

Certain demographics have been found to increase risk of offending. Low socio-economic status and lack of economic resources was highlighted in all the studies in this review. Other characteristics noted were lack of education, absence or difficulties with sustaining employment and familial involvement in offending behaviour. Within these demographics, it seems plausible that these female offenders have higher levels of

unemployment and lower income, have poor education, fewer resources, early exposure to antisocial behaviour within their residence and may lack knowledge and coping skills, thus resulting in offending behaviour. These findings are consistent with the demographic risk factors identified in the literature (Chesney-Lind & Pasko, 2004; Sheehan, McIvor, & Trotter, 2007). These demographic stressors combined with the other risk factors (e.g., mental health/emotion dysregulation, substance/alcohol misuse, maladjustment, antisocial attitudes etc.) can increase the impact of the lack of appropriate problem-solving abilities in these individuals, thereby increasing their likelihood to offend.

In summary, the risk factors listed above have also been identified as risk factors for men (Fergusson & Horwood, 2002; Steffensmeier & Allan, 1996). However, some risk factors appear to be more prevalent in females and this heightens their risk of offending. These include loss, previous victimisation, mental health/emotion dysregulation and parental stress. From the review of the literature, it would appear that emotion dysregulation is an important factor to consider when working with female offenders. The Female Additional Manual (FAM) takes emotion dysregulation in consideration when assessing a female offender's risk of violence. The manual notes that self-harm and suicidal thoughts is common is disorders such as depression and borderline personality disorders and indicates despair and frustration. When a woman engages in self-harm, this has the potential to turn into aggression toward others or property. Dialectical Behaviour Therapy (DBT) is specifically designed for individuals who find it difficult to manage their distressing emotions (Linehan, 1993). Research has shown that DBT has had positive effects when working with women with borderline personality disorder to minimise the risk of aggression and self-harm and increase their quality of life (Carter, Willcox, Lewin, Conrad, & Bendit, 2010; Koons et al., 2001). Such findings suggest that emotion dysregulation plays a key role in female offending and needs to be addressed both in psychological assessments and interventions. Another key risk

factor noted in this review is inadequate social support. Research has shown that support

from professionals (i.e., probation officers, doctors, case workers, social workers) and

appropriate family members, partners and friends can reduce female offenders engagement in

offending (Barry, 2010; Bui & Morash, 2010; Petras, Nieuwbeerta, & Piquero; 2010). This

suggests that interventions should focus on women having access to appropriate social

support network and learning of healthy intimate relationships in order to help them desist

from offending.

Based on the above findings, it is suggested that future research should aim to develop

risk assessments and interventions that focus specifically on female offending. In terms of the

assessments, with the exception of the FAM, most risk assessment tools available in the field

are designed primarily for male offenders and do not always consider the needs of female

offenders (de Forouzan & Cooke, 2005; de Vogel et al., 2011). Similarly, DBT was initially

designed for women and has proved to be successful (Carter et al., 2010; Koons et al., 2001).

However, further interventions focussing on female offenders needs such as relationships and

parental stress should be considered. Resources and support services are also needed to

improve in their ability to respond and assist female offenders during a crisis/leading up to a

crisis. The support needs to be advertised as being applicable and readily available, in order

for services to effectively support female offenders to problem-solve their difficulties without

resorting to offending behaviour.

2.5.1 Strengths and weaknesses of the review

The current review had some limitations, affecting the strength of conclusions made.

Effect sizes can help to distinguish how powerful the differences are. In the review, the

inclusion of effect size could have helped determine how significant risk factors may be when

the quantitative studies are compared. It was then noted the number of quantitative studies

available were small (i.e., five) and there was only one comparator study, thus effect size calculations could not be undertaken. Future quantitative studies should try and include comparison groups so that effect size can be calculated to quantify the size of the difference in risk factors. Additionally, comparison group can allow researchers to investigate the extent to which the risk factors are more pertinent for offenders in general or different types of offenders.

It was considered whether it would have been easier to focus on either qualitative or quantitative studies in order to compare significance levels and methods of analysis. It was then noted that this would have resulted in researcher bias as important findings may have been missed. Additionally, adding qualitative studies in the review allowed the researcher to gain in-depth details of the risk factors associated with female offending.

Time-constraints prevented the review from being as comprehensive it could have been. Therefore, only three databases were searched. As unpublished material was excluded, the current review may suffer from publication bias as only studies that report significant results may have been published. Equally, this may also be the strength of the review as the studies included in the current review may actually be of high quality and better controlled, as they were rigorously reviewed by peers.

When comparing the results of quantitative studies in relation to shared risk factors, it must be considered whether the measures used are the same or, if not, whether they indeed measure the same risk factor. This can be achieved through statistical correlations. However this was not possible as some of the researchers adapted existing measures, reducing the validity of the measure or devised their own measures that were not validated at the time of the publication. Future studies would benefit from using standardised assessments and application of similar assessments to measure outcome. A number of measures used were reliant on self-report, which relies upon participants being aware of and accurately describing

their experiences. In addition, participants may be reluctant to disclose certain aspects of their lives in the interview or questionnaires which may have led to bias in the information provided. It is possible that social desirability or compensations may have had an impact on the findings. Future research would benefit from consistently using multiple sources of data such as official records and self-report.

Inclusion criteria meant that cohort studies were not included in this review, thus possibly limiting the number of studies in data synthesis. Whilst cohort studies including children and adolescents may have provided more evidence, the pathway for children and adolescents is different to adults and subject to change (Garrido & Morales, 2007; Javdani, et al., 2011;). Thus, inclusion of cohort studies with children and adolescents would have resulted in weaker results making it difficult to generalise it to adult females. Similarly, only English language papers were included in the review (due to time constraints) and this may have introduced a source of bias.

The measures used in the studies were relevant to the research aims. However the reliability and validity of the measures was not always discussed and in the quantitative studies, the norms were not always available. In terms of qualitative research, a sound qualitative research requires a systematic and rigorous approach to the design and implementation of the study, the collection and analysis of data and the interpretation and reporting of findings (Fossey, Harvey, McDermott & Davidson, 2002). Evaluation criteria need to be consistent and aim to inform the research method. Lincoln and Guba (1985) outlined the criteria for assessing qualitative research (credibility, transferability, dependability and confirmability) that parallel validity and reliability. In the current review, grounded theory was used and it is not explained how the researchers met the criteria for qualitative research as identified by Lincoln and Guba (1985).

Research articles from the UK were assessed for quality but as they did not pass the assessment, the UK studies could not be included in the review. All the studies included in the review were conducted outside of the UK, which may make it difficult to generalise the results to the UK population. Although the healthcare and Criminal Justice System may differ from one country to another, the studies carried out in this review were conducted in the US, Canada and Western Europe, thus the similarity in the cultures may have some relevance for female offenders in the UK.

A strength of the review is that the search terms were varied and utilised a broad language base which represented the aim of the review. The databases searched ensured that a range of non-sexual offences were included which increased the variability of the search results. The subsequent quality assessment applied to the relevant studies was designed to highlight potential biases and to measure the extent to which the methodology adhered to the study aims and the clarity of the findings. It was beneficial to have another individual quality assess 50% of the studies as this helped to increase the reliability of the assessments and ensure that the studies included in the review were of a good quality. The studies included in this review were quality assessed and required to reach the 50% minimum threshold. This indicates that although there were some flaws in the methodology, their overall standard was reasonable to high.

Despite the limitations, the findings of this review are important. They are consistent with previous literature that has highlighted characteristics of risk factors in female offenders. It updates and extends upon existing findings by being able to establish with more certainty whether particular risk factors are related to general adult female offenders rather than females as a whole of various ages.

2.6 Conclusion

The findings of this review indicate lack of research, confounded by methodological problems. Furthermore, it demonstrates the sparse literature relating to risk factors in general adult female offenders, specifically qualitative research and lack of longitudinal studies in both qualitative and quantitative research. These areas are necessary in order to ascertain risk factors that are evident in this population.

Risk factors for general adult female offenders identified in this review are victimisation, addiction, mental disorder/emotion dysregulation, inadequate personal support, antisocial attitudes, parental stress and demographics (e.g., low socio-economic status, lack of economic resources, lack of education, absence or difficulties with sustaining employment and familial involvement in offending behaviour). The likelihood of a female committing an offence could be increased where there are multiple, interrelated risk factors present. As a result, further research is needed to consider how best to support female offenders in order to reduce the risk of further offending.

Rationale for chapter 3

The results of the literature review highlight the need for ongoing published research on female offending. Given that female offending is potentially on the rise, more research is needed. The literature review highlights the risk factors for general adult female offenders and notes some factors that are more pertinent in female offenders such as victimisation, mental health and emotion dysregulation, loss, parental stress and inadequate personal support. Research has outlined the importance of addressing these issues both in assessments and interventions in order to support female offenders to desist from offending (Koons et al., 2001; Petras et al., 2010; de Vogel et al. 2011).

Desistance is a new field in forensic psychology and female desistance is relatively scarce in the literature, particularly in the UK. The next chapter of this thesis aims to explore this idea of female desistance. As noted in this literature review, there are specific risk factors for female offending and naturally treatment should address such risk factors in order for female offenders to live an offence free lifestyle. It is therefore proposed that research on female offenders' experiences of desistance from crime will enhance the clinicians, services and researchers understanding of female offending. Desistance will be studied through interviews with female offenders in the community to explore what helps them to stop offending. A treatment programme will also be evaluated to investigate if and how it helps female offenders in their efforts to stop offending. It is hoped that findings from such research will inform the services of the support and appropriate treatment female offenders need in order to manage the risk factors associated with their offending.

CHAPTER 3

Research Study

Desistance from crime: Exploring factors related to the process of

desistance in female offenders.

3.1 Abstract

Aims:

The aim of the current study is to further existing knowledge by exploring the process of desistance from crime in a sample of adult female offenders in the UK. Furthermore, the study aimed to explore the potential impact of a drama based therapy programme in promoting desistance from crime.

Method:

Twenty-one female offenders who were attending a drama based programme with the Geese Theatre Company volunteered to take part in the study. The participants completed the Intermediate Outcomes Measure Instrument (IOMI) questionnaire prior to and following the group to explore the potential impact of the programme. Data were analysed using a dependent sample t-test. Additionally, ten participants took part in a semi-structured interview to explore their experiences of desistance from crime. Data were analysed using thematic analysis. The interviews were rigorously coded and themes were generated.

Results:

Quantitative analyses showed significant improvements in six out of seven dimensions on the IOMI. The following dimensions were significant: hope; interpersonal trust; agency/self-efficacy; well-being; motivation to change and impulsivity. Only the resistance dimension was found to be non-significant. With regards to qualitative data, the following themes were identified as being associated with the process of desistance: Skills and Attributes; The Usefulness of Programmes; Support; Purpose Driven Life; Risk Factors and Consequences.

Conclusions:

The findings from the research support the following existing theories of desistance from crime: cognitive transformation; self- control; self-identity; social bonds and social capital. The findings add to the limited yet growing evidence base in the field of desistance in female offenders.

3.2 Introduction

3.2.1 Definition of Desistance

The literal meaning of desist is to "stop". In the field of forensic psychology, desistance from crime is considered as the end of a period of involvement in offending behaviour. Few studies have attempted to define desistance; however, there is currently no consensus on a common definition. Different researchers have proposed their own understanding of desistance. For example, Meisenhelder (1977) defined desistance as "successful disengagement from a previously developed and subjectively recognized, pattern of criminal behavior" (p.319). Uggen and Kruttschnitt (1998) state desistance is a shift from a state of offending to a state of non-offending and its maintenance. Researchers such as Maruna (2001) have highlighted the shortcomings of a common definition of desistance and suggested that desistance should be seen as a process as this may provide a more accurate picture of the concept.

Desistance from crime is considered to be a challenging process, as the stigma of having a criminal record can reduce the opportunities to become a pro-social member of society and to lead a lifestyle incompatible with offending (Laub & Sampson, 2001). It has therefore been proposed that desistance from crime may involve 'stops' otherwise known as relapses (Farrall & Calverley, 2006).

Interest in desistance started in the late 1970's and 1980's following a wave of longitudinal projects on life course offending behaviour. Over time, as many of the participants ceased offending, the researchers were left having to explain this cessation. By the mid-1980s, desistance as a research topic started to represent as an authentic area of research (e.g., Cusson & Pinsonneault, 1986; Mulvey & LaRosa, 1986). Since this time,

several studies shifted their focus from the onset to the ending of offending behaviour, otherwise known as desistance (e.g., Maruna, 1997, 2001; Uggen & Kruttschnitt, 1998).

3.2.2 Theories of Desistance

Social Control Theory

Hirschi (1969) proposed that an individual engages in offending behaviour when their 'bond' with society is weakened. The theory is based on four elements: attachment; commitment; involvement and beliefs. *Attachment* is considered to be the link between the individual and society. It is suggested that if an individual has a strong attachment (e.g.; family, friends, religion etc.) that they wish to preserve, they are less likely to go against the social norms to put the attachment at risk. *Commitment* refers to the time and energy placed into an institution. It is suggested that if an individual has invested time and energy into school or employment, they are less likely to risk their place within the establishment by acting defiantly in comparison to an individual who is less invested within an institution and is unlikely to experience the same level of loss if they were excluded. *Involvement* pertains to the level of interaction and investment. It is suggested that if an individual's behaviour for example, in school or employment is considered as 'socially acceptable' and they are heavily involved in legitimate activities, they are unlikely to find time to engage in offending behaviour. Lastly, *Beliefs*, relates to the common value system whereby an individual believes in the values and morals of the society they are attached to. For example, a society's norm may be that if one lives in a meritocracy where one who works hard is rewarded and if an individual accomplishes in school and employment, they reap financial benefits and material rewards. Thus, if an individual endorses this belief system, they are unlikely to deviate from the legitimate opportunities such as employment presented to them.

Hirschi's (1969) theory has received significant empirical support (e.g., Krohn &

Massey, 1980; Wiatrowski, Griswold, & Roberts, 1981). However, Empey (1978, as cited in

Agnew, 1985) argued that the theory does not consider how the four elements may act

simultaneously to affect the likelihood of desistance. It was also argued that the theory did

not analyse the relationships among the elements of the 'bond'. The theory fails to

incorporate constructs such as socioeconomic status, ability and significant-others' influence

that are considered to be important in the development of social control. Hirschi (1985)

retorted that the relationship between social class and offending is not important and

suggested that that this relationship may be suppressed by some third, hypothetical

intervening variable.

Self-Control

Gottfredson and Hirschi (1990) argued that people who offend are impulsive risk-

takers with low levels of self-control. It was explained that as the individual has low self-

control, they are less likely to inhibit offending causes of action to fulfil their goals and meet

their needs. The origins of low social control are derived from poor parenting styles and poor

socialisation practices. If a parent fails to control a child's aggressive behaviour, a child does

not learn self-control. The authors stated that if the child fails to learn self-control by the age

of eight years, they are likely to lack the same level of self-control during adolescence and

adult life. The propensity to offend is therefore instilled early in an individual's life, but

remains relatively stable across the lifespan. Gottfredson and Hirschi (1990) noted that

offending can cease over time as socialisation is a lifelong process and is open to influence.

They added that although socialisation can reduce an individual's levels of impulsivity, if an

individual has experienced low control from a young age, they continue to present with low

control even in a group. Gottfredson and Hirschi (1990) concluded that significant events

such as marriage, children and employment make limited contributions to offending behaviour, as offending is determined by self-control which is determined at a young age.

Gottfredson and Hirschi (1990) provide little evidence to explain why male and female offenders eventually cease offending except that whilst offending behaviour remains relatively stable over the life-span, the opportunities to offend over time become less frequent. Gottfredson and Hirschi's (1990) argument has caused debate in the field and a review of the competing theories of desistance (Ezell & Cohen, 2004) found little evidence to support Gottfredson & Hirschi's (1990) theory.

Age-Graded Theory of Informal Social Control

Sampson and Laub's (1993) work is an extension of Hirschi's (1969) social control theory. Sampson and Laub (1993) explain desistance by emphasising the importance of high-quality bonds between an individual and society. The researchers outlined stages of life that pertain to their theory. The stages are: a) at onset and up to age eighteen, structural factors (e.g., low socio-economic status) and individual differences (e.g., conduct disorder) can affect how an individual develops social ties in adulthood. As an adolescent, poor relations with family (e.g., lack of supervision) or at school (e.g., poor performance) and association with antisocial peers are causal influences of offending behaviour; b) cumulative continuity (ages 18–25) is the process by which antisocial activities can disrupt social bonds at school and with family and also hinder the development of adult social bonds. Offending may continue into adulthood, resulting in weakened social bonds. Cumulative continuity can be reinforced through re-arrests and convictions. This happens as the individual internalises the label of offender and continues to engage in acts of aggression or antisocial behaviour. This stigma can lead an individual to experience difficulties in re-establishing high quality bonds with pro-social peers and institutions such as employment and lastly c) career criminals (ages

25–45) develop as a result of an individual's difficulties in re-establishing bonds with society. Adult offending is a result of weak attachments at work and with partners in intimate relationships. The theory stated that those who desist from offending develop good family bonds and/or have stable employment.

Sampson and Laub's (1993) longitudinal study followed male offenders until they were 70 years old. The researchers found that social bonds with family, school, employment and peers mediated the relationship between cumulative social disadvantage, personality traits and offending. The researchers concluded that changes in an offender's relationship with various institutions are a key to understanding engagement in offending over the life course.

Research has lent support to the theory in the context of marriage and employment. For example, Sampson, Laub, and Wimer (2006) found that in their sample of male offenders, marriage led to a 35% decrease in offending behaviour. Some studies have also found that the quality of the bond in marriage also reduces reoffending (Petras et al. 2010). Forrest and Hay's (2011) longitudinal study of 1200 male participants showed that marriage is associated with changes in self-control. The researchers concluded marriage creates stronger bonds between a couple and a family that has a profound effect on desistance from crime in men. With regards to employment, Skardhamar and Sauvolainen's (2014) sample of ex-offenders found that a subset of offenders (2%) who became employed during an active phase of the offending career, experienced substantial reductions in their offending thereafter. In cases where offenders continued to offend, it was found that while employment was not associated with a decrease in likelihood of reconviction, it was strongly correlated with longer time out of prison for employed offenders, compared with those who were unemployed (Tripodi, Kim, & Benda, 2010).

Although Sampson and Laub's (1993) work has received popularity, the theory is not without its criticism. For example, previous work by Gottfredson and Hirschi (1990) counter that life events such as marriage, children and employment make little difference to offending as offending is determined by self-control which itself is determined by early childhood experiences. Sampson and Laub (1993) however maintain that offending is open to influence resulting from informal social control. Furthermore, they argue that their work enables one to view desistance as a result of a process which stretches over time as opposed to a result of a decision or control.

Dual taxonomy of offending

Moffitt (1993) stated that there are two types of offenders: life persisters and adolescent limiteds and they both have unique factors which drive an individual toward offending and the desistance process. According to Moffitt (1993), life course persisters experience neurological problems, such as learning difficulties and they can be difficult for parents to cope with resulting in poor parental bonds. The individual can experience behavioural difficulties as an adolescent resulting in exclusion from social settings. Such rejection by family, peers or teachers can weaken an individual's social bonds and development. Early antisocial behaviour can be considered as an indicator of future offending. Furthermore, due to their neurological difficulties, life course persisters can struggle to apply alternative solutions to their difficulties and continue to offend in other settings such as relationships, education and work, further weakening their social bonds.

Unlike life course persisters, adolescent limited offenders start offending from around the age of fourteen and cease by the age of nineteen or twenty years. Their offending is relatively minor and situationally-specific. Moffitt (1993) stated that adolescent limited offenders do not suffer from neurological deficits and have the ability to form social bonds.

Their offending however is linked to the gap between social maturation and desires and age. Their young age restricts them from engaging in adult behaviour they want to experience such as drinking or sex. These acts can lead the adolescent limited offenders to be influence by antisocial peers or life course persisters, which can increase their risk of offending. However, as the adolescent limiteds have social skills, social bonds developed early in life and academic achievement, they are able to refrain from offending behaviour and reintegrate back into society.

Research has investigated Moffit's (1993) taxonomy and found that participation in offending varies by age. For example, Sweeten, Piquero & Steinberg's (2013) longitudinal study of serious youth offenders found that offending dropped by 69% from the ages of 15 to 25 years. The researchers concluded that offending in adolescence and early adulthood is attributable to developmental changes such as social control (employment and marriage), procedural justice (perceptions of the legitimacy and fairness of the legal system), learning (gang membership and exposure to antisocial peers), strain (victimisation and relationship breakup), psychosocial maturity (impulse control and moral disengagement) and rational choice (costs and rewards). In another study, Farrington, Ttofi, Crago, and Coid (2014) explored the prevalence and frequency and desistance of offending in a longitudinal study whereby participations were followed from age 8 to age 48. The results showed that age correlated with desistance from crime as the probability of offending decreased from 86% at age 10–14 and 81% at age 15–18 to 44% at age 27–32 and 18% at age 42–47.

In another study, Ezell and Cohen (2005) examined patterns of offending in ex-offenders and found a group of adolescent-limited offenders. Although their study supported Mofitt (1993) by identifying a group of individuals whose offending continued during their adolescence, they also found six different types of persistent offenders, rather than the one Mofitt (1993) had predicted. Furthermore, these six groups did not offend as persistently as

Moffitt's (1993) theory predicted. It would therefore appear that there are additional life persistent offender types which are not taken into account by Moffitt's (1993) taxonomy.

Social capital

Hughes (1998) found that participants deviated from the 'pathways' of offending and recognised that certain 'turning points' such as age, concern for children, fear of physical harm or imprisonment and stable employment marked an end to their offending. This notion of 'turning points' was explored further by Laub and Sampson (2001) who also found factors such as family and employment, otherwise known as 'turning points' are associated with desistance.

Kazemian (2007) however disagreed with the notion of today's modern family as a 'turning point' to desist from offending. Kazemian (2007) argued that the modern family today consists of a single parent, with high rates of divorce and low rates of marriage. It was argued that the notion of family does not have the same value as previously, implying that ties to the family, relationships and children does not have the same impact on the desistance process for female offenders. Kazemian (2007) argued that when researchers such as Glueck and Glueck (1974) conducted their research in 1939, their participants belonged to a different social context than today's contemporary society where family bonds were stronger and divorce rates were low. It was suggested that under such circumstances, social bonds may have played a greater role in the process of desistance from crime.

Cognitive transformation

Giordano, Cernkovich, and Rudolp (2002) argued that the process of desistance involves four stages. These are: 1) a general cognitive openness to change; 2) exposure and reaction to hooks for change or 'turning points'; 3) envision of a replacement self and 4) a transformation in the way the individual views offending behaviour. The researchers reported

the first stage involves an awareness and willingness on the part of the offender that change is desirable and needed, along with a willingness to embrace change. It was explained that the offender's motivation on its own is insufficient as the exposure to opportunity to change is also needed. They argued that the offender sees this opportunity to change as a potential 'way out' from offending and then acts upon it, within the second stage. This leads on to the third stage during which the offender imagines themselves in a new role doing new things. The process is complete when offending is no longer seen as desirable or relevant.

The researchers draw on the evidence of the relationship between offender's schemas and social structures and argue that an individual's creativity and selectivity draws upon elements of the environment in order to affect significant life changes. Farrall and Maruna (2004) lent support to the model as they found that the process of desistance involves an offender's schema and social structures together. Giordano et al.'s (2002) work has also been criticised on the basis that the theory works well for describing individual behaviours, but not society/group behaviours (Burbank & Martins, 2010). Giordano et al. (2002) recognised this limitation and said that motivation is important but not sufficient to desist. The (immediate) social world plays an important role, in particular stigma associated with being an offender.

Self-Identity

According to Maruna and Immarigeon (2004), 'primary desistance' (i.e., ceasing to offend for a short while before continuing to commit further offences) happens so frequently that it does not warrant further study and suggested that instead research should focus on secondary desistance (i.e., a process by which an individual assumes a role of non-offender) as this change is associated with a reorganisation on the part of an individual about 'who' they are and the sort of person they now wish to be.

According to Maruna (2001), desistance can only occur once an individual changes a perspective of themselves. Maruna's (2001) research on using interviews with life course persisters and desisters, showed that there were two common themes of 'condemnation' and 'redemption' between the two groups. It was reported that the persisters adopted a condemnation script, where they were the victims of environment and social circumstances such as lack of access to education, poor family and financial difficulties. These difficulties thereby led them to offending behaviour in order to gain control and also to survive. In contrast to condemnation, desisters endorsed the theme of redemption. The individuals reported a strong sense of self belief and control over their future and present. The individuals contributed their past offending to circumstances they could not control but took responsibility for current and future successes. Based on these findings, Maruna (2001) concluded that those who desist are able to explain and internalise 'why they did, what they did and why they are now "not like that" anymore'. Thus, by developing a credible view of themselves, they are able to move beyond previous identities they had held. Later, Maruna (2007) suggested that by encouraging offenders to partake in community activities such as volunteer and employment opportunities, offenders can improve their self-esteem, accomplishment and purpose. Such opportunities can give offenders the role of a help-giver rather than a passive help-receiver.

Maruna's (2001) work was doubted by his peers questioning the truth in the offenders' account but Maruna (2001) argued that he took interest in the 'false positives' those who due to socio economic and environmental factors should persist in offending but go on to 'make good'.

3.2.4 Female desistance

Most studies examining desistance from crime have predominantly focussed on male offenders (Hirschi, 1969; Laub &Sampson, 2003; Sampson & Laub, 1993).This is because female offenders do not include a large sample size in the studies in order to provide a comprehensive analysis. More recently, research has started to address this gap in the field. When early research explored gender differences and desistance, it was reported that the process of desistance is similar for both male and female offenders (Bersani, Laub, & Nieuwbeerta, 2009; Giordano et al., 2002). For example, Giordano et al.'s (2002) sample of male and female offenders showed that traditional measures of social control (marital attachment and job stability) had insignificant effects on both male and female desistance.

Over the recent years, there has been a debate as some studies have noted differences in the way the desistance process occurs for each gender. For example, research has found that marriage and employment is more likely to cease offending in males than in females (Cobbina, Huebner, & Berg, 2012; Doherty & Ensminger, 2013). It has been noted that family and intimate relationships have a stronger effect on females than on males (Benda, 2005; Cobbina et al., 2012). The results on parenthood suggest that the effects of having children are larger for female offenders than for male offenders (Benda, 2005; Giordano, Seffrin, Manning, & Longmore, 2011).

More recently, studies have started to focus primarily on female participants to explore what enables desistance for this population. For instance, Kraeger, Matsueda, & Erosheva's (2010) ten year longitudinal study of female offenders found that the transition to motherhood is associated significantly with reductions in offending behaviour, substance and alcohol use even when controlling for pregnancy, marriage, sexual activity and contraceptive use. The researchers noted that effect of motherhood was larger than that of marriage for all outcomes suggesting that motherhood is the primary 'turning point' for female offenders to desist from offending. The importance was motherhood has been supported by Benda (2005),

Bakken (2009) and Michalsen (2013). For example, Michalsen (2013) found that in a group of female offenders, parenting was a 'turning point' towards desistance from crime, followed by most recent arrest, and abstinence from drug and alcohol.

Opsal (2012) conducted interviews with female offenders released from prisons and found that employment played a key role in their desistance from crime. The offenders viewed themselves as active participants in the world of work and considered employment as a platform to legally meet their financial needs and to construct a pro-social replacement of themselves. This notion has been supported by Bui and Morash (2010) and Craig and Foster (2013) while others have failed to identify similar effects of employment (Barry, 2010; Cobbina, 2009). It would therefore appear that employment sometimes does and sometimes does not have an effect on desistance, highlighting that employment in itself might not be enough to trigger desistance.

Trotter, McIvor and Sheehan (2012) assessed the impact of services for female offenders following their release from prison. It was reported that when services are holistic, collaborative, understand the female offenders perspective and focus on strengths and the staff are reliable; the process of desistance was more effective. The offenders in the sample reported that services that challenge offenders and focus on their offences rather than their strengths hinder the process of desistance.

To date, the largest study on female desistance has been carried out by Rodermond, Kruttschnitt, Slotboom, and Bijleveld (2016). Their literature review focussed on whether, and if so, how, male-based theories of desistance apply to female offenders. The authors reviewed 44 studies on adult female desistance. Out of these 44 articles, seventeen focussed solely on female offenders. The findings suggested that motherhood, supportive relationships, economic independence, the absence of drugs and individual agency were important for female offenders. On a smaller level, other factors also considered to enable the process of

desistance were: supportive parents, partner and peers; children; marriage; employment; education; fear of punishment; spirituality; good mental health; financial stability and abstinence from alcohol and substance use. The researchers discussed strategies services can offer to support female offenders. It was suggested that released offenders should be supported with housing, financial support, relationships, employment and drug use. It was proposed that female offenders should be supported with forming good quality bonds in relationships and friendships and the ability to take care of children without being overwhelmed by the demands of motherhood. Lastly, it was highlighted that practical assistance with agency and inner motivation to stop offending can also aid the process of desistance.

Summary

The evidence above highlights the importance of motivation to change which is central to eventual desistance. It is well recognised that an individual need to be in at least 'preparation' stage of change in order to feel motivated to make a plan of action to seek help or invest in self-change strategies (Prochaska, DiClemente, & Norcross; 1992). The findings available to date, suggest that possible factors associated with female desistance include motherhood, marriage and employment, however results can vary depending on the sample and procedural designs. At present, female desistance is not a well explored area and caution should be taken when what we know about male desistance is applied to female offenders. Further knowledge in the area can help practitioners to devise appropriate interventions to support female offenders to desist from offending.

3.2.5 The Research Project

The abovementioned empirical evidence suggests that there is paucity in research on desistance in adult female offenders. Taking this into consideration, the current research aims to further the knowledge on desistance from crime in adult female offenders. Rodermond et al.'s (2016) systematic review reported that to date, there are only seventeen published studies in the area. Of these studies, ten are qualitative in nature and seven are quantitative. The research available to date has primarily been conducted in the USA, Australia, Zealand and Europe. The current research will be the first of its kind on adult female desistance to be carried out solely in the UK and to adopt a mixed methodology approach.

The aim of the research is to gather further evidence for the psychological theories of desistance reviewed above and see how these can be applied to female offenders. The current research also investigates the potential impact of an intervention programme with a sample of adult female offenders in promoting desistance from crime. It also explores the views and experiences of a group of female offenders regarding factors related to their efforts to desist from offending. It is hoped that the findings can inform current practice in working in the field of rehabilitation of female offenders.

3.3 Method

3.3.1 Background information on Community Centres and Geese Theatre Company

The data collected for this research was obtained from community centres located in a large city in the UK that offer support and treatment to offenders and non-offenders. In order to investigate the potential impact of an intervention offered to female offenders in their journey to desistance, the outcome data from the Geese Theatre Company were available. Prior to discussing the sample and design and procedure, an overview of the community centres supporting female offenders and of the Geese Theatre Company will be provided. It is

hoped that this information can help to develop a better understanding of the current research and the important role these two services have played in the participants' path to desistance from crime.

Community Centres

Whilst recognising that female offenders need to serve their sentence deemed appropriate by the Criminal Justice System, it is equally important to address the underlying causes and to be aware of pathways to offending in order to support offenders in their journey towards desistance from crime. Corston (2007) suggested that alternatives to custody be used where possible as prison is an expensive and an ineffective way of dealing with female offenders who are not classified as serious offenders (e.g., drug-related offences, assault, property related offences etc.). Corston (2007) recommends that community sentences should be considered as a norm and there should be a development of a wider network of community provision for female offenders and those at risk of offending. As a result, there is now an emerging network of community provision in the form of Centres as an alternative to custodial sentences. Some of the key centres for women in England are Together Women (Liverpool, Salford, Leeds, Doncaster and Bradford); Calderdale Women Centre (Halifax and Huddersfield), The Women's Turnaround Project (Cardiff) and Anawim (Midlands).

The Anawim Centre for example opened over 30 years ago. Initially, the centre mainly worked with vulnerable women in the neighbourhood but over the years, the centre has grown and following Corston's (2007) recommendations, the centre now works closely with prisons, courts and probation. Offenders are referred to Anawim to receive support for their multiple complex needs including substance misuse, sexual exploitation, mental health difficulties and offending behaviour. Anawim supports offenders to address a range of emotional and practical issues and develop life skills to make positive choices. It also offers a

range of treatment programmes to provide alternatives to custodial sentences such as drug awareness, 'stop and think' and 'crisis' programmes.

Studies have yielded promising findings regarding the usefulness of community centres such as Anawim. For example, it was found that when comparing the completed activities required of offenders through orders from court or probation, Anawim had a 3.51% rate of re-offending in comparison to 5.74% in Birmingham and 5.84% in South West Midlands (NOMS, 2012). The results obtained are encouraging and highlight the importance of women's services in the community. Additionally, in 2013; Anawim's study with 47 offenders showed that over the course of an eighteen month period, offenders made significant changes in managing their money followed by offending, motivation and taking responsibility. It was suggested that there was a key relationship between money management and offending, as offenders who learned to manage money more effectively, showed reductions in the need to engage in offending behaviour (Martin & Copello, 2013).

The findings above suggest that Anawim demonstrates that support provided to offenders addresses a range of emotional and practical issues. The monitoring and evaluation process enables Anawim to regularly evaluate its aims and outcomes ensuring it continues to meet its goals and provide the care and support female offenders need in order to desist from offending.

Geese Theatre Company

Over the last few decades, there has been a gradual interest in the usefulness of drama-based work within offender rehabilitation. As drama is inherently interactive, the use of role-plays and skills practice can assist in understanding offending behaviour.

Geese Theatre Company UK was established in 1987 under the franchise of Geese Theatre USA. Geese Theatre Company was one of the first theatre companies in the UK to

specialise in work with offenders. The company works in prisons, forensic in-patient settings, young offenders' institutions, and probation centres and centres in the community. Geese Theatre Company uses techniques such as role-play, imagery, masks and metaphors to encourage offenders to examine their own offending behaviour and to promote the motivation to change and desist from offending. The Geese Theatre Company operates using social learning theory that learning occurs in a social context; cognitive behavioural theory that understanding how our beliefs and attitudes affect thinking, feelings and behaviour and role theory emphasising becoming more consciously in control of our own roles and behaviour toward others.

Geese Theatre Company's work has largely been carried out in prisons. For example, Blacker, Watson, and Beech (2008) examined the changes in male offenders' anger levels before and after completing the Geese Theatre group that focussed on masculinity, power, pride and shame and victim awareness. The results showed participants made positive changes on a measure of anger after the end of the group programme. In a further study, Harkins, Haskayne, Watson, Beech and Sweeney (2009) examined the listening and speaking skills of offenders who find formal interventions difficult and then also participated in Geese Theatre group. The results showed that offenders made significant and positive changes in self-efficacy, confidence in occupational skills and working with authority following their engagement in the Geese Theatre group. Similarly, the Reconnect programme (Harkins, Pritchard, Haskayne, Watson, & Beech, 2011) explored issues connecting with offender's release and a life outside prison. The results showed offenders made significant changes in self-efficacy, motivation to change and confidence in skills to deal better with relationships, alternatives to aggression or offending and self-management and self-control. More recently, the Journey Woman programme (Day, 2013) explored female offenders experience of Geese Theatre group work in a prison. The results showed increased motivation to

change, developing self-esteem, strengthening relationships and increased   problem   solving

skills.

The findings above indicate that drama has emerged as an alternative and potentially

effective treatment for offenders as part of their rehabilitation. It should however be noted

that the positive findings obtained from the above-mentioned research studies do not include

reconviction data. The findings are predominantly based on offenders' self-report accounts

which does not necessarily equate to positive behavioural changes that can be identified by a

reduction in reconviction rates. Despite these shortcomings, Geese Theatre Company has

gained a reputation for its work with offenders suggesting drama has a potential to have a

positive impact on an offender's well-being.

3.3.2 Sample

Participants were recruited from five different locations. Two of these locations were

community centres that worked exclusively with females, supporting their rehabilitation.

Another two settings supported men and women who had difficulties with substance misuse.

The final setting was run by Probation; supporting male and female offenders with

rehabilitation in the community. With the exception of the community centres and the

probation settings, the other settings offered support and treatment to both offenders and non-

offenders but for the purpose of this research, data was collected for female offenders only.

Participants were recruited from the drama groups that took place at the centres. The drama

groups were facilitated by the Geese Theatre Company (otherwise known as the Geese

Theatre group). As the group was offered to offenders and non-offenders for three of the

settings, offenders were identified following participants' self-disclosure in the Geese Theatre

group or through discussions with the participant's case workers and facilitators of the Geese

Theatre group.

In total, there were eight groups and each group had a maximum capacity of twelve group members. Individuals were referred to attend the programme by their case workers or probation officer. Participants were considered to have completed the programme if they attended 50% of the treatment (i.e., attended half of the sessions offered, e.g., five out of ten sessions). The length of the group varied depending on the funding for the group at different centres based on number of individuals referred. In total, 22 participants took part in the study, 45% of the total participant pool. All participants completed a questionnaire as part of the Geese Theatre group; however as one participant did not fully complete the post intervention questionnaire, their data was excluded, so in total this study reports on 21 participants, 43% of the total participant pool. Of these 21 participants, seventeen agreed to take part in the interviews. However, seven participants dropped out due to various reasons (mental health deterioration, emotional problems, relocation etc.) and, as a result, ten interviews were completed in total.

3.3.3 Design and Procedure

Stage 1: Recruitment and Consent

Participants attended a drama group facilitated by the Geese Theatre Company, known as the Geese Theatre group. Participants were informed of the research by facilitators of the Geese Theatre group during the first session of the group programme. Participants were advised that their participation was voluntary. The research and their role as potential participants was outlined and explained and the opportunity to ask questions was provided. Participants were also informed that the researcher would attend a set number of sessions allowing potential participants the opportunity to get to know the researcher and also to ask questions related to the research and their participation. The researcher typically attended three sessions which were session two, session three or four (depending on the length of the

programme) and the last session. In total, the researcher attended six out of eight group

programmes. During the sessions, the role of the researcher was decided by the group

facilitator. For example, the researcher took part in the ice-breaker exercise and a team

building exercise. The researcher also joined the small group tasks where the groups were of

an uneven number. Although the researcher did not actively join in with the exercises, the

researcher supported the group members during tasks for instance guided the group members

to create 'frozen pictures' representing their goals. During the last session, group members

who wished to take part in the interviews approached the researcher. The researcher

explained the purpose of the research and participants' role. If a participant agreed to take

part, they were provided with an information sheet and consent form that was signed and

dated (See Appendix 8). During the same session, the dates and times for the interviews were

arranged. The details of the participant's case worker were obtained from the participant. The

dates and times of the interviews were communicated to the participants' case workers via

email who also reminded the participants of the interviews to ensure these were attended as

planned. Where a participant withdrew her consent for the interviews, the case workers

contacted the researcher via email or telephone. On some occasions, the participants

contacted the researcher themselves via text or telephone from the information provided in

the consent form. The interviews took place approximately four to six weeks following the

end of the group. This time period was considered an appropriate follow up period to allow

participants to reflect on some of the areas explored in the interview. Furthermore, research

also supports that, in order to determine the predictions of research, time should be given for

the enduring effects of intervention to consolidate through a test of time and the demands of

ordinary life circumstances (Sargent, 1960).

As part of the programme, participants were asked to complete a questionnaire

(IOMI) at the start and at the end of the programme (See Appendix 5 and Appendix 6). The

decision to use the IOMI was directed by the Geese Theatre Company to assess the effectiveness of their group programme. The measure was developed by NOMS (National Offender Management Service) who approached the Geese Theatre Company to promote the use of the IOMI in their programme evaluations. As the IOMI is used widely as a measure for evaluating programmes within NOMS, the rationale for the use of the IOMI in this study was that the findings could be added to a large pool of data in order for NOMS to then assess the psychometric properties of the measure. Participants who did not want their questionnaires to be used for the data analysis were asked to complete an opt-out form (See Appendix 7). If a participant did not sign an opt-out form, it was considered that they consented to share the results of the questionnaire for the research. Participants were made aware of the opt-out form during the first and last group session, as they completed pre and post intervention questionnaires respectively.

Stage 2: Data Collection

Quantitative

The IOMI questionnaire was developed by a research team in the UK (Maguire et al., 2014), commissioned by the NOMS. As the IOMI is a relatively new measure of desistance, the authors have started to collect nationwide pool of data through a series of pilot projects with arts and mentoring companies in the UK including the Geese Theatre Company. Despite being a new measure, the IOMI has moderate reliability and validity and was considered suitable for the current research to assess the potential impact of a drama therapy programme with offenders. The IOMI assesses an individual's change over time in relation to key "dimensions" and to the significance of specific "practical problems" in the individual's life. The dimensions part contains 21 items in which responses are made on a five-point scale ranging from 1 (strongly disagree) to 5 (strongly agree). The items are apportioned across the

seven dimensions: resilience, wellbeing, agency/self-efficacy, impulsivity/problem-solving, motivation to change, hope and interpersonal trust. Table 3 below provides an overview of each of the dimensions. Additionally, Appendix 6 provides further information on the dimensions and the interpretation of low and high scores

Table 3

An overview of the dimensions of the IOMI

Dimension	Description
Resilience	An individual's capacity to continue to try, even in the face of setbacks and adversity
Wellbeing	General or overall mental/emotional/psychological health or balance
Agency/self-efficacy	Confidence in ability to make decisions about future and to implement plans bring about change
Impulsivity/problem-solving	Problems with reflection and planning and application of problem-solving skills
Motivation to change	Linked to positive engagement and a key focus is on internal rather than external motivation
Hope	Perceived scope for positive future change
Interpersonal trust	Concerning attitudes toward and connectedness with others

The practical problems contain eight items which cover the following areas: money, employment/prospects, health and fitness, housing, drugs, alcohol, relationships and gambling. In order to assess the potential impact of the group programme on desistance, only the responses on the 21 items (i.e., dimensions) is evaluated while the scores on the practical problems are used by the group facilitators for their own use.

Qualitative

Participants took part in a semi-structured interview. Each interview lasted approximately 60-90 minutes in duration. Interviews were carried out in a private room at the centre between the researcher and the participant. Only one participant was interviewed in her house. This was because the participant no longer had affiliation with her centre and was in employment, which meant access to the centre was not available outside of her working hours. The interview was carried out in the participant's living room when she was alone at the time. All of the interviews were audio recorded and then later transcribed verbatim by the researcher. The interviews were coded using the NVivo programme (software designed for use with qualitative data) and lower level codes were placed with overarching sub-themes.

Interviews were conducted utilising a semi-structured approach which encouraged a narrative response. Open ended questions were used to encourage participants to speak expressively about their experiences and prompt questions were used by the responses given by the participants. This open ended approach allows the researcher to be guided by the responses of the participants, rather than imposing their ideas upon the participants and subsequent data being collected (Braun & Clark, 2013). In addition to this, probing questions were used to develop a greater understanding of a participant's account on the area under discussion. The interview schedule (see Figure 2) provided a guide to the topics being covered in the interview.

Main questions

1. How have you found your contact with the ………. (name) Centre?

2. Do you remember the time when you felt content and in control?

3. Can you tell me what life was like prior to your contact with the Criminal Justice System?

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4. What has been your experience of the Criminal Justice System?

5. Where do you see yourself in the future?

   Probing Questions

1. Could you say something more about that?

2. Can you give a more detailed description of what happened?

3. Do you have further examples of this?

4. Could you tell me more about your thinking on that?

5. You mentioned…. What stands out in your mind about that?

6. This is what I thought I heard…Did I understand you correctly?

7. What makes you feel that way?

8. You just told me about…. I'd also like to know about….

Figure 2: Interview schedule

Debrief

After the questionnaire and interview data were collected, participants were given the option to receive a summary of the findings. For this, they were advised that the researcher could provide feedback either through the Geese Theatre Company or their centre. Participants who gave their consent to share the results of the questionnaire and/or the interview were also provided with the researcher's telephone number and email-address (university address) in the event that they had any questions regarding the research.

Following the interviews, participants were informed that if they found recalling details of the areas discussed in the interview distressing, they had the opportunity to have a debrief session with their case worker. The researcher was in contact with the participants' case workers and was available to discuss this if necessary.

3.3.4 Ethical Considerations and Reflections

3.3.4.1 Ethical approval.

Ethical approval was sought and granted from the University of Birmingham Science, Technology, Engineering and Mathematics Ethical Review Committee on 8th May 2014 (see Appendix 9).

3.3.4.2 Anonymity and Confidentiality.

The only people able to identify the participants were case workers at the allocated centre, facilitators of the Geese Theatre Company and the researcher. Participant's names were only used during the questionnaires and the interview. The names were used instead of a number system in the event that a participant wished to withdraw their data they could be easily identified by the researcher. This was to ensure all participants completed both pre and post intervention questionnaire and to keep a record of participants who took part in the interviews in the event that they wanted feedback or results of the research. For participants who took part in the interviews, when the interviews were transcribed, personal names and any details tracing back to the participant were removed to ensure they could not be identified. Additionally, a pseudonym was used for each participant in the demographic and results sections. Participants were informed that they were given a pseudonym and that quotes may be attributed to that pseudonym in the research report.

In terms of the interview, participants were informed during the recruitment process and before the start of the interview that any information shared was confidential and would not be shared with others *unless* any information they shared placed them or anyone at risk. It was explained to participants that under such circumstances, the researcher had an obligation to share this information with their case workers at the centre and appropriate measures would be taken as necessary by the case worker.

Due to the inclusion of personal details, the completed questionnaires were initially kept in a locked cabinet in the office of the Geese Theatre Company. The only people who had access to the questionnaires were the group facilitators and the researcher. Towards the time of data analysis, the completed questionnaires were kept in the researcher's office at her workplace, locked in a drawer and the only person who had access to the questionnaires was the researcher herself. The results of the questionnaire and the written transcripts were saved on the researcher's personal, password protected laptop computer. All audio files were encrypted and saved onto the same laptop computer after each interview. Only the researcher had access to these files.

On the participant information sheet, participants were advised they could withdraw their data by notifying either their case workers at their centre, facilitators of the Geese Theatre group or the researcher herself. Data could be withdrawn during the course of the programme and up to four weeks after the programme had finished or four weeks after the interview was conducted. If a participant wished to withdraw their data, the questionnaire would be shredded and the information would be removed from the data spreadsheet. In terms of the interviews, the audio recording would be deleted. Any information saved on the computer such as files and database would also be deleted. If, during the interview the participant no longer wished to participate, the interview would be terminated and the recording would be destroyed. As none of the participants withdrew their consent, it was not necessary to take these measures.

3.3.4.3 Risk to participants

The questionnaire required participants to think about different areas of their life which may have caused some anxiety. However, as staff from Geese Theatre Company completed the questionnaire with the participants, were supported by staff to minimise any anxiety.

The interviews involved requesting participants to disclose information about a number of areas of their lives which may have had the potential to result in some distress being caused. Participants were advised at the beginning of the interview that they had the opportunity to pause or terminate the interview or resume it at a later time if they wished to do so. The interviews were carried out at a pace at which the participant felt comfortable. Any issues arising from the interview such as distress, was discussed with the participant and their case worker to ensure appropriate support was given to the participant. This included support sessions with the case worker, access to self-help leaflets or help lines (available at their centre).

3.3.5 Personal Reflections on the Study Process

One of the factors that influenced this research was my attendance in the Geese Theatre groups. Having prior knowledge and experience of working with the Geese Theatre Company, I was able to engage in the group tasks and exercises with ease. This process helped me to get to know the group members and build a rapport with them. This then helped me recruit prospective participants. It is possible that my presence in the sessions helped the participants to get to know me and hence I was not a stranger who wanted to know their life stories for research purposes. Instead, I was seen as a student who was interested in listening to the offender's life stories as this can help them and others offenders to receive the support that they need in order to desist from offending. It was noted that when I was unable to attend the groups at two of the centres, none of the group members volunteered for the interviews. This made me realise the importance of building researcher-participant rapport and the positive effects this can have, when undertaken in a careful manner. Whilst my presence in the group was felt to have a positive influence in terms of being an interested and supportive presence, I was also conscious that my presence may have also had a negative impact

resulting in small sample size and potential for bias. For example, I was conscious that, as a researcher rather than a peer, my presence may have been intimidating for some group members who may have felt that I judged them based on experiences of offending behaviour that they shared with the group during exercises. This may be one of the reasons why some participants may not have volunteered to take part in the research. Additionally, on reflection, my engagement in the group may have unintentionally coerced group members to take part in the research as they may have felt pressured to take part. The participants may have felt obligated to take part as they may have viewed me as a professional or an authority figure.

Furthermore, my involvement as a female researcher may have also influenced the findings to a degree. As I was a female researcher investigating female offending, this was already an area of my interest given my current experience of working with female offenders as a full time practitioner. In my current role as a trainee forensic psychologist, I naturally have a tendency to validate my clients' experiences and support them through their difficult situations by working on problem solving . However, for the purposes of this research and my role as a researcher, I made a conscious effort to try and not divulge in my role as a psychologist and offer solution focussed methods to participants' as they discussed their problems in relationships or employment. This was initially difficult but through supervision, I reflected on these limitations as a researcher. I also learnt that I was contributing to the literature that is relatively new, hence in order to give the research credibility, I needed to separate the two roles and acknowledge that my role was to investigate what contributes to the desistance process in female offending and my role was not to consolidate or solve the participants' problems. Once I understood this, I was able to move forward and continue with the interviews in the role of a researcher.

On one occasion, I needed to break participant confidentiality. During an interview with one of the participants, the interviewee demonstrated hostility and repeatedly made

threats to harm someone close to her. I was concerned and at the end of the interview, informed the participant that I needed to share this information with her case-worker. The participant informed me that the case-worker was already aware of her views of the person she had demonstrated hostility towards. Nonetheless, I shared this information with her caseworker who also confirmed that she was aware of the situation. I felt it was important to share this information as I was not sure whether the participant had intentions to act on the threats or whether talking was her way of dealing with her difficult relationship with that particular individual. The discussions with the caseworker confirmed that this was the participant's way of dealing with that relationship.

Participants who took part in the interviews were open and honest and towards the end, they reported they enjoyed the interviews. Most of the offenders reported that by sharing their life stories they were helping other female offenders in similar situations if the research is able to help the services to provide the most effective rehabilitation package for female offenders to desist from offending.

During the interviews, the participants discussed other psychoeducation interventions they were involved in and I was not aware of the details of these interventions beforehand. This made me aware of the potential impact of the learning from the other interventions on participants and the responses they then provided during the interviews. For example, it was difficult to distinguish whether certain skills participants learnt that helped them in their efforts to desist from offending were a direct result of attending one particular intervention such as Geese Theatre group or a combination of multiple interventions such as Geese Theatre group, 'Stop and Think' programme and Substance awareness programme. It was also difficult to ascertain which intervention may have been more influential without knowing the length or duration of the interventions and whether the participants were a regular attendee of the particular programmes.

The open ended questions for the interview were devised following reading the relevant literature on the theory of desistance. As the aim was to develop an understanding of participants' process of desistance from crime, I wanted to explore what the participants problems areas were that led them to engage in offending behaviour. Based on this information, I also wanted to know how the participants then developed the skills to manage their problem areas and find alternatives to offending in order to meet their goals and to lead a safe and a healthy lifestyle. As the research on desistance highlights the importance of services playing a key role in offender rehabilitation and desistance, I wanted to explore the participants' experiences with their respective centres and of their efforts in supporting participants to desist from offending. Whilst analysing the data, I reflected that the research may have benefitted from learning more of participants' experiences during their childhood and early adolescent years in detail to identify whether their offending had brief periods of 'stops' and 'starts' during these years (and the reasons for this) before they fully engaged in their role of an offender as an adult. This may have then provided evidence to either support or counter the evidence for theories of desistance that focuses on early years such as age graded theory of informal social control (Sampson & Laub, 1993) and dual taxonomy of offending (Moffitt, 1993).

3.3.6 Data Analysis

3.3.6.1 Quantitative data analysis

Data was analysed using the SPSS Version 21 software. The data were analysed using a dependant samples t-test to explore the differences in responses to items on the IOMI questionnaire completed prior to programme attendance and those following programme completion. A significance level of $p<0.05$ was used for all statistical tests.

3.3.6.2 Qualitative data analysis

The data were transcribed and subjected to thematic analysis (Braun & Clarke, 2013). Thematic Analysis allows the researcher to examine themes from the data, addressing the primary research question (Braun & Clarke, 2013). According to Braun & Clarke (2013), the most suitable methods for exploring themes are thematic analysis and grounded theory. As the intention of this research was to explore factors or themes promoting desistance, rather than constructing a new theory from the data, thematic analysis was deemed more appropriate than a grounded theory (Barun & Clarke, 2013). Furthermore, it is advised when conducting grounded theory, researchers should avoid engaging with the relevant literature before conducting the analysis, to avoid analysis being influenced by existing research. Due to the researcher's prior knowledge of working with female offenders and knowledge of desistance in general, grounded theory was not deemed appropriate. Consideration was also given to Interpretative Phenomenological Analysis (IPA) but this was also not deemed appropriate. IPA looks at data with an idiographic focus, and aims to offer insights into how a given person, in a given context, makes sense of a given phenomenon (Smith, 2007). Usually, the participants are expected to have certain experiences in common with one another (e.g. mental illness, professions etc). It is suggested that IPA is most suitable for a small data set (i.e., six or less) to allow the researcher to explore the meaning of an individual's experience (Reid, Flowers, & Larkin, 2005). The participants in the current research however varied in age, demographics and offending. Furthermore, neither the researcher nor the facilitators of the Geese Theatre Company were aware of any experiences the participants had in common as information related to their offending behaviour was not shared by the Centres. Additionally, the research does not specifically explore participants' experiences in great depth but instead focuses on the themes that can help explain desistance from crime. The questions in thematic analysis are guided as opposed to an unstructured and open approach

that the IPA employs. As the questions were in the form of a semi-structure interview, thematic analysis was considered as the most appropriate method of analysis.

At first, interviews were transcribed using orthographic transcription (verbatim) to ensure a thorough transcription of spoken words (and other sounds) was achieved. Each interview was then read by the researcher at least twice for familiarisation. The coding process then began and was completed across the data set. A search for the themes was conducted and then reviewed. After the review, the themes were defined and finalised in the write up stage. Whilst conducting the analysis, Lincoln and Guba's (1985) evaluation criteria of triangulation were applied. For example, whilst reading the interviews, notes were made on how participant responses support some of the theories of desistance. Later when themes were generated, previous notes and current notes were considered to investigate how a particular theme and subtheme may support the theories of desistance. Memos were created to identify how a particular theme and quote (s) may support the theories of desistance. Over-lapping between the sub-themes and their links with the theories of desistance were noted, such as where participants identified certain skills and group programmes that were useful in their journey to desistance. Thus, memo notes were created to separate the skill learnt from the usefulness of an intervention.

In order to ensure rigour in the research, inter-rater reliability was sought. For this, the researcher's supervisors read a script each and also carried out their own coding and identified the themes. There was a good agreement on the evidence of themes derived by the researcher and the supervisors. The supervisors noted some overlap in sub-themes and following a discussion, some sub-themes were merged as one sub-theme or as part of another theme. For example, the sub-themes of 'keeping busy' and 'routine' were merged as a sub theme of 'boredom' in the main theme under 'risk factors'. The inter-rater reliability helped control for researcher bias to a good degree. It also ensured that the themes were driven from

the data rather than by the researcher's theoretical interests and therefore was reflective of theoretical thematic analysis.

3.4 Results

3.4.1 Results from Quantitative data

Only participants with a history of offending behaviour and who had completed measures during both time points (pre and post intervention stages) were included as the purpose of the research was to assess the potential impact of an intervention on offenders. The final sample consisted of 22 participants completing measures at both time points. However, one of these participants did not fully complete the end of intervention questionnaire. Her data was removed and the final number was 21.

Demographic Information

The current research evaluated eight groups at five different centres. At the time of commencement of participation in the research, participants' ages ranged between 19 and 65 years ($M = 37.5$ years). Ninety percent of the participants were Caucasian, and 10% were African-Caribbean. Further information of the group is provided in Table 4 below.

Table 4

Participant information

Centre	Number of programmes facilitated	Total participants	Number of participants completed the questionnaire (offenders only)
Community centre	4	28	9
Probation centre	1	3	3
Centre for people with substance misuse difficulties 1	1	6	6
Centre for people with substance	1	6	1

misuse difficulties 2*			
Centre supporting rehabilitation of women*	1	6	3
Total	8	49	22

Offenders and non-offenders participated in the group

Findings

The IOMI consists of seven dimensions: resilience, wellbeing, agency/self-efficacy, impulsivity/problem-solving, motivation to change, hope and interpersonal trust (a detailed explanation of each dimension can be found in Appendix 6). In brief however, with the exception of the impulsivity/problem solving dimension, high scores on the remaining dimensions reflect a positive change whereas low scores imply ongoing difficulties in the specified dimension. With the impulsivity/problem solving dimension, low scores suggest that an individual has good impulse control whereas high scores means that an individual has difficulties managing their impulses.

Data were missing for some of the dimensions and this was taken into consideration when inputting the data for analysis. The missing data was identified as "999" and this was applied to two participants only for two different dimensions, both during the post intervention stage. As a result, they were not included in the data analysis for the identified dimensions.

Although the sample size was small, the data was normally distributed and met the assumptions necessary to conduct a parametric test. The t-test is known to be robust and as the data met the assumptions, a parametric t-test was used instead of a non-parametric alternative such as Wilcoxon. Table 5 shows the results in detail. On average, participants scored higher on the hope dimension following the programme and this change in score was found to be of high statistical significance ($p < 0.001$). Similarly, highly significant

differences/improvements in scores pre and post programme were found for interpersonal trust ($p < 0.002$), agency/self-efficacy ($p < 0.01$) and well-being ($p < 0.02$). A significant improvement was also found in the levels of motivation to change ($p < 0.024$) and impulsivity/problem-solving ($p < 0.018$).

The results were not positive for the resilience dimension ($p=.193$). It is hypothesised that as this dimension consisted of only two items and there are some concerns of its reliability and validity, this may explain why this dimension was not significant. The psychometric properties of the measure are discussed in detail in the next chapter.

Table 5

Results of the IOMI

Dimension	Pre Mean (SD)	Post Mean (SD)	t	Df	Sig (2=tailed)
Hope	10.21 (2.44)	12.47 (2.07)	-3.56	18	.001*
Trust	14.22 (2.31)	16.17 (1.72)	-3.61	17	.002*
Agency	10.25 (1.99)	12.00 (1.39)	-3.77	19	.002*
Wellbeing	9.05 (2.54)	11.35 (1.69)	-3.54	19	.002*
Impulsivity	9.15 (2.76)	8.20 (3.05)	2.59	19	.018*
Motivation	12.00 (2.16)	13.00 (2.03)	-2.47	18	.024*
Resilience	6.20 (1.77)	6.80 (1.64)	-1.35	19	.193

* p<.05

In summary, the dependent samples t-tests indicate significant improvements in six of the seven dimensions. Of the six dimensions, t-tests indicate the greatest improvements in the areas of hope, interpersonal trust, agency/self-efficacy and well-being. There was also a significant improvement in the levels of motivation to change and impulsivity/problem-solving.

The results suggest that at the end of the group following completion of the programme, participants had developed a new sense of hope which can be considered as a catalyst for a number of other changes noted in the other dimensions. Participants reported feeling more connected to a wider range of pro-social people and reported having a higher

sense of self-worth and confidence. Towards the end of the programme, participants reported an increased confidence in their own ability to make decisions about their own future and to implement plans that they make to bring about change. Participants reported reduced levels of impulsivity and a self-reported increased ability to plan and think through options and consequences prior to acting out in a situation. Lastly, results also suggest that participants reported they had developed motivation to change their problem behaviour (i.e., offending) and they reported that this was reflected through increased levels of engagement in interventions or specified areas of work.

3.4.2 Results from Qualitative data

A total of ten participants took part in semi-structured interviews, a number considered adequate for the purposes of thematic analysis (Braun & Clarke, 2013). The participants ranged between 23-52 years, with a mean age of 34.1 years. All participants had a forensic history for predominantly violent offences (50%) and shop-lifting (50%) with 30% having a history of both violent offences and shop-lifting. Other offence types included driving (10%), fraud (10%), child-neglect (10%), drug-related (10%) and arson (10%). Sixty percent of the offenders were Caucasian, 30% were African-Caribbean and 10% were Asian. Seventy percent of the offenders were mothers and of these, 40% were single mothers. In terms of the marital status, 40 % were separated, 40% in a relationship and 20% were single. Table 6 provides demographic information of each of the participant. For the purpose of this research, participants' names have not been disclosed and instead pseudonyms are used.

Table 6

Participant information for qualitative data

Name	Age	Offending history	Ethnicity	Marital Status	Children under 18

					(Yes/No)
Rosa	27	Shop-lifting, wounding	African-Caribbean	Single	Yes
Amy	37	Assault, shop-lifting	Caucasian	Separated	Yes
Gina	23	Shop-lifting, driving offences	Caucasian	In a relationship	Yes
Rachel	52	Assault, shop-lifting	African-Caribbean	Separated	Yes
Monica	25	Shop-lifting, robbery, theft	Caucasian	In a relationship	Yes
Phoebe	31	Fraud	Caucasian	Single	Yes
Carrie	32	Assaults, child-neglect	Caucasian	In a relationship	Yes
Miranda	42	Drug related offences	Caucasian	Separated	No
Charlotte	43	Arson	Asian	Separated	No
Samantha	29	Assault	African-Caribbean	In a relationship	No

The aim of the qualitative analysis was to develop an understanding of the experiences of female offenders in order to consider what is associated with desistance from crime. From engaging in, listening to, transcribing, reading and re-reading the interviews and subsequent transcripts, it became apparent that the process of desistance is impacted by six main themes (see Table 7).

Table 7

Summary of themes and subthemes occurring from thematic analysis of semi-structured interviews with female offenders

Theme	1. Skills and attributes	2. The usefulness of programmes	3. Support	4. Purpose driven life	5. Risk factors	6. Consequences

Subtheme						
	1.1 Insight (*n*=8)	2.1 Geese Theatre (*n*=10)	3.1 Family (*n*=9)	4.1 Education (*n*=4)	5.1 Antisocial peers/partners (*n*=7)	6.1 Disappointing family and community (*n*=3)
	1.2 Positive outlook (*n*=5)	2.2 Parenting (*n*=4)	3.2 Intimate relationships (*n*=3)	4.2 Job or Volunteer (*n*=9)	5.2 Boredom (*n*=9)	6.2 Losing children (*n*=7)
	1.3 Relaxation and mindfulness (*n*=5)	2.3 Substance Misuse (*n*=3)	3.3 Positive peers (*n*=10)	4.3 Positive role model (*n*=4)	5.3 Urges to reoffend and instability (*n*=10)	6.3 Not meeting future goals (*n*=4)
	1.4 Assertiveness and Confidence (*n*=5)	2.4 Domestic Violence (*n*=2)	3.4 Professionals (*n*=9)	4.4 Family and children (*n*=5)		6.4 Prison or Court (*n*=5)
	1.5 'Stop and Think' (*n*=3)	2.5 Counselling (*n*=2)	3.5 Spirituality (*n*=3)			
	1.6 Talking to others (*n*=5)					

Theme 1: Skills and Attributes

This theme looks at an individual's ability to gain an accurate and a deep understanding of issues related to their offending and well-being. This allows an individual to process the thoughts and feeling to know something essential about that particular matter. Effective coping skills mean behavioural and psychological efforts that an individual employ to reduce stressful events or problems.

1.1) Insight

Participants commented that an internal drive led them to take action to change their offending behaviour. Participants noted that when making such changes, they needed do this for their own benefit rather than for others because it is an expectation made of them by

authority figures (such as judges and probation officers) or institutions (such as centres and court). One participant reported:

Through personal change...wanting to change myself rather than being pushed wanting to change. I've actually wanted to this time round and you know yourself that people will only change if they want to rather than being pushed to change so that's what's been different this time round (Monica).

It was suggested by another participant that in order to change, one had to recognise the problem "the first step is that.... you erm admit to it that your life has become unmanageable because of drugs and alcohol…" (Gina).

It was also put forward that along with the motivation to change, it was important to accept the help of others. Participants, who reported this, were previously non-accepting of the support but this time, psychological factors such as motivation to change assisted them to acknowledge the need to accept help in order to change their lifestyle:

I want help so I have to talk about it. So I made my mind up that I wasn't going to be ashamed to tell people. You know that I am here [centre] for shop-lifting, I'm here for this, I'm here for that and I find that if I, I feel that if I hide it all in, I wouldn't have got the help from the centre Rachel).

1.2) Positive outlook

It was reported that in order to lead an offence free lifestyle, they needed to view their lives in a positive manner. The participants said that being positive gave them hope and courage to desist from offending. One of the participants reported "Yes, since engaging [at centre] I feel I have more control over my life... I see my life in a positive, more positive aspect... I feel there are prospects out there for me now" (Rosa) and "good things happen to

good people.... also bad things happen to good people...but being positive it all helps so I'm just trying to live that way" (Gina).

1.3) Relaxation and Mindfulness

It was highlighted that relaxation and mindfulness techniques helped the participants to manage their thoughts, cravings and urges associated with substance misuse and offending. It was highlighted that these skills also helped them deal with day-to-day stress linked with offending. One participant reported "I don't know but there's summat about it [mindfulness] that calms me down and I think coz the stress I am going through with the kids, it's something that calms me down" (Carrie). It was identified by another participant that relaxation and mindfulness helped her connect with herself which enabled her to look after her children better and also deal with stress in a calmer manner:

> It's [art] chilled me out… It's given me a break from just at home so that's what I've got from coming here to relax and be a bit me more coz I need my own space which I obviously didn't have that before …. I know it doesn't have to now and I can do my own thing in life" (Phoebe).

1.4) Assertiveness and Confidence

Participants reported that assertiveness training helped them to stand up for themselves against those who can have a negative influence on them which can lead to manipulation and subsequent coercion to engage in offending behaviours. One of the participants said "I am learning not to be a people pleaser...learning to say 'No' which has been a hard thing" (Miranda). It was also recognised that learning to speak up in large crowds or with strangers helped boost confidence and self-esteem which subsequently gave the participants an ability to stand up for themselves:

Once I'm sober I go quiet and not confident. Say somebody said something to me...you know I'd clam up...yeah...like go red in my face. I used to do that...yeah but now I walk around the shop and say 'hi'. Now I know I am doing well. I can talk to people now (Amy).

1.5) 'Stop and Think' Programme

'Stop and Think' programme helped the participants to stop acting on their impulses. It was reported that they now think of the consequences and impact of their behaviour before acting on an urge or strong emotions such as anger. For instance, one of the participants recognised a risky situation and used the skills taught to manage the situation, demonstrating the ability to learn and put the skills into practice in her process of desistance:

It seemed to me that people who were on that course [crisis] were still offending, still shop-lifting...but I did see it as a red flag situation as to how easy it is to be roped into something you don't want to do but I actually went in to see my probation officer about it and I told her that these things are happening and that I don't think it is good for my rehabilitation to be around these people when I am so far ahead and I have gone so far...and my probation officer did listen to me and did take it into consideration and that's when she put me onto the Geese course...so it was dealt with effectively (Monica).

It was also highlighted that one of the skills associated with 'stop and think' included self-talk. The participants recognised that self-talk helped them to calm down and also gave them thinking time instead of making an impulsive decision that can have adverse consequences. It was reported "I just tell myself that I've got too much to lose and I'm the person who does not like to let people down" (Rachel).

Two of the participants realised that when they have not consistently applied the 'stop and think' skills, this has resulted in relapse in substance use and/or offending behaviour; highlighting the importance of consistent application of skills:

> I was doing so well…. and I then went back [shoplifting] and got caught and went to court and then when I was in court and they had to phone here [centre] coz they found out that I was on probation…and when I came here and I had to face the music. They said "that's what we are here for Rachel". And I said "yeah I know" I just felt so bad coz they [centre] helped me…I just went out and done what I done (Rachel).

1.6) Talking to others

Participants commented that talking to others helped them to deal with their problems better. They said talking helped develop perspective-taking and solution focussed methods, hence was considered to an important skill they had acquired and learned to use. One of the participants commented "I've had the urge, the need...but I have the tools that they have given me... I can put the phone up and phone my case worker or my probation officer" (Rachel). It was also recognised that as participants gained an insight into their difficulties, they felt more confident at seeking support from others, in particular from their peers those who have been through similar experiences as them. For example, one of the participants stated:

> Before I used to say "I'm alright, I'm alright"…. put on a front and put on a mask...being here [centre] I am more confident and I am beating the addiction and I am in recovery. I'm starting to understand it more as... the lie can't hide a truth... so you know talking to someone like on my level that has been there where I am… I feel more comfortable and feel they are on my side (Miranda).

Theme 2: The Usefulness of Programmes

While the 'Skills and Attributes' theme highlights the aspects of the programmes participants found important to desist from offending, 'The Usefulness of the Programmes' theme indicates what participants felt they learnt from specific programmes. This theme focuses on how specific psychological programmes can help an individual to learn the skills needed to problem-solve a situation or to develop a deeper understanding of self.

2.1) Geese Theatre Programme

Participants stated that the Geese Theatre group was an important programme in their efforts to desist from offending. The interactive style of teaching was praised in helping participants to develop skills such as self-esteem and confidence that they were previously unable to apply from the traditional class-room methods or talking therapies:

> It [Geese Theatre group] helped me bring my confidence back. I'm not quite there yet but it was very good coz I had low confidence and low self-esteem.... compared to what I used to be like years ago… when I look at my pictures when I was on drugs and now when I am not on drugs now the pictures show the way my face is now and stuff...but Geese has kinda made me happy again (Gina).

> I think the way they [Geese] laid out the exercises we did was very very profound...very clever… I learned when we spoke about it afterwards, your thoughts and views come out about the exercise which you didn't realise and you're like "oh my god. This is what they [Geese] were trying to explain!" We did it in a therapeutic form so I found it beneficial (Charlotte).

It was reported that the group was fun and participants learnt to address difficult situations in a creative manner; one participant commented "it was more active and yeah…you do role-plays in there…you look at the masks, what them masks mean and you start to act like them people in there [masks]" (Amy).

2.2) Parenting programme

Participants who endorsed the importance of the parenting programme, said that the programme assisted them to reflect on their parenting style and how to make the relationship with their children better:

> I have more time for her [daughter]... I've learned new things.... how to have a relationship better with my daughter and simple things. If they draw you a picture and I was washing up and she said "mummy look what I've done" and I am not looking and I say "that's nice". I didn't realise that she must be feeling "why is she not looking at my picture but she tells me it's nice?" but now I will look at it and I will be like "oh what's that you've drawn?" and I will get her to explain the picture and it makes her so happy. I wouldn't have done that before drugs so I've learned new things (Gina).

> I know that with my elder child...when he has the games on or I am on the phone and I am pretending that I am listening to him and I am not even listening to him...it shown me things like little techniques of what I can do to improve the way that I care (Phoebe).

2.3) Substance misuse programme

Participants commented on programmes which increased their awareness of alcohol and substance misuse. It was highlighted that programmes such as detox and twelve steps helped them combat their addiction and related offending behaviour:

> I've learnt in the NA [Narcotic Anonymous]. So if you sat me down as a drug-addict.... I'm actually just going to say it "you can do it", "you can do so much better", "get clean" and that and that....and that's what I wanna do there [neighbourhood] (Gina).

> When I first come in [substance awareness group programme] and done...like "say goodbye to our addiction". So it was like a grieving process...erm...my drink was my

best friend inside me and it was like losing a part of me...so it was a hard group (Miranda).

2.4) Domestic Violence programme

It was reported by the participants that the domestic violence programme taught them how to keep themselves safe in the future by picking up on the signs of manipulation, pressure and inappropriate partners. This was endorsed by offenders who engaged in offending with partners who introduced them to illicit substances and behaviours such as shop-lifting and drug-related offences.

To be fair the domestic violence course teaches you the signs of violence. Because when I got into that relationship, you know when you are getting abused and you know.... it doesn't mean that it is easy to walk away coz that's why people stay in domestic violent relationships…. I understand what it's [domestic violence course] trying to do. I was just doing it to try and understand a little bit more.... of his side of it... the mistakes.... I was trying to understand why he was like that (Gina).

2.5) Counselling

Participants said counselling helped them to address trauma and other emotional difficulties relevant to their offending:

With the counselling I am learning to let go of some of my past. I've still got scars to show but I am learning to deal with it and let it go so gradually...the more I can do that bit, the more I can deal with life (Miranda).

Another participant reported "counselling you know for myself to understand my emotions, emotions that are damaged and having to be totally on my own again and erm...kind of find myself again to be fair to find out who I am" (Charlotte).

Theme 3: Support

This theme looks at participants personal support network. Supportive individuals endorse qualities such as empathy and care that allows one to build trusting relationships. Having a good support network can make an individual feel accepted. It also gives them the strength to deal with difficult life situations in a safe manner without resorting to behaviors that can be viewed as antisocial.

3.1) Family

Participants discussed relationships with their parents and siblings. They identified it was important to have good relationships with them as family members supported participants in looking after their children:

> Some of them [women in groups] had no family ((pause)) I thought that was quite
>
> isolating I dunno how they will cope and I have mine and I am just wasting the time
>
> that I've got together ((pause)) …so I wanna make the best of my family now... and
>
> that means me supporting them and they supporting me". (Rosa).

Children were considered to be an important focus in participants' journey towards desistance from crime. For some participants, older children supported the participants with recovery from substances and desistance from crime:

> I talk to my kids everyday… I have to always tell them that I love them coz obviously
>
> anything can happen either way. So we are close and they stuck by me ... been
>
> through hell. I'm surprised that she [daughter] still loves me. Not many mums get that
>
> second chance and my kids have given me that second chance and I love them
>
> (Miranda).

3.2) Intimate relationships

Participants identified the importance of healthy and appropriate relationships featuring non-violence, equality and good communication:

> Obviously my partner I am with, you are a different type of person than he [ex-partner] is, he [current partner] wouldn't put me in that situation [domestic violence, offending] for me to be you know what I mean… to be back in the situation [domestic violence]" (Samantha).

It was reported by another participant that her long-term partner was a positive influence on her and she received emotional support from him "We are happy, even now, we are still happy. This lot [social services] has put a strain on our relationship…but we are stronger than what people think. We are stronger together and we are still happy" (Carrie).

3.3) Positive peers

Participants said positive peers deterred them from substance misuse and offending. They reported these peers gave them the appropriate emotional support they needed during a crisis. Some of the participants made friends at their centres and to-date continue to support one-another. It was reported "I see couple of group outside of here [centre].... There are no drugs or alcohol around seriously... I've made friends and they are good people that nice people so.... I see....four people here and that's nice" (Gina). Another participant commented that she made friends in a group programme and they continued to support one another even after the group had finished indicating development and maintenance of appropriate friendships "It [WhatsApp group] could be something silly like "I did this today" or "I am feeling a bit low" or "things are getting on top". It's just words of comfort and erm...listening (Charlotte).

3.4) Professionals

The participants explained the importance of support they receive from professionals such as police, probation officer, doctors, case workers or group facilitators:

If I hadn't been here [centre] and people [staff] believed in me…I don't think I would have managed to do it. My probation officer was very comforting on the matter so I found that people really believe in me and that gives you a belief in yourself so it's a very accomplishing feeling (Monica).

There is a certain police man over the years me and him have become like alright. So I used to talk to him about everything and I used to say that I want to stop [shoplifting] but there is nobody that I feel that could help me. The last time that I got caught[shop-lifting] he turned up at court and he...erm...introduced to the judge that he wants me to go to [centre] and it's helped me a lot because I don't shoplift no more (Rachel).

The participants reported they valued the non-judgemental approach of the facilitators and case workers. It was reported "yeah they were all [Geese staff] perfect....they encourage me …yeah they all encouraged me so yeah they were all nice" (Samantha).

Her [caseworker] experience alone has helped me and … I look up to her sort of thing and she helped me a lot without realising that she was so yeah it's good to see that there are people out there willing to help (Monica).

3.5) Spirituality

The participants said they received support from a place of worship such as a church. This provided them with a sense of belonging and it was noted that the beliefs were incompatible with offending behaviour. In addition, it gave them insight into the impact their behaviour was having on themselves and their loved ones:

I meditate and things like that erm... I actually received messages through meditation that my life cannot go on like that [offending behaviour] where I am not helping nobody, I'm being selfish and greedy and there are people who get hurt through the process i.e., me, my child, my family. A lot of people are affected by it and I just didn't want to go down that road of self-destruction so to speak and I thought it was time to rebuild my life sort of thing (Monica).

Another participant also recognised the importance of having association with the church in terms of desistance from crime:

I know that if I start going to the church again, I will be on the straight road again. I am also a great believer in God coz I was bought up in a church. I just went down for a little while you know but I've always believed that there is a God up there you know (Rachel).

Theme 4: Purpose driven life

The theme refers to a the development of a belief system that supports the view that one's life has positive meaning and function in society; a belief that can improve an individual's well-being and, ultimately, promote pro-social behaviour. Such purpose could be linked to academic achievements (i.e., gaining knowledge and qualifications), employment (i.e., gaining a place in society and being financially independent), being a role model for others and having a positive relationship with family (i.e., gaining meaning/purpose in life by being a good parent, child or sibling).

4.1) Education

The participants reported they wanted to focus on education as this gave them a clear direction for their future. It was commented "I'm actually going to the university to study psychology …and work out my psychological problem and that's to why [offending] it was

an addiction and things like that to understand it more" (Monica). Another participant recognised the importance of learning a skill that can become part of a potential employment opportunity. It was commented "yeah yeah I joined a sewing class here [centre] as well ... I find that very good coz I can see my results ... I can see where my effort is going and I can see the results" (Rosa).

4.2) Employment or Volunteering

Employment or volunteer work gave participants a focus and a structure to their day and, in some cases, helped them towards developing their future goals. Participants reported "I am doing my cleaning work now. I've done my five courses there [centre] yeah. I completed all five yeah I've now changed from that to going to work" (Amy). Another participant identified that volunteering provided a structure to her day "I just wanted to keep myself in a routine erm...because I came out of a domestic violent relationship…I have had to rebuild and start all over again. Volunteering was one thing that helped me keep in routine" (Charlotte).

With regards to the future, it was reported that a job or volunteer opportunities gave participants a sense of accomplishment which they had not had for a very long time. It was commented by one of the participants "I've done a lot of office work so if I was to go back it'd be office with the agency something like that coz I always did office work" (Phoebe).

4.3) Positive role model

The participants commented they felt it was their purpose to help other people to learn from their mistakes and not get drawn into offending behaviour. It was highlighted that schemes such as peer mentoring and informal talks with adolescents allowed them to encourage young people to stop and think and to try and lead an offence free lifestyle:

I've already done my Level 1 mentoring and I'm doing my peer mentoring, and I kinda mentor her [friend's daughter] outside by saying stuff like "you shouldn't go out drinking" and … "go out and get a job, college" …I do find myself guiding people in the right direction and I am a good example that people can change (Monica).

I'm looking to do peer-mentoring or coaching with addicts. If I have something that can really help them [addicts] and realise that...if they are younger and think that "she's done that all her life. She's older now and I don't want to be like that when I am older. I want to have my life" (Miranda).

4.4) Family and children

Repairing and maintaining family relationships was important for the participants. Additionally, having their children was significant in having a focus to desist from offending:

I need to have a purpose to get up in the morning. I need a structure in my life...I have the structure and I have my kids, I got family and now that I am on my own, I need to know that I have something worthwhile (Miranda).

I am trying to work on the relationship with my mum coz that's the one that erm more strained out of the two ... yeah well I've been told and I think that if I improve my relationship with my parents and my family and everybody else then I won't need to turn to these drugs and substances (Rosa).

With regards to children, it was reported that mothers wanted to demonstrate to authorities such as social services that they can appropriately care for their children. It was commented "start off having my kids on the weekends...and then eventually end up getting them back. I'm just in the middle of...erm...seeing me third. And save up some money, go abroad...just be normal again. A normal happy family" (Amy).

Theme 5: Risk Factors

A wide range of risk factors for offending were noted by participants. These problem outcomes can be derived from psychological, family, community or cultural influences and are associated with a higher likelihood of a specific problem occurrence.

5.1) Antisocial peers/partners

The participants recognised the negative impact that antisocial/pro-criminal peers or partners can have on their behaviour. Participants commented on the need to stay away from people who can manipulate them, pressure them or take advantage of them which could result in inappropriate and violent relationships or friendships that can result in substance use or offending:

> I'm a people pleaser you know without the drug and alcohol...I'm a people pleaser…I like to make others happy...I like people to like me and if that means doing things that I shouldn't do it, I've done it. I wouldn't do it now but I have done" (Miranda).

> I am not willing to let anyone in my life if they are not going to have my best interest. And most of these men that I am going to encounter are not going to be beneficial to me ... I am not having that as an option in my life. To bring me down coz if I am going to be bought down its going to have an effect on my son and I'm not having that over me (Rosa).

5.2) Boredom

The participants said keeping their mind occupied was important as an empty routine triggers boredom that can lead to urges and cravings for illicit substances and offending. One of the participants reported "I've gotta keep busy coz if I'm not, I'm just either stressing

about my kids or...I'm just bored. I can get bored really, really easy...so I have to keep myself busy all the time" (Carrie). It was also commented by another participant:

> I just occupy myself...even if it was to come downstairs and mop the floor twice, vacuuming. I used to clean my room so if I get bored, I'd clean my room...I stay focussed... I go outside yeah, go on the computer, talk to my mum on the phone and occupy myself and seven in the evening Emmerdale is on ((laughs)) and I know that's on and it keeps me occupied… then have a shower...put my pyjamas on...and then its time for bed (Amy).

5.3) Urges to reoffend and instability

Problems with housing and dependency on alcohol and illicit substances were identified as key sources of instability for the participants and this had the potential to lead to reoffending. In addition, the emotions experienced as a result of successfully controlling urges to offend were noted. Participants said they felt they were able to make informed decisions when abstinent from alcohol and illicit substances:

> Oh yeah even the corner shop...I can still see the alcohol but I'm like "nah nah"... I have to forget it. I look at it and realise where it took me last time...I have to think of me kids. Even when in the pub and see them [people] drinking and I'm like "nah. I don't want that life again. It's rubbish" (Amy).

Participants noted stability in housing was important for them as they want to make sure that they can continue to look after themselves and their children as such instability in the past resulted in offending behaviour. For example, it was reported by one of the participants "I'd like to move this year...I definitely need to move this year…the place I am in now; I need to move from so that...erm...it would be good for a fresh start...." (Gina).

When participants reported they were able to manage their urges to offend and instability related to their housing, a sense of achievement noted. It meant they were able to continue with their lives as a law-abiding citizen.

> I was so proud of myself you know...because yesterday all I was thinking about was how I don't think shoplifting came into the equation yesterday. And today, it did not come into the equation and that's good for me. Yesterday …I took the money out and paid for it, I didn't think...it did not even come to my mind (Rachel).

Theme 6: Consequences

The negative consequences of re-offending were noted by many participants. It was evident from comments made that participants had considered the potential consequences of their actions in terms of losing respect from family and the community, losing contact with children, not meeting pro-social goals and having to serve a prison sentence. It was suggested that such knowledge has a positive impact on the likelihood of leading a pro-social life.

6.1) Disappointing family and community

The participants said they feared they would lose the respect and support of their family and peers if they offended again and or went to court or prison.

> Like I said it's that fear of going to the jail… I've come so far and I wouldn't want to disappoint myself, I wouldn't want to disappoint my family, disappoint my peers knowing that they've put so much time into me to make me feel like it was all wasted (Monica).

It was also highlighted that religion and spirituality would also be affected if the participants engaged in offending behaviour. For example, one of the participants reported "I don't know what I thought then but now I just know that I could not do that [shop-lifting] and

go to the church" (Rachel). Another reported "I meditate and things like that. I actually received messages through meditation and things like that my life cannot go on like that and that I have a greater purpose…than going down this road [of offending]" (Monica).

6.2) Losing children

The participants identified that losing their children would be detrimental to their lives if they offended again. This was particularly true for mothers who had limited contact or had recently re-gained full access to their children. One of the participants said "losing my daughter is what I was fearful of … if my child had seen me do that [shop-lifting]…I would have regretted it thinking not only have I ruined my life, I've ruined my daughter's life as well" (Monica). Participants also noted that letting their children down would be devastating for their relationship particularly when they had worked hard to regain access to the children. For instance, one of the participants commented "the thought he [son] might get taken into the social services that will be a devastating blow to my system to know that I've haven't just let him down ... no haven't just let myself down but also let him down" (Rosa).

6.3) Not meeting future goals

The participants said if they were to offend again, it would mean they would not be able to meet their goals of completing educational courses or getting a job. For example, one of the participants stated "even when you do voluntary work, they do a police check on you. Check your record and I was really upset thinking...the record of charges of cultivating cannabis...that it can go against me to get a job" (Miranda).

Wish I hadn't done it [offended] obviously. Not that I don't mind coming here [centre] ...I wouldn't be in this situation to have to come here all the time...obviously it's another thing on my record and plus I can't work in jobs with money (Phoebe).

6.4) Prison or Court

The thought of imprisonment for the first time or again instilled enough fear in the participants to stop them from offending again. One participant commented "I'm not the sort of person who I don't think I've got the strength for it. I don't think that I could handle it to be honest" (Phoebe). Another participant mentioned

> You know I've never been in prison and I never want to get to that. Yeah I know it can never happen again. I know that for 100% no matter how low I am...it scared the crap out of me (Miranda).

3.5 Discussion

The aim of this study was to identify the factors associated with desistance in adult female offenders. The study consisted of two parts. Firstly, the potential impact of a drama based programme was carried out to investigate its role in the process of desistance. Secondly, female offenders took part in interviews whereby they shared their life stories and journey of desistance. It was hoped that the findings can assist practitioners working with female offenders to provide the appropriate support and treatment in order for offenders to succeed in their efforts to desist from .

Summary of key factors associated with desistance

The findings of the quantitative research indicates that agency, hope, dealing with impulsivity, motivation, interpersonal trust and well-being are important factors to consider in the process of desistance in female offenders. Similarly, the findings of the qualitative research suggest that self-talk, 'stop and think', assertiveness, relaxation and mindfulness are considered to be important practical skills in the process of desistance. There is ample support for such programmes and of its effectiveness in the literature for both male and

female offenders (Chilvers, Thomas, & Stanbury, 2011; Deffenbacher, Oeting, & DiGiuseppe, 2002; McGuire & Hatcher, 2001).

Additionally, programmes such as a drama group, parenting groups, substance awareness, domestic violence and counselling were highlighted as useful. The value of creative arts in supporting the process of desistance was an interesting finding. Baim, Brookes, and Mountford (2002) noted that drama methods can involve/engage individuals in a more effective way than more traditional approaches to therapy; the practical methods can help address thoughts, feelings and problematic behaviours including offending behaviour. Research has also shown that parenting effectiveness training, quality time spent with children, showing love and affection and how to nurture, topics covered in the parenting classes, have been useful to female offenders (Schaffner, 1997). It has been found that the domestic violence programme and substance misuse programme has shown positive effects in supporting offenders' efforts to desist (Kiely et al., 2010). The benefits of counselling and psychological interventions for offenders with histories of trauma have been noted. For instance, research by Lynch, Heath, Mathews and Cepeda (2012) found that female offenders in prison who attended a psychological intervention focussing on developing coping skills to manage trauma, showed improvements in symptoms of post-traumatic stress disorder and depression. The female offenders also showed improvements in interpersonal functioning and coping skills in comparison with female offenders who did not take part in the intervention.

It has been found that ending a relationship with an abusive partner and forming a new relationship described as supportive and better than the previous one, contributes to desistance (Barry, 2010; Bui & Morash, 2010). Research has also consistently shown that the transition to motherhood is associated with reductions in offending (Bakken, 2009; Kreager, et al., 2010). However, Monsbakken, Lyngstad, & Skardhamar (2013) found that motherhood

led to reductions in offending during the pregnancy and increased after having a child. The current research lends support to both findings as in the current sample, a majority of the mothers were separated from their children as a result of their offending. However, once the offenders realised the consequences of their offending (i.e., loss of children) they reported that the desire to get their children back provided them with motivation to change. Thus, the need to maintain their motherhood and keep their children with them was considered as a significant 'turning point' for the mothers to desist from offending.

Spirituality was noted to be form of social support for some of the participants in the research. The findings support the work of Bakken (2009) who found that female offenders who reported regular attendance at religious services had reductions in levels of their offending. The findings showed that offenders value the support of the professionals working with them such as probation officers, programme facilitators and caseworkers. For instance, Healy (2012) found that the offenders in her sample valued the practical assistance and friendship they received from their probation officers.

The findings from the current study support the work of previous research that employment and education reduces offending (Craig & Foster, 2013; Verbruggen, Blokland, & Van der Geest, 2012). Participants reported that the thought of returning to court or prison was a deterrent for them to not engage in future offending behaviour. The findings support the work of Gunnison (2001) and Michalsen (2013) who found that a high perception punishment increased the likelihood of termination of offending in a sample of female offenders.

Linking findings with the theories of desistance

The findings of the quantitative research proved consistent with some of the aforementioned theories of desistance. For example, significant findings obtained on agency,

wellbeing and impulsivity support the self-control theory (Gottfredson & Hirschi, 1990). The findings indicate that offenders had developed an awareness of issues which may or may not have been within their control such as peer groups. Engagement in pro-social activities such as psychological interventions and employment can give an offender a sense of agency as they are able to do things to create a better life for themselves. With regards to impulsivity, an association with a positive peer group and engagement in psychological interventions appear to have supported offenders to make conscious choices from a range of options. It may have also increased their ability to focus on one thing and also plan and think through options and consequences when faced with a difficult situation such as the opportunity to take drugs of commit an offence. Significant findings obtained on the interpersonal trust dimension support social capital theory (Hughes, 1998). The findings suggest offenders developed positive attitudes toward others such as others mean well, are trustworthy, caring, and that there is something to gain from engaging with others. The findings also suggest that offenders developed an increase in connectedness to a wider range of pro-social connections. Lastly, the findings from the motivation and hope dimensions supported cognitive transformation theory (Giordano et al., 2002). According to the theory, offenders shift from no internal or external motivation to change, to feeling motivated to change in order to lead a pro-social life. Also, engagement in psychological interventions and education and employment can help aid the process of desistance. Similarly, a sense of hope can be a catalyst for other dimensions whereby an individual adopts a flexible and a positive perception of the future, internal motivation and agency.

The findings from the qualitative research also supported the theories of desistance. For example, the importance of motivation and willingness to change noted in the current research supports the cognitive transformation theory (Giordano et al., 2002). The findings highlighted that female offenders wanted to be someone better and to lead a life worth living.

They felt motivated to change which helped them in their efforts to desist; indicating the role of agency stemming from an internal motivation to desist.

Support was also offered for self-control (Gottfredson & Hirschi, 1990) and self-identity (Maruna, 2001) theories. The participants reported they had developed high self-control over their impulses to manage the cravings for alcohol and drugs and also offending behaviour. They attributed this to engagement in psychological and social programmes where they learned the skills to develop impulse control. In line with the self-control theory, the offenders noted that positive peer influence (in particular from the other group members in the programmes) helped them find better ways to control their impulses and in order to fulfil their goals. Similarly, when considering the self-identity theory (Maruna, 2011) participants in the study said their goal to 'go straight' had become their primary identity whereby they developed self-belief and control over their future and present. They started to acquire and apply new skills to manage their urges and cravings associated with substance use and offending behaviour in order to demonstrate they are responsible individuals who want to 'go straight'. When offenders had successfully used the skills to manage their urges and cravings, they started to see themselves more positively. Furthermore, volunteer work in the form of mentoring, improved their sense of self-worth, accomplishment and purpose. The offenders saw themselves as a positive role model and in the role of a help-giver.

The findings highlighted the importance of bonds with loved ones, employment and education; thus offering support to the existing theories of social control (Hirschi, 1969) and social capital (Hughes, 1998). As per principles of social control theory, the findings of the current study showed that female offenders' most recent contact with the Criminal Justice System had had adverse consequences; they believed that this increased their motivation to change and to make efforts to desist from offending. As part of the process to desist, the offenders recognised the value of emotional bonds with their parents, peers, partners and

children which they wished to preserve. Thus, they were less likely to engage in offending as they did not want to put attachments with their children in particular at risk. Offenders were committed to education courses, employment and volunteer work as it had become part of their routine and gave them a structure. The benefits of this and the time and energy invested in these roles was felt to be far too important for them now to risk it by acting in a defiant manner which could lead to exclusion from these institutions. Furthermore, as employment allowed offenders to pay their bills through legitimate means and they were able to manage boredom in a constructive manner, they no longer saw the need to deviate from rules set by these institutions.

Employment, concern for the children and recent contact with the Criminal Justice System were the 'turning points' for desistance for most of the offenders. According to social capital theory, employment helped offenders to occupy their time in a meaningful manner. Furthermore, the recent contact with the Criminal Justice System induced fear in them as many mothers were separated from their children. The desire to be reunited with their children or to maintain their children's return in the family home was a 'turning point' for many mothers to mark an end to their offending.

Summary

The findings of this research have significant links with the existing theories of desistance. While some of the factors associated with desistance are similar for male and female offenders; there are factors that are more prevalent for female offenders; such as motherhood, application of skills to manage trauma and domestic violence, fear of returning to prison or court (related to loss of children), positive outlook on life, being a positive role-model and spirituality. Findings noted on the other factors are consistent with the empirical evidence available on research with men. Therefore, the findings of the current research can

add to the growing research based evidence available on desistance in female offenders. As will be discussed in chapter five, such findings can help inform the services and professionals working with such populations to support them in their efforts to desist from offending.

3.5.1 Methodological strengths and limitations

The sample size for the quantitative study was small which limits the generalisability of findings to the wider population of female offenders. In addition, it was not possible to include offenders in the study who had dropped out of the programme. Therefore, results may be subject to bias as the research recruited using a purposive, self-selecting sampling method. It is possible that offenders who were on the route to desistance were more likely to volunteer to take part and were therefore disproportionately represented in the sample. It may be that offenders who did not complete the questionnaires or did not take part in the interviews may have had 'relapses' in their process of desistance. Future research should explore factors that may or may not be significant in female offenders' efforts to desist from offending by also including offenders who fail to desist. Additionally, there was no control group for the quantitative study and it was not possible to control for confounding variables; it is therefore not possible to evaluate the effectiveness of the Geese Theatre programme. Another limitation is that tests were not carried out to compare the differences between the eight groups. This would have allowed one to explore which group of offenders benefitted more in their efforts to desist (e.g., substance misuse, victimisation etc.). It would have also been interesting to explore whether short, medium or long term intervention is more effective than the other. However, when taken in addition to comments made as part of the qualitative study, the results do show a positive trend towards the usefulness of the intervention. Future research using a larger sample size and a control group could help establish the effectiveness of an intervention to a greater extent.

Regarding the qualitative study, ten interviews is considered adequate for thematic analysis and the choice of methodology allowed for a more in-depth exploration of the views and experiences of female offenders than would be gathered through quantitative means alone. As mentioned above, research on female desistance is scarce, thus efforts undertaken to explore this area can add to the existing knowledge of desistance.

The interviews utilised a semi-structured approach. Researchers have noted that a semi-structured design provides a focal point from which to conduct and analyse the interviews, which is in line with the principles of thematic analysis (Braun & Clarke, 2013). This research may have been strengthened had there been a series of follow up interviews with the participants which could explore whether the factors associated with desistance were stable overtime and whether the effects of the interventions were maintained.

There is paucity of research on desistance that employs a mixed methodology. This study adds additional value in the field of desistance as both quantitative and qualitative methods of analysis were used. The findings from the questionnaire and interviews highlighted the importance of agency/assertiveness, motivation to change/insight, hope/positive outlook on life, well-being/stability, interpersonal trust/support and impulse control/ managing urges to reoffend in the process of desistance. The sample is considered to be of a homogenous nature, as all participants were offenders, had contact with the Criminal Justice System at some stage in their lives and were subject to rehabilitation in the community. Lastly, the current study is the first of its kind to be conducted in the UK. Although some limitations are noted such as small sample size and lack of a control group, the study adds to the field of desistance in female offenders which is currently lacking in the UK.

3.6 Conclusions

The study has added to the limited knowledge available in the field of desistance in particular female offending. Factors such as motherhood, fear of prison/court (with reference to being separated from children), positive outlook on life, being a positive role-model and spirituality were found to be particularly important in female offenders' process of desistance from crime. The findings of the study supported the following existing theories of desistance: cognitive transformation, self- control, self-identity, social control and social capital. The study also investigated the potential impact of a group programme in supporting female offenders efforts to desist from offending. The findings showed a positive trend towards the following factors associated with desistance from crime: hope, interpersonal trust, agency/self-efficacy, well-being, motivation to change and impulsivity/problem-solving. It is hoped that the findings obtained from this research can be used as a basis for further research.

The research has implications for professionals working with female offenders (discussed further in chapter 5). As noted in the study, female offending was a result of the offenders' inability to cope effectively with their emotions resulting from the stress of previous victimisation or not being able to provide and care for their children. Considerations must therefore be given to how services can support female offenders to effectively manage their distress, difficult emotions and interpersonal difficulties. To achieve this, gender specific treatment programmes should be considered.

CHAPTER 4

Critique of a Psychometric Measure

Intermediate Outcomes Measurement Instrument (IOMI)

Maguire, Disley, Liddle, Meek, Burrowes, and Lewis (2014)

4.1 Introduction

The effectiveness of services for offenders tends to be gauged by the rate of future offending. Developing a measure of reoffending has remained an important area for research. Pre and post intervention measures assessing psychological change such as self-esteem, control and insight is a useful indication of the extent to which an individual has achieved their goal. Theoretically, desistance could be measured by a reduction in the rate of re-offending. However, it is difficult in practice to measure as there are no reliable statistics on the rates of crime overall. Even combining the offences recorded by police with those captured by the crime statistics, does not provide an accurate representation of total crime. Since it is difficult to observe re-offending directly, research has focussed on a proxy to measure desistance from crime. For this, intermediate outcomes are considered.

Intermediate outcomes such as substance misuse or an increased personal support network can suggest reductions in reoffending. Such outcomes are intermediate as they indicate that an offender is making positive changes towards an offence-free lifestyle, but has not successfully stopped offending. This may be because the individual has made partial progress towards change, or they are unable to demonstrate it completely because their current environment (e.g., prison) restricts them from demonstrating their efforts of desistance. For example, it is difficult for an offender in a prison to demonstrate progress made with offences of child neglect in prison. In essence, improvements in intermediate outcomes indicate successful steps on a journey towards the final outcome of desistance from crime.

There is evidence available on the effectiveness of structured programmes based on cognitive behavioural principles (Hudson, Wales, Bakker, & Ward., 2002). However, empirical evidence on interventions involving creative arts such as theatre remains scarce. Evaluations available are generally conducted on small sample sizes and mainly investigate

short-term impacts (Burrowes et al., 2013; Taylor et al., 2013). However, it has been argued that arts can play an important part in the process of desistance. For example, creative arts can provide opportunities for positive interaction with others and also learn different behaviours or responses for difficult experiences and emotions (Harkins et al., 2009). It can also help to foster a sense of achievement or new ways of seeing oneself and others, in some cases motivating offenders to engage with professionals in receiving the most appropriate treatment e.g., for substance misuse. (Harkins et al., 2011). However, it is not realistic to expect short-term single arts based interventions to produce reductions in reoffending. Desistance from crime is a long-term and complex process, requiring sustained motivation on the part of offenders and continuing support on a variety of fronts (Maruna, 2001; 2007). Yet arts based interventions may promote changes in individuals that can make significant contributions to their progress towards desistance.

A good intermediate outcome measure can contribute to the accumulation of reliable evidence in the long term about *what works* in offender rehabilitation. Burrowes et al. (2013) state that as intermediate outcomes relate to criminogenic or protective factors, they can contribute to the process of desistance. Burrowes et al. (2013) recommended that intermediate outcomes should be included as potential measures in a toolkit which can be used by organisations to measure the impact of their interventions. Hence, instruments such as the Intermediate Outcomes Measurement Instrument (IOMI) offer an alternative to short-term reoffending rates as indicators of offenders' progress towards desistance (Maguire et al., 2014).

Taking the above mentioned issues into consideration, the IOMI has been selected to be reviewed as it was used to assess the potential impact of the Geese Theatre programme as noted in chapter 3. It will be critiqued as one of the few intermediate outcome measures available in the field in measuring factors that contribute to the process of desistance from

crime. This critique begins with an overview of the IOMI, its uses and psychometric properties. Finally, conclusions are drawn as to the IOMI's usefulness in clinical and research settings.

4.2 Overview

The Intermediate Outcomes Measurement Instrument (IOMI; Maguire et al., 2014) is a 21 item questionnaire that assesses an individual's change over time in seven key psychological dimensions and also in relation to the perceived significance of specific "practical problems" in the individual's life. The 21 items are distributed across the following seven psychological dimensions: resilience (2 items), wellbeing (3 items), agency / self-efficacy (3 items), impulsivity / problem-solving (3 items), motivation to change (3 items), hope (3 items) and interpersonal trust (4 items). The eight practical problems cover the following areas: money, employment/prospects, health and fitness, housing, drugs, alcohol, relationships and gambling (See Appendix 5 for a copy of the IOMI).

Participants score each item based on how much they agree with the statement from 5 to 1 such as "there are some people who I trust" and "I tend to bounce back after hard times." The response options are 5 (strongly agree), 4 (agree), 3 (neither agree nor disagree), 2 (disagree) and 1 (strongly disagree). Four questions are 'reverse scored'. For the practical problems questions, the participants score each item based on how much they consider it to be a problem for them from 4 to 1 such as "problems with drugs" and "problems with health and fitness" The response options are 4 (big problem), 3 (problem), 2 (small problem) and 1 (no problem at all). Responses are then summed to obtain a total score. The assessment is repeated twice, at the start and at end of the programme to assess if any positive changes have occurred as a result of the treatment programme. A high score on the 21 items and a low score on the practical problems suggests a positive outcome.

The IOMI is administered before a participant commences an intervention and then at regular intervals during the participant's involvement. The post-intervention version is identical to the pre-intervention questionnaire, except that it includes a small set of "post-only" questions for participants, focusing on their relationships with facilitators delivering the intervention. The importance of the relationship between the offenders and the facilitators in the desistance process has been highlighted in previous research (Burnett & McNeil, 2005). Feedback of this kind is considered important as it allows one to assess whether a positive change has occurred and if so, whether this may be the result of a good working relationship between the participant and the facilitator. An overview of the psychological dimensions as defined by the authors of the IOMI is described below.

Resilience

Resilience is a complex skillset or capacity that allows an individual to recover from adversity and to move on in a positive manner to reconstruct or begin again. It is related to an individual's coping skills, wider relationships and support networks. Low scores indicate an individual is likely to give up in the face of setbacks and is more prone to depression. High scores suggest increased capacity to move on and continue to try, even in the face of setbacks and adversity.

Agency/efficacy

Agency/efficacy looks at whether individuals are able to make autonomous and independent decisions about their own life and to make things happen in the outside world as a result of those decisions. Low scores suggest passivity in relation to decision-making about one's own life or a perception that "things happen to me" rather than "I make things happen". High scores indicate increase in confidence in one's own ability to make decisions about the future and to implement plans to bring about change.

Hope

Hope relates to a perceived scope for positive future change. It is linked to motivation and to self-assessment of efficacy. Low scores suggest a sense that the future is perceived as hopeless. High scores indicate a sense of hope which could be a catalyst for a number of other changes, e.g., a positive perception of the future, internal motivation and agency.

Wellbeing

Wellbeing refers to general or overall mental/emotional/psychological health or balance. It involves a focus on positive self-regard and confidence. Low scores suggest low levels of positive self-regard or self-esteem and confidence. High scores indicate positive self-perception, estimations of self-worth and increased levels of confidence.

Motivation to change

Motivation to change is strongly linked to positive engagement and a key focus is on internal rather than external motivation. Low scores suggest low levels of engagement with activities that may help with desistance (e.g., education, employment), engagement with activities is through external motivation (e.g., a desire to fake good) and high levels of internal motivation to continue offending. High scores indicate high levels of internal motivation, engagement with interventions and low motivation to continue with offending.

Impulsivity / problem-solving

Impulsivity is marked by a lack of reflection and planning and therefore by a disregard of the consequences of one's behaviour. People who are highly impulsive generally lack well-developed problem-solving skills. High scores suggest high levels of impulsive behaviour and poor problem solving skills based on inaccurate perceptions, perceived limited range of options and no contingency planning. Low scores indicate low impulsivity, ability to

make conscious choices from a range of options, planning and ability to think through options and consequences and focus and discipline e.g., the ability to concentrate on one thing for a period of time.

Interpersonal trust

Interpersonal trust concerns attitudes toward and connectedness with others with strong links to notions of social capital. Low scores suggest difficulties with trusting others, lack of interest in others and a sense of isolation. High scores indicate a positive attitude toward other people and connectedness to a wide range of pro-social people.

The practical problems

The practical problems relate to the **e**xtent to which participants regard the key areas referred to as being problematic for them. The eight areas listed are linked to the "eight pathways" to rehabilitation. These comprise of: Accommodation; Education, Training and Employment; Drugs and Alcohol; Finance, Benefits and Debt; Families and Children; and Attitudes, Thinking and Behaviour. High scores in a multiplicity of areas indicate that efforts to engage the participant in programmes or other interventions are unlikely to result in positive change. Low scores indicate low or abstinence from drug use, controlled drinking or abstinence from drinking, stable and secure accommodation, improved health and access to health care and employment or training which may lead to employment.

A manual for the IOMI has not yet been published due to difficulties with funding issues. This is currently being addressed with a view to publish the IOMI in 2018.

4.2.1 Development of the IOMI

Maguire et al. (2014) were commissioned by the NOMS to develop an instrument which measures the intermediate impact of arts based interventions for offenders. Maguire et

al. (2014) developed the IOMI with the aim that the measure would have strong relevance in the research and practice areas. They hoped the measure would add to the research into the theory of desistance and be relevant to a wide a range of practice areas.

Development of the IOMI involved collaboration and cooperation with a range of organisations delivering mentoring and arts programmes for offenders focussing on resettlement issues such as employment and abstinence from drugs and alcohol. The authors carried out research to identify evidence to guide the construction of the IOMI. A mapping exercise was carried out to identify and assess the robustness of existing measures of intermediate outcomes. Following this, a national online survey, interviews and focus groups were carried out with organisations facilitating arts programmes with offenders which then led the authors to design a draft measure of the IOMI. The researchers identified dimensions for inclusion in the measure and questions with respect to each dimension. Subsequently, further consultations with providers about the draft IOMI were held and the measure was refined. Throughout the design and consultation work, the authors reported they took care to ensure that the final version had strong anchorage in the research and practice areas and that it supported the existing theoretical work of desistance and other change processes associated with interventions for offenders.

The IOMI was initially piloted in its 51-question form with sentenced males at HMP Portland. Based on principal component analysis in the form of exploratory factor analysis, the questionnaire was revised and items were reduced to 21 covering seven psychological dimensions and practical problems that consisted of eight items taken from CRIME-PICS II (a questionnaire for examining and detecting changes in offenders' attitudes to offending). Following these changes, the IOMI was piloted in the community with agencies that provided mentoring and arts projects for offenders. It was planned for providers to ask programme participants to complete the measure at the start of the intervention and again at the end, to

explore the change over time i.e., undertaking a pre and post comparison. The findings showed that the IOMI was able to measure change in relation to all the dimensions and had good internal consistency. Finally, a test-retest exercise was conducted to confirm the stability of responses to the IOMI. For this, offenders at HMP Moorland were tested and retested between one and three weeks after their first completion of the measure. The findings indicated the IOMI is stable over short periods of time for all intermediate outcome domains other than trust. The authors recognised that although further testing is needed, they had developed a measure of intermediate outcome, showing good initial results in its ability to measure change and usability.

4.3 Characteristics of the IOMI

4.3.1 Level of Measurement.

The level of measurement used in the IOMI is an interval scale. Participants are asked to rate how much they agree with statements associated with their desistance efforts. Scores are calculated from the responses and numerical differences between subscales can be established making it suitable for statistical analysis (Field, 2009).

4.3.2 Self-Report.

The IOMI is a self-report measure. It relies upon the participant to report their own behaviours, thoughts, or feelings. The authors anticipated that gathering information directly from the participants about their psychological difficulties will improve the accuracy of the results. However, there are problems related to honesty as it is difficult to ascertain whether a participant is able to or wants to respond accurately, causing implications for accuracy of the measure.

Response bias refers to when a participant strives to produce a positive or a negative impression, creating a 'response set'. The participant may 'fake good', answering questions in a socially desirable manner (i.e., reducing the impact of their psychological or day to day difficulties) or 'fake bad' (i.e., making psychological and day to day difficulties appear more evident, assuming they will gain more access to support). This issue is particularly pertinent for the IOMI as participants are asked to report on their psychological difficulties. Research has shown that offenders in prisons are likely to provide accurate self-report information, as they are already incarcerated (Craig, Thornton, Beech, & Browne, 2007). However, when the IOMI is used in a community setting, participants may be less willing to disclose their psychological problems due to the fear of contact or further contact with the Criminal Justice System. Additionally, demand characteristics may play a role whereby participants attempt to concur or hinder the study's aims, responding in ways that agree or disagree with the predicted outcome, or merely suffer from fatigue and loss of focus. Consequently, it is important that caution is taken when making inferences from the results (Mathie & Wakeling, 2001).

There are ways to minimise such bias. For example, if a study allows for responses to be completed anonymously, reductions in inaccuracy of responses and potential self-reporting bias may be achieved. Additionally, socially desirable responses can be minimised when using a Likert scale for responses, rather than dichotomous yes/no (Sorenson & Taylor, 2005). Other ways to address this is by including 'lie items' which can detect bias and improve the validity of the measure. This can include a negativity scale (extent to which the participant answers selected items in an unusually negative manner), an infrequency scale (the extent to which the participant endorsed items in an atypical fashion) or inconsistency scale (the extent to which the participant answered similar items on the questionnaire in an inconsistent manner) as noted in measures such as Behavior Rating Inventory of Executive

Function (BRIEF) and Millon Clinical Multiaxial Inventory-IIII (MCMI-III). The IOMI currently does not include such scales but this remains work in progress for the authors.

4.4 Psychometric Properties of the IOMI

According to Kline (1986), a psychometric test is considered to be a good test if it fulfils certain criteria: the measure should be at least an interval scale, be reliable, valid, discriminating and have appropriate normative data. In relation to the IOMI, each of these criteria is discussed below. Prior to exploring these areas, it is of note that the IOMI was only developed in 2014 and is still in a draft stage. Various community and prison projects around the country are currently testing its psychometric properties in a series of pilot projects which over time will give the authors a better understanding of its reliability and validity. As a result, the information described in the section below may already be out of date and under-estimate the statistical properties of the IOMI.

4.4.1 Reliability.

The reliability of a test refers to its ability to measure something in a consistent manner (Kline, 1986). A score produced by a psychometric test is made up of a participant's true score plus an amount of measurement error. The more reliable the test, the smaller this measurement error and thus the closer the estimate to the participant's true score. There are several types of reliability but for the purpose of this chapter, internal reliability and test-retest reliability will be considered.

4.4.1.1 Internal Reliability.

Internal consistency examines whether the test items measure a similar construct. In the IOMI, for example, all four items on the interpersonal trust construct should be closely related, as they measure the construct of attitudes and connectedness with others. Similarly,

all three items of the impulsivity/problem solving construct should be closely related. One widely used statistical method of measuring internal consistency is Cronbach's alpha (α; Cronbach, 1951), which calculates the average correlation of items in a test to see how closely related they are. Alpha coefficients can range from 0 to 1, with higher alpha coefficients representing higher internal consistency. It has been suggested that an alpha coefficient of 0.7 or above represents acceptable reliability (Kline, 1986).

The first prison study found that five of the seven dimensions on the IOMI achieved an alpha coefficient of .77 or above, including three – impulsivity, motivation to change and interpersonal trust, which scored above .8. The only two dimensions with relatively low alphas were resilience (.56) and agency (.63). Similar results were noted with the community sample A , four of the seven dimensions achieved an alpha coefficient of .72 or above. The three dimensions with relatively low alphas were resilience (.24), impulsivity (.65) and motivation to change (.61). With the community project B, four of the seven dimensions on the IOMI achieved an alpha coefficient of .72 or above. The three dimensions with low alphas were resilience (.47), impulsivity (.65) and hope (.67).

Due to the low scores achieved on the resilience dimension in particular, Maguire et al. (2014) considered whether to add more items to the dimension or to remove the dimension as a whole. After further analysis, the authors found that adding more questions did not increase the alpha score (in fact, it decreased the score) and removing resilience as a dimension was rejected as an option as it is considered to be important in measuring treatment outcomes and is inherent to the theory of change. The authors argued that for these reasons and because it is not unusual to include items with such low alpha scores, resilience should remain in the final version of the IOMI. The authors intend, once they have received further feedback from the pilot projects in the country, to review the dimension and consider

reviewing the questions relating to resilience in the hope that higher alpha scores can be obtained.

4.4.1.2 Test-Retest Reliability.

Test- retest reliability examines a test's consistency over time. More specifically, it refers to a test's ability to produce the same score for a participant on two separate occasions, given that the participant has not changed between testing (Kline, 1986). The aim of the IOMI is to measure change in a participant's psychological dimension following an intervention. Therefore it is important for facilitators and staff to know that any changes that they do see are likely to represent a true change in the participant's psychological pathology and is not simply down to poor reliability of the measure. The test-retest reliability is calculated by measuring the correlation between participants' scores on two separate occasions. If the test is reliable, one would expect the correlation between the two scores to be high, i.e., above 0.7.

Maguire et al. (2014) reported that with the prison sample, the correlations between most dimensions were moderate to high, all scoring above 0.7 with the exception of resilience (alpha coefficient of .45 and .55 during test and retest stages). This is likely to be a result of only two items loading on this dimension. Test-retests were completed with prison sample (n=217). The results showed that the alpha coefficients were generally very similar during test and re-test stages. Furthermore, test retest analysis revealed that all seven dimensions were significantly correlated at the 0.001 level. This indicates that the measure has strong reliability. The authors do not explain why a test-retest was not conducted with the community sample. It is suggested that this could be a result of the small sample size (n=63) which may have made it difficult to form analysis of the test-retest reliability.

Overall, it would appear that with the prison sample in particular, the IOMI has good internal reliability and there is good stability in the dimensions. The test-retest reliability however is not available for the community sample. It is however of note that, reliability on its own does not mean that the test is an accurate measure of a treatment outcome. In order to ascertain whether the IOMI is actually measuring what it claims to measure, its validity must also be examined.

4.4.2 Validity.

Validity refers to whether a test is measuring what it claims to be measuring (Kline, 1986). There are several ways of examining validity of a test; each of these will be discussed below.

4.4.2.1 Face Validity.

It is important that the test superficially appears to be a good measure of the dimension. This is known as face validity. If a participant does not feel that the test is a valid measure (e.g., if it appears to be asking irrelevant questions), then they are unlikely to be willing to complete it. The IOMI appears clear in its approach, specifying to participants that the questions are designed to assess a change in a number of areas of their lives. All questions on psychological dimensions are related to offending and the questions are short and quick to complete; therefore it is likely to be acceptable to most participants. The authors report that the measure has strong face validity as its design was strongly anchored in consultation and feedback from a range of experts working with offenders including treatment facilitators and psychologists who have particular expertise in operationalisation and measurement of key concepts. However, the participants who completed the questionnaire both in prison and community were not asked about the validity of the test. Hence, it would appear that the face validity has not been as fully addressed as it could have been.

4.4.2.2 Concurrent Validity.

A second way of assessing the validity of the IOMI is to compare it to other tests that are known to be valid measures of treatment outcomes of offending. This is called concurrent validity. The authors note that there are a number of other tests that have been developed to assess treatment outcomes such as the OASys. The authors note that due to the insufficient time and resources, they were unable to compare the IOMI with the OASys in terms of correlations. This is one of the key limitations of the IOMI and it is difficult to say with confidence that the IOMI has concurrent validity.

4.4.2. Content Validity.

Content validity refers to whether the items in the scale (i.e., the 'content') reflect all features of the dimension being tested (Kline, 1986). The authors carried out factor analysis which is generally used to reduce a large number of variables into a fewer number of factors based on underlying relationships between the variables. If variables are measuring a similar dimension, one would expect them to make up one factor, whereas variables measuring a different dimension would be expected to fall into separate factors. The authors found a five factor model for the IOMI, i.e., there are five distinct factors: 1) Wellbeing/Resilience/Agency-Self Efficacy, 2) Impulsivity/Problem-Solving, 3) Engagement and Internal Motivation, 4) Attitudes towards Others and 5) Hope. These five factors had eigenvalues greater than 1.5 (average eigenvalue or cut off point is 1) and explained 50% of the variance. It would appear that some factors are more exclusive than others as Factor 1 falls under three dimensions (Wellbeing/Resilience/Agency-Self Efficacy). Hence, it is suggested that the authors could rename such factors with one unified dimensions such as 'general outlook on life' or 'self-perception of hope, agency and well-being'. In terms of the Eigenvalues, factors 1-5 explain 50% of the variance, which is positive.

The items measuring psychological dimensions were adapted from other measures. For instance, items measuring impulsivity/problem solving were adapted from the Conflict Resolution, Impulsivity and Aggression Questionnaire (CRAIQ) and items measuring Hope were adapted from The State Hope Scale. As these measures have good content validity and the IOMI items were adapted from these scales, it would have been useful for the authors to conduct a correlation test to see whether the IOMI scale correlates with the original scales. This is another key area in which the measure can benefit from further exploration.

4.4.2.4 Predictive Validity

Predictive validity assesses the extent the results of the test can predict future behaviour. When working with offenders, previous behaviour can be a good indicator of future offending (e.g., Monahan, Brodsky, & Shan, 1981). Unfortunately, the authors did not carry out the predictive validity of the IOMI. This is disappointing as the measure is designed for offenders as an intermediate measure of desistance. The predictive validity can be assessed by following up the prison and community sample to examine whether they engage in offending behaviour following the treatment. Another way of assessing predictive validity is by looking at the offenders' records such as the PNC record or a prison record. This is another area of further work for the authors.

4.4.2.5 Construct Validity

Construct validity ensures that the tests works well as a construct and measures what it is intended to measure, and that the items are clearly defined. It can be examined by correlating the construct being investigated with variables that are known to be linked (Campbell & Fiske, 1959). As mentioned earlier, due to the insufficient time and resources, the authors were unable to assess the construct validity of the IOMI. This is another area that requires further work for the authors. Construct validity can be tested by comparing the IOMI

scores of offenders who have desisted from offending with the IOMI scores of offenders who continue to offend .

4.4.3 Normative Samples.

The final criterion that Kline (1986) proposed a good psychometric test should fulfil is having appropriate normative data. Normative data enable researchers to compare the participants' scores to those obtained by a standard group, thus enabling useful inferences to be drawn about baseline scores and the treatment outcomes related to reoffending of their participants (Kline, 1986). Normative data are not available for the IOMI. The authors claim that a large pool of data could be used to identify norms across different intervention types and different types of clients, eventually enabling researchers and services to compare their impact against these norms (Maguire et al., 2014). The authors also need to address this matter and once they have substantial evidence from other studies currently being piloted, the norms can be identified.

4.5 Conclusion

This chapter examined the psychometric properties of the IOMI in detail. According to Kline (1986), in order to be described as a good test, a psychometric measure should be at least an interval scale, be reliable, valid, discriminating and have appropriate normative data. The IOMI has been shown to fulfil some of these requirements.

The IOMI appears to have moderate internal consistency and the test-retest reliability is high for the prison sample but absent for the community sample. Further work is required on its validity. The IOMI has not yet been compared with other instruments to measure treatment outcome and it has not been assessed whether the items measure the dimensions being tested. The authors also do not give an indication of its predictive validity and normative data are not available.

Maguire et al. (2014) acknowledge these limitations and are aware that the measure needs to be tested more thoroughly before its reliability and validity can be confidently asserted. Furthermore, the results of IOMI need to be mapped against reoffending outcomes to assess its value as a predictor of, or proxy for, reoffending. It is also noted that the IOMI has so far only been used with arts based interventions. Its wider applicability therefore is limited (i.e., to other forms of intervention and other groups such as people who misuse substances), thus further testing is needed to assess the robustness of the measure.

It is also important to establish that the psychological dimensions and the scores on the IOMI are relatively stable in the short term. This means that the measure is not over-sensitive to the circumstances in which it is administered or to rapid fluctuations in offenders' moods. Without such stability, increases or decreases in scores obtained before and after an intervention might capture only temporary states of mind (or peaks or troughs) which may not reflect the overall trajectory of change. This problem of distinguishing temporary from lasting change however is not unique to the IOMI. This means that if desistance from crime is considered as a difficult and a lengthy process peppered by setbacks and relapses (Farrall & Calverley, 2006; Weaver & McNeill, 2010), measurement of any kind of change in offenders faces similar challenges. This suggests that measures such as IOMI may be most useful if administered periodically to the same individual over a substantial period of time, thereby producing longer-term trend lines (which might be related to significant interventions or events in their lives). Again, this is an issue for further exploration.

It is important to establish whether specific dimensions are vulnerable to floor or ceiling effects (i.e., whether there are trends for responses to be consistently low or consistently high). A ceiling effect was observed during the initial testing in questions about relationships with staff, where offender responses were consistently high. This caused the

team to doubt the value of these questions and consider removing them from the measure entirely, although further evidence is needed before making a final decision.

To further establish validity of the IOMI, scores could be compared and cross-tabulated with results from other already validated tools which measure the same or similar dimensions, or from official datasets held by criminal justice agencies such as OASys and LSI-R. This would help to address the possible problem with IOMI that it is based entirely on self-report data, which is sometimes considered less reliable than other sources of information. The authors also need to address possible changes or additions to the questions in dimensions with relatively poor internal consistency, in particular resilience. Once the reliability of the instrument has been assured, it will be important to identify whether positive changes on the dimensions in the measure either singly or in combination are associated with reductions in reoffending. In the shorter term, correlations between IOMI scores and those from assessment tools such as OASys and LSI-R could be investigated. Additionally, the testing and piloting of the IOMI to date has predominantly included adult male offenders. While some preliminary piloting was undertaken with projects that consisted only of female offenders or with adolescents and younger adults, more testing is needed to explore any variations in applicability of the dimensions and questions in the measure by age or gender. Also, asking responders for feedback on the questionnaire items can guide the researchers of its applicability and its user-friendliness.

Overall, the work of Maguire et al. (2014) is in its early stages. The authors have started to address reliability, validity and norms of the IOMI. This of course will take time however it is positive that a quick assessment of treatment outcome is available for use with offenders both in secure services such as the prison and in the community to measure the role and effect of psychological dimensions in addressing reoffending and desistance. Until further testing is completed, any results from the IOMI should be treated with caution. It is

hoped that once the psychometric issues noted above have been addressed and changes have been made, the IOMI has potential for a number of policy and practice related purposes. For example, the IOMI has the potential to support evidence that a particular agency or intervention has helped offenders to achieve positive changes likely to contribute to reduce reoffending or eventual desistance from crime. Its usefulness can be enhanced if future research demonstrates a correlation between scores on the IOMI and actual reoffending rates.

Furthermore, the IOMI offers an extra resource for research into *what works* in offender rehabilitation, especially into the effectiveness of small-scale and less mainstream interventions such as arts programmes. The IOMI could be used to develop the evidence base by combining data from small or medium sized providers who individually would have insufficient numbers of cases to allow robust quantitative analysis. A large pool of data could be used to identify norms across different intervention types and clients, enabling services to compare their impact against these norms. A large national dataset could allow for an examination of relationships between specific dimensions and their contributions to desistance theory with an analysis of pathways and its correlations with the psychological dimensions of the IOMI.

CHAPTER 5

Discussion

5.1 Aims of the Thesis

The thesis aimed to explore female desistance from crime. Firstly, it aimed to explore the current literature on risk factors for female offending. The intention was to develop an understanding of the key issues that lead female offenders to offend. It was hoped that the review would provide practitioners with an overview of the literature with a view to helping in the further development of interventions and management strategies that can support female offenders to address the risk factors associated with their offending.

The thesis also provided an overview of the psychological theories of desistance from crime and its application to female offenders. Female offenders and their desistance from crime were investigated by considering the potential impact of an intervention the offenders had completed. The views and experiences of female offenders on factors related to their desistance from crime were also explored. The intention of the research was to provide suggestions for services and practitioners supporting female offenders to desist from offending.

Finally, the thesis critiqued the psychometric tool the Intermediate Outcomes Measurement Instrument (IOMI; Maguire et al., 2014). The intention of this chapter was to investigate its appropriateness in measuring desistance from crime and subsequent implications for the scarcity of such a tool.

5.2 Main Findings

5.2.1 Chapter 2: Risk factors for female offending: A systematic review of the literature

A total of seven studies were included in the review. Studies indicated a range of risk factors associated with female offending including victimisation, addiction, mental disorders and emotion dysregulation, inadequate personal support, antisocial attitudes, parental stress,

and demographic factors. The following demographic factors were found to be relevant: low socio-economic status, lack of economic resources, lack of education, absence or difficulties with sustaining employment and familial involvement in offending behaviour.

The studies cited supported the existing literature on the risk factors for offending. Factors such as mental health and emotion dysregulation, inadequate personal support and parental stress were particularly pertinent for female offenders. The literature showed that emotional dysregulation was strongly related to mental disorders. Individuals who have difficulty in regulating emotions have deficits in the frontal cortices of the brain which makes them hypersensitive to emotional stimuli. When faced with a difficult situation it can take such individuals longer time to return to their normal emotional state. Due to this dysregulation in the management of emotions, such individuals are at a greater risk of engaging in acts that are antisocial in nature (Trupin, Stewart, Beach, & Boesky, 2002). With regards to inadequate personal support, it was found that unstable family and intimate relationships resulted in and were a result of insecure attachment style that subsequently caused an individual to adopt aggression as a problem-solving strategy, increasing the likelihood of engagement in aggression and violence (Levene et al., 2001). Lastly, the stress of providing and caring for children can increase the likelihood of a crime occurring. Having a low socio-economic status, misusing substances and receiving minimal social support increased the demands of motherhood, thereby contributing to offending (Greene et al., 2000).

The results of the systematic literature review supported the notion that there are specific risk factors associated with female offending. A limitation of the quantitative papers included in the review was that, with the exception of one study, there was a lack of comparison group of non-offenders. This makes it difficult to ascertain which of the identified risk factors are problematic in the short and long-term. Another limitation was the

lack of longitudinal studies in both qualitative and quantitative research. These are important in order to ascertain which risk factors are stable over a period of time. The review adds to the existing knowledge base of risk factors in female offending.

5.2.2 Chapter 3: Desistance from crime: Exploring factors related to the process of desistance in female offenders.

The research explored the process of desistance from crime in a sample of adult female offenders. The study consisted of two parts. The first part was an examination of the potential impact of a drama based therapy programme in promoting desistance from crime. The second part involved the analysis of interviews with female offenders on the topic of factors associated with desistance.

Quantitative analyses showed significant improvements in six out of seven dimensions on the IOMI. The following dimensions showed significant improvements: hope; interpersonal trust; agency/self-efficacy; well-being; motivation to change; and impulsivity. Only resilience was found to be insignificant; possibly a result of reliability and validity issues associated with this dimension. The significant findings obtained on agency, wellbeing and impulsivity supported the self-control theory (Gottfredson & Hirschi, 1990). It suggested that offenders had developed an awareness of things which may or may not have been in control, engagement in pro-social activities gave an offender confidence that they are able to do things to create a better life for themselves and increased their ability to plan and think through options. Association with a positive peer group also supported offenders to make conscious choices from a range of options. Significant findings on the interpersonal trust dimension supported social capital theory (Hughes, 1998) suggesting that offenders developed an increase in connectedness to a wider range of pro-social connections. The findings from the motivation and hope dimensions supported cognitive transformation theory

(Giordano et al., 2002) that offenders had developed an internal motivation to change and a sense of hope can be a catalyst for other dimensions whereby an individual adopts a flexible and a positive perception of the future, internal motivation, and agency.

With regards to qualitative data, the following themes were identified as being associated with the process of desistance: Skills and Attributes; The Usefulness of Programmes; Support; Purpose Driven Life; Risk Factors and Consequences.

The theme of 'skills and attributes' highlighted the importance of application of skills such as self-talk, 'stop and think', assertiveness, relaxation and mindfulness. It was found that such skills can assist female offenders in coping with difficult situations that can increase their risk of offending such as substance use and peer pressure (Chilvers et al., 2011; Deffenbacher et al., 2002). There was notable support for the Geese Theatre group attended by the offenders that supported the existing research on the value of creative arts and practical methods in the process of desistance (Baim et al., 2002). Other programmes identified as useful included parenting, domestic violence, substance use and counselling. The benefits noted from the parenting course were a unique finding. As highlighted in the thesis that parental stress was identified as a risk factor for offending in mothers, it is plausible that learning obtained from the parenting course on how to show affection and appropriately discipline children, supported mothers to appropriately care and provide for their children. This reduced parental stress which is linked with offending such as neglect (Schaffner, 1997).

The findings showed that female offenders valued the support of their family, friends, children and partners. In addition, participants reported that spirituality provided a sense of belonging. Spirituality was considered to be a form of social support as the beliefs were incompatible with offending behaviour. However, within the sample, desistance only came into effect if parents, partners and friends were non-criminals and did not use substances such

as alcohol or drugs, highlighting the importance of an appropriate personal support network (Barry, 2010; Bui & Morash, 2010). Offenders also valued the support of professionals involved in their care such as probation officers, case workers and group facilitators. This indicates that offenders who are able to form good therapeutic working relationships with professionals, go onto make positive changes in their lives (Healy, 2012). The findings from the study also supported the work of previous research that employment and education reduces offending (Craig & Foster, 2013; Verbruggen et al., 2012). Female offenders in the study identified fears that may serve as a deterrent for future offending, thereby strengthening the process of desistance. It was found that a potential return to prison or court, losing their children, not meeting their future goals and disappointing others were associated with desistance. The findings support the work of Michalsen (2013) that a high perception of punishment increases the likelihood of termination of offending.

The findings of the research offer support for a range of desistance theories such as: cognitive transformation (Giordano et al., 2002); self-control (Gottfredson & Hirschi; 1990); self-identity (Maruna, 2001); social control (Hirschi, 1969) and social capital (Laub & Sampson, 2001). The importance of willingness to change supported the cognitive transformation theory that female offenders' capability and motivation to change helped them in their efforts to desist. This also supports the Multifactor Offender Readiness Model (MORM; Ward, Howell, Day, & Brigen; 2004) stating that individuals with high level of motivation are more likely to engage with and benefit from treatment offered.

Offenders who received positive peer support in group programmes for example, found their peers supported them to find better ways to control their impulses to offend. This helped offenders to develop or increase self-control and fulfil their goals in a more appropriate manner. In terms of self-identity, offenders' ability to successfully apply skills to manage their urges and cravings associated with offending helped them to see themselves in a

positive light. Additionally, having the opportunity to engage in employment and mentoring schemes improved an offender's sense of self-worth as they started to see themselves as a positive role model and a help-giver.

Support for the social control theory was demonstrated as it highlighted the value offenders placed on emotional bonds with partners, children and other family members. The offenders stated that they were less likely to engage in offending, as they did not want to put attachments with their children in particular, at risk. There was also notable commitment to employment and education, which participants felt helped in terms of providing them with a routine, a legitimate way of earning money and reducing boredom; the offenders no longer saw the need to deviate from these institutions. Similarly, with reference to social capital theory, 'turning points' identified were employment, education and the most recent contact with the Criminal Justice System. The need to maintain children's return to the family home after significant efforts from the mother's part was a 'turning point' for many mothers to mark an end to their offending.

The findings from the research study showed that motherhood, application of skills to manage trauma and domestic violence, fear of prison or court, related to loss of children, and being a positive role-model, were factors considered by the participants to be particularly relevant to their journey of desistance from crime. The current findings added to the limited research available on desistance in female offenders, particularly in the UK. The research also explored life stories of female offenders through interviews. The sample consisted of a group of female offenders who have not well expressed in the literature previously. The offenders in the study are general adult offenders in the community undertaking programmes that are different from the treatment as usual and potentially unique i.e., dramatherapy and parenting.

5.2.3 Chapter 4: Critique of a psychometric; Intermediate Outcomes Measurement Instrument (IOMI; Maguire et al., 2014).

The IOMI was examined in order to assess its suitability in measuring an offender's progress towards desistance from crime. A critique of such a measure allows a researcher and a practitioner to gain an understanding of the impact that a programme may have on offender rehabilitation.

The IOMI assesses an individual's change over time in key psychological dimensions and the significance they attribute to practical problems. It consists of seven dimensions of change associated with desistance: resilience, wellbeing, agency/self-efficacy, impulsivity/problem-solving, motivation to change, hope and interpersonal trust. In addition to this, it contains assessment of practical problems covering the following areas: money, employment/prospects, health and fitness, housing, drugs, alcohol, relationships and gambling.

The IOMI has moderate internal consistency and test-retest reliability. Although further work is required in terms of its validity, the scale is one of few instruments of outcome measures available in the field of arts and mentoring, in assessing their contribution to the theory of desistance. It is also of note that IOMI was only developed in 2014 and is still in its draft stages. Various community and prison projects around the country are currently testing its psychometric properties in a series of pilot projects which, over time, will give the authors a better understanding of its reliability and validity. However, the IOMI has potential for a number of policy and practice related purposes. It can support evidence that a particular intervention has helped offenders to achieve positive changes likely to contribute to desistance from crime. Furthermore, a large national dataset could examine relationships between specific dimensions and their contributions to desistance theory.

5.3 Thesis Strengths and Limitations

This research added to the existing knowledge of desistance, specifically the very limited information available on female desistance from crime. This thesis has provided some insight into *what works* with female offenders in trying to break the cycle of offending. Furthermore, it would appear that, to date, there is no other study on female desistance carried out in the UK. This study serves as an important addition to existing literature, in that, it offers practitioners further insight into the process of desistance from crime among female offenders in the UK. Such information could subsequently lead to the further development of effective support and interventions for this population, and ultimately lead to an increase in desistance from crime.

An additional strength of the research is that the data collected through the IOMI questionnaires will be used as part of a national study by NOMS to refine the psychometric properties of the measure with a view to increasing reliability and validity. That being said, the quantitative research was conducted with female offenders in the community and the sample size for quantitative analysis was small which means that the findings should be interpreted with some caution and that it is not possible to generalise results to female offenders in other settings such as prison and inpatient secure services. The study also notes some psychometric issues with the IOMI measure and due to the issues of validity with the IOMI, the findings from the quantitative analysis at the present time should be taken with caution when comparing with other measures of intermediate outcomes. Once the measure has been finalised, comparisons with other measures of similar nature can be carried out with greater confidence. The study also notes the lack of a control group for the quantitative analysis which would be necessary to investigate the impact of the Geese Theatre group. However, as mentioned, findings from the quantitative study are considered to be promising.

This study has identified areas for future research and, in addition, the findings have potential for informing clinicians and services how best they can support female offenders to desist from offending.

5.4 Application of Findings

The findings of the literature review and research project have shown that female offenders are vulnerable individuals who have often had adverse experiences in childhood and/or adulthood. Furthermore, it is evident that many female offenders have struggled to cope with the demands of society, such as looking after children or the household. Factors including lack of adequate personal support and the stress of social difficulties can lead to difficulties such as mental health and emotion dysregulation. From the perspective of female offenders interviewed, an inability to cope effectively with negative emotions increased the likelihood that they would commit a crime. Such negative emotions were said to result from factors such as the stress of not being able to provide and care for their children and/or the stress of being in abusive relationships. These findings are important as it further supports previous findings that female offending may be a result of their interpersonal difficulties, for many stemming from their early childhood experiences (Carr & Hanks, 2012; Nuytience & Christiaens; 2016). Such information will be beneficial for clinicians and other practitioners in that it provides further evidence of the need for interventions to provide emotional support and address interpersonal difficulties.

It is important that practitioners consider the risk, need and responsivity model when working with female offenders. The model can assist practitioners to formulate their client's risk to self and others, their needs based on their psycho-social history and how they may respond to interventions taking into consideration their diagnoses, style of learning, personal strength and motivation levels. For example, a female offender who suffered from

victimisation in the past finds it difficult to manage her emotions. The offender also has convictions for violent offences. Practitioners working with such an offender can use the risk, need and responsivity model and consider suitability for interventions including self-compassion, anger management and emotion regulation. These interventions can help the individual to address the needs such as low self-esteem, validation that the abuse was not their fault, better regulation of emotions and learn appropriate ways to manage their behaviour when presented with a difficult situation. By addressing these needs, the risk of harm to others can be reduced. A range of interventions are available to support female offenders to manage their stressful life experiences and develop coping strategies. For example, Dialectical Behaviour Therapy (DBT; Linehan, 1993) was initially designed for individuals with Borderline Personality Disorder but in recent years it has shown to be effective with individuals with difficulties with substance misuse and victims of sexual abuse (Decker & Naugle, 2008; Linehan et al., 1999). DBT helps individuals to regulate their emotions and cognitions with concepts of acceptance and change. As noted in the thesis, female offenders often have difficulties with interpersonal relationships and emotion regulation, it is therefore suggested that probation officers and case workers should consider using DBT more widely with their female clients. This therapy requires considerable commitment from the client as there are four key modules involved (mindfulness, emotion regulation, interpersonal effectiveness and distress tolerance) but it provides a toolkit of skills to manage psychological and social difficulties that can have long lasting effects.

Responses provided by female offenders in interviews highlighted the importance of repairing strained relationships with their parents as they wanted them involved in their rehabilitation. Behaviour Family Therapy (BFT; Falloon, 2015) for example is a practical, skills based intervention that involves sharing information with the client and their family about the client's mental disorder (e.g., anxiety, depression, eating disorders, personality

disorder etc.), experience and treatment. BFT promotes positive communication, problem solving skills and stress management within the family. Whilst acknowledging that this treatment may not apply to all female offenders, it may be suited for those who suffer from a mental disorder. In the current sample, offenders suffered from anxiety, depression and eating disorders; thus such individuals may benefit from therapies such as BFT.

From the interviews carried out with offenders, it was noted that the role of a parent was both a risk and a protective factor. It was found that mothers engaged in offending such as shop-lifting and substance use in order to fulfil their role as a parent which they were unable to facilitate as they did not engage in legitimate forms of employment i.e., to provide food and gifts for children, to pay for demands of education such as day-trips and to pay for bills. Equally, when offenders lost/regained contact with their children, the fear of losing and/or disappointing their children was a protective factor to desist from offending. The offenders learned the importance of legitimate forms of employment and seeking support from others in order to sustain contact with their children. As part of this process of desistance, psycho-education interventions such as parenting and domestic violence were identified as useful in supporting female offenders broaden their repertoire in caring for their children and also to identify the early warning signs of an abusive relationship. These interventions were however only available at one centre. As participants benefit from such courses, it is suggested that other centres should consider using such interventions with female offenders. Although the findings of this thesis cannot be generalised fully to prison and in-patient settings, it is worth considering whether such interventions may benefit offenders in prison or a secure hospital and patients whose children were removed from them or who are slowly re-gaining access to their children or who have been victimised in abusive relationships. However, it is important to note that female offenders are not a homogeneous

group in terms of their backgrounds and issues experienced; such interventions should therefore be tailored to individual needs.

Geese Theatre group was highlighted as a key alternative form of psycho-education by all the offenders who took part in the interviews. Research has noted that merit is given to creative arts such as drama therapy in offender rehabilitation (Baim et al., 2002). It is therefore suggested that more opportunities should be created to offer interactive therapies such as drama, art therapy (a form of psychotherapy that uses art as its primary mode of expression and communication) and dance and movement therapy (a form of expressive therapy that looks at the association between movement and emotion) that can support female offenders to address their thoughts, feelings and behaviours using personal yet practical approaches (Smeijsters, Kil, Kurstjens, Welten, & Willemars, 2011).

Lastly, the findings showed the importance of offender rehabilitation centres for women. These are hubs that provide access to a range of therapies, peer support, employment opportunities, skill facilitation, routine and reintegration back in the community. The findings of the current research suggest that female offenders sentenced for short custodial sentences may not be able to access appropriate interventions within the time they are in custody. However, they may be able to access the interventions within the community instead. This suggests the need for similar centres across the country which have a particular focus on women which could potentially serve as an alternative to custodial sentences. The findings support the work of Corston (2007), who argued that female offenders have complex needs and their problems tend to begin long before they enter the Criminal Justice System, but due to lack of support available to address their needs, their problems become entrenched. Corston (2007) also emphasised that as female offenders' stay in the Criminal Justice System often does not address their multiple needs, their cycle of re-offending continues. It was also explained that as prison appears to be an expensive and sometimes ineffective way of

addressing the needs of female offenders (who sometimes do not pose a significant risk of harm to society), Corston (2007) highlighted the importance of alternatives to custody for this group of offenders. Centres such as Together Women, Calderdale Women Centre, The Women's Turnaround Project and Anawim have shown reduction rates in reoffending when offenders have positively engaged with the centre (Anawim; 2013; Earle, Nadin, & Jacobson., 2014). This suggests that further provisions for similar centres across the country, particularly women's centres, can serve as an alternative to custodial sentences.

A service that has links with external agencies such as creative arts, psycho-education programmes and employment may be equipped to address the complex needs of female offenders at different stages in their efforts of desistance. Where female offenders have been imprisoned for less serious offences, they may receive a short custodial sentence which may not involve any significant intervention to promote desistance from crime. It is therefore suggested that female offenders who engage in less serious offences may benefit from support in the community as an alternative to prison, particularly if they are not able to access the rehabilitative interventions that they need during their short stay in prison. This alternative is currently being trialled by the West Midlands Police (Police and Crime Plan 2016 – 2020) in their 'New Chance' programme which aims to divert female offenders who have committed minor crimes away from custodial sentences by providing both practical and emotional support in the community.

5.5 Future Research

The findings of this thesis have identified areas for future consideration in the field of female offending. Where conducting future quantitative research, it is suggested that comparison or control groups are included in order to determine which factors are, or are not, significantly linked to desistance from crime. In addition, valuable information could be

gained from conducting interviews with female offenders who continue to re-offend which may provide insight to barriers to desistance from crime. Furthermore, in order to establish the effectiveness of a treatment programme, it is suggested that control groups are used. It is further suggested that more research be conducted to assess the effectiveness or impact of both existing and emerging programmes through both qualitative and quantitative methods.

When conducting both quantitative and qualitative research on the topic of desistance, longitudinal studies are useful in that they allow a researcher to examine certain factors over a period of time and, for example, to assess whether certain interventions are effective in the long term. It is therefore suggested that future qualitative research to include a series of follow up interviews to explore which factors associated with desistance are stable over time and whether the effects of the treatment programmes are also maintained.

Lastly, as mentioned throughout this thesis, research on female desistance is relatively scarce. Thus any efforts undertaken by researchers to explore this through adopting quantitative, qualitative, or mixed methodologies will assist in furthering our knowledge in the field. This can then further inform clinicians and services to appropriately support female offenders in their efforts to desist from offending and lead a healthy, happy and prosocial life.

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APPENDICES

Appendix 1 –Search term syntax

Applied Social Science Index and Abstracts – Proquest (ASSIA)-1987- 19 April 2017
females
OR (female criminals OR criminal behavio?r)
AND (crime OR offend*)
OR female delinquency OR criminal conviction OR legal arrest OR criminal record
AND (risk factor* OR risk population)
OR (psychosocial factors OR predisposition OR causality OR socio-cultural factor)
AND (pathway OR model OR psychological theories)
AND (adult)

PsychINFO – 1967 to 19 April 2017
1. human females/
2. wom?n.mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
3. female criminals/
4. criminals/
5. criminal behavior/
6. crime/
7. offend*.mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
8. female delinquency/
9. criminal conviction/
10. legal arrest/
11. criminal record/
12. risk factors/
13. at risk populations/
14. psychosocial factors/
15. predisposition/
16. causality/
17. sociocultural factor/
18. pathway$.mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures]
19. models/
20. psychological theories/
21. 1 or 2 or 3
22. 12 or 13 or 14 or 15 or 16 or 17
23. 18 or 19 or 20
24. crime/ or arson/ or driving under the influence/ or hate crimes/ or human trafficking/ or illegal drug distribution/ or kidnapping/ or exp serial crime/ or exp theft/ or vandalism/ or exp violent crime/
25. exp bullying/ or exp harassment/ or exp relational aggression/ or stalking/ or teasing/ or torture/
26. 4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 24
27. 12 or 13 or 14 or 15 or 16 or 17 or 25
28. 21 and 26 and 27

29. 21 and 23 and 26 and 27
30. 21 and 23 and 26
31. 21 and 22 and 26
32. limit 31 to (adulthood <18+ years> and "0100 journal" and journal article and english)
33. limit 30 to (adulthood <18+ years> and "0100 journal" and journal article and english)
34. limit 29 to (adulthood <18+ years> and "0100 journal" and journal article and english)
35. 32 and 33 and 34
36. 32 or 33 or 34

WEB OF SCIENCE (WOS)- 1987 to 19 April 2017
1. human females
2. female criminals
3. criminals
4. criminal behavio?r
5. crime
6. offend*)
7. female delinquency
8. criminal conviction
9. legal arrest
10. criminal record
11. risk factors
12. risk population
13. psychosocial factors
14. predisposition
15. socio-cultural factor
16. pathway
17. models
18. psychological theories)
19. #3 OR #2 OR #1
20. #10 OR #9 OR #8 OR #7 OR #6 OR #5 OR #4
21. #19 OR #18 OR #17
22. #22 AND #21 AND #20
23. #22 AND #21 AND #20
    Refined by: **TOPIC:** (adult) AND **LANGUAGES:** (ENGLISH) AND **DOCUMENT TYPES:** (ARTICLE)
24. #16 OR #15 OR #14 OR #13 OR #12 OR #11
25. #25 AND #21 AND #20
26. #25 AND #22 AND #21 AND #20
27. #25 AND #21 AND #20
    Refined by: **TOPIC:** (adult) AND **LANGUAGES:** (ENGLISH) AND **DOCUMENT TYPES:** (ARTICLE)
28. #25 AND #22 AND #21 AND #20
    Refined by: **TOPIC:** (adult) AND **LANGUAGES:** (ENGLISH) AND **DOCUMENT TYPES:** (ARTICLE)

Appendix 2- Inclusion and Exclusion form

Inclusion/Exclusion Criteria	Yes (included)	No (excluded)
Was the study published after 1987?		
Is the paper an empirical research paper?		
Is the paper written in English?		
Does the study investigate female offenders?		
Are all of participants in the sample above the age of 18?		
Are all the participants in the sample females?		
Are the female participants in the sample non-sex offenders?		
Does the study make comparisons with other adult females (offenders or non-offenders)?		
If longitudinal/cohort study, is the participants initial age of testing 18 or above?		
Do the studies aims/objectives include investigating the characteristics and/or the typologies of adult female offenders?		

Appendix 3 – Quality assessment form

Qualitative

Question number	Assessment of Quality	Guidance for scoring	Score
1	Is there a clear statement of the aims of the research?	*Yes-* clear description of the population, clear description of risk factors studied, clear description of research's importance and relevance *Partially-* clear description of some but not all the factors (i.e., population, risk factors, importance, relevance) *No-*No description of the population, risk factors, importance or relevance *Don't know/Unsure-* the objectives of the study is not clearly described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
2	Is a qualitative methodology appropriate?	*Yes-* the research seeks to interpret experiences of participants therefore the qualitative research is the appropriate methodology to address the research goal *No-* the qualitative research is not the appropriate methodology to address the research goal *Don't know/Unsure-* the chosen method is not clear.	Yes-2 No-0 Don't know/ Unsure-unclear
3	Was the research design appropriate to address the aims of the research?	*Yes-* clear description and justification of the research design is provided, the process of selecting the research design is reported. *Partially-*research design selected and reported but description, justification or process of selection is not clear *No-* qualitative analysis was not used *Don't know/Unsure-* not sufficiently described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
4	Were the participants recruited in an acceptable	*Yes-*participants were selected using a reliable system,	Yes-2 Partially-1

	way?	recruitment process described, participants are a representative of a defined population (i.e., female offenders), information provided on those who refused to take part *Partially* - met some of the expectations of the sample, unclear recruitment process *No* - participants were not selected in an acceptable way (e.g., recruitment process not described, not representative of the population, no reliable system etc) *Don't know/Unsure* - lack of description to make comprehensive judgement	No-0 Don't know/ Unsure-unclear
5	Was the research conducted in the same way across all participants?	*Yes*-Risk factors/offending behaviour explored in the same way for all participants *No*- Risk factors/offending behaviour are not explored in the same way for all participants *Don't know/Unsure*- Risk factors/offending behaviour for participants not adequately described	Yes-2 No-0 Don't know/ Unsure-unclear
6	Was the data collected in an acceptable manner?	*Yes*- clear information provided on setting for data collection, how the data was collected (e.g., focus group, interview etc.), justification of data collection, form of data collection (i.e., notes, audio/video recording) *Partially*- met some of the expectations, information is not justified *No*- no process, description or rationale for data collection *Don't know/Unsure* methods of data collection is not clearly described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
7	Were the methods for data collection clearly described?	*Yes*- explicit information provided on method used (e.g. topics discussed, how the	Yes-2 Partially-1 No-0

		interviews/focus groups were facilitated, duration etc), if necessary clear justification and process of modification of method is provided, issues around data saturation are discussed *Partially*- information is provided but is not explicit, process of modification or data saturation is not justified/ discussed *No*- no information or justification of methods of data collection or data saturation *Don't know/Unsure* – methods of data collection is not clearly described.	Don't know/ Unsure-unclear
8	If the follow up period was applied, is it sufficiently described and reported?	*Yes*- follow-up period described and reported *N/A*- follow up period not applicable to the study *Partially*- follow up period described or follow-up period reported *No*-no follow up period described or reported	Yes or N/A-2 Partially-1 No-0
9	Were drop-out rates recorded?	*Yes*- Drop-out rates and stage drop-out recorded *N/A*- drop- out rates are not applicable *Partially*- Drop-out rate reported but stage of drop-out not *No*- drop-out rate not recorded *Don't know/Unsure*- not sufficiently described	Yes or N/A-2 Partially-1 No-0 Don't know/ Unsure-unclear
10	Was the research conducted by trained professionals?	*Yes*- professionals are trained (psychologists or others trained to carryout qualitative research and/or trainees/researchers under supervision) *Partially*-research assistants/trainees with no experience or supervision *No*- no professional was trained to administer the tool *Don't know/Unsure*- not adequately described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear

11	Has the relationship between researcher and participants been adequately considered?	*Yes*-clear description of: how the researcher was introduced to participants, researcher-participant rapport, potential influences on the rapport or formation of the questions and data collection (recruitment and setting), how the researcher responded to events during the data collection process, clear justification of consideration of any changes in the research design and implications *Partially-* some but not all information is provided <u>or</u> information is not justified *No-* issues surrounding researcher-participant relationship is not considered, the researcher is biased and has influenced formation of questions and data collection. *Don't know/Unsure* – issues surrounding researcher-participant relationship are not clear to make comprehensive judgement	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
12	Were the ethical issues taken into consideration?	*Yes*- participants were provided with all the relevant information highlighting ethical issues (e.g., consent confidentiality, harm to participants, effects of disclosure etc.) participants were debriefed following the study. *Partially-* some but not all the ethical standards were maintained <u>or</u> ethical standards are not fully described/ justified *No-* ethical standards were not maintained. The study is flawed and participants were at risk/harm *Don't know/Unsure-*ethical standards described are not clear to make a judgement	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
13	Was the data analysis	*Yes*- the analysis process is	Yes-2

	conducted appropriately?	explicitly described including the analysis used (e.g., grounded theory, IPA etc), categories/themes are clearly described and justified, data presented is sufficient, where appropriate contradictory data is taken into account **Partially-** data analysis is described but not justified **No-** no process of how data was analysed, no themes/categories **Don't know/Unsure-** not adequately described or justified	Partially-1 No-0 Don't know/ Unsure- unclear
14	Are the findings clearly described?	**Yes-** findings are explicit, looks at evidence for and against, findings are underpinned by existing research/theory, findings are related to the research question. **Partially-** findings are described but is not clearly linked with theory/research or research question **No-** findings do not relate to theory or the research question **Don't know/Unsure-** not sufficiently described	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
15	Is the credibility of the findings discussed (i.e., is the research valid?)	**Yes-** clear information and justification is provided on triangulation (e.g., different sources of information are used, data is analysed by different researchers etc.), more than one interviewer is selected, participant validation **Partially-** information is provided but not justified **No-** issues around triangulation, more than one interview or participant validation are not discussed **Don't know/Unsure-** information is not clear to make a judgement	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
16	Is the research valuable?	**Yes-** researcher discusses the contribution the study	Yes-2 Partially-1

		makes to existing knowledge or understanding of female offenders in practice and in theory, the findings highlights new areas of research, risk factors and offending behaviour can be predicted in other female offenders across different ages, ethnicity, offender type and settings (secure/community) *Partially-* can be applied in some but not all areas. *No-* findings cannot be applied to female offenders in theory or in practice *Don't know/Unsure-* not sufficiently described	No-0 Don't know/ Unsure- unclear
			Total: /32 **Unclear:** /15

Quantitative

Question number	Assessment of Quality	Guidance for scoring	Score
1	Were the objectives of the study clear?	*Yes*- clear description of the population, clear description of risk factors studied, study tried to detect a beneficial or harmful effect *Partially*- clear description of some but not all the factors (i.e., population, risk factors, beneficial or harmful effects) *No*-No clear description of the population, risk factors, beneficial or harmful effects *Don't know/Unsure*- the objectives of the study is not clearly described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
2	Did the authors use an appropriate method to answer their question?	*Yes*- the chosen method (case control, cohort, randomised control trial, cross sectional)answers the study question *No*- the chosen method (case control, cohort, randomised control trial, cross sectional) does not answer the study question *Don't know/Unsure* = the chosen method is not clear.	Yes-2 No-0 Don't know/ Unsure-unclear
3	Were the participants recruited in an acceptable way?	*Yes*-participants were selected using a reliable system, recruitment process described, participants are a representative of a defined population (i.e., female offenders), ethical principles adhered to (i.e., female offenders, vulnerability of the population considered) *Partially* - met some of the expectations of the sample, unclear recruitment process *No* - participants were not selected in an acceptable way (e.g., recruitment process not described, not representative of the population, no reliable system etc)	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear

		Don't know/Unsure - lack of description to make comprehensive judgement	
4	If controls were used, were they selected in an acceptable way?	Yes- controls were a representative of a defined population (i.e., female offenders), they were selected using a reliable system (e.g., matched, randomly assigned etc.), recruitment process described, the numbers selected were sufficient Partially - met some of the expectations of the sample, unclear recruitment process No – the controls were not selected in an acceptable way (e.g., recruitment process not described, not representative of the population, insufficient numbers etc.) Don't know/Unsure - lack of description to make comprehensive judgement N/A- controls were not used	Yes or N/A-2 Partially-1 No-0 Don't know/ Unsure-unclear
5	Was the operational definition of outcome clearly stated?	Yes- clear definition of risk factors and offending behaviour underpinned by strong rationale/theory/ Partially- risk factors and offending behaviour used as outcome but not clearly defined No- no clear definition or rationale for risk factors/offending behaviour Don't know/Unsure - risk factors/offending behaviour not described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
6	Were the methods for obtaining the outcome clearly described?	Yes-Reliable system for sourcing data described e.g., Risk factors (e.g., psychometrics) and Offending Behaviour (e.g., police records and hospital records) Partially- sources mentioned but methods on how they were obtained not adequately described or methods are	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear

		mentioned but sources are not identified ***No-*** no system to measure outcome established ***Don't know/Unsure –*** No information available to establish a system but the method/results suggest there may be	
7	Was the outcome measured in the same way across all participants?	***Yes-***Risk factors/offending behaviour measured in the same way for all participants ***No-*** Risk factors/offending behaviour is not measured in the same way for all participants ***Don't know/Unsure-*** Risk factors/offending behaviour for participants not adequately described	Yes-2 No-0 Don't know/ Unsure-unclear
8	Were the psychometrics used administered by trained professionals?	***Yes-*** professionals are trained (psychologists or others trained to administer the tool and/or trainees/researchers under supervision) ***Partially-***research assistants/trainees with no experience <u>or</u> supervision ***No-*** no professional was trained to administer the tool ***Don't know/Unsure-*** not adequately described	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
9	Did the authors use multiple sources of information to score the psychometrics?	***Yes-*** multiple sources of information used (file info, interviews, records etc) ***Partially-*** more than one source used but not all potential sources ***No-*** only one source of information used ***Don't know/Unsure-*** No information available to establish use of other sources but the method/results suggest they may have	Yes-2 Partially-1 No-0 Don't know/ Unsure-unclear
10	Do the outcome measures reflect what they are supposed to measure (i.e.,	***Yes-*** psychometrics used to assess risk factors/offending behaviour are appropriate to	Yes-2 Partially-1 No-0

		use with offenders, underpinned by research/theory and are reported ***Partially-*** psychometrics used to assess risk factors/offending behaviour are appropriate to use with offenders but are not clearly underpinned by research/theory <u>or</u> are not reported ***No-*** authors do not report validity of the psychometrics, risk factors and offending behaviour rates are not recorded ***Don't know/Unsure-*** not sufficiently described to make judgement	Don't know/ Unsure-unclear
11	If the follow up period was applied, is it sufficiently described and reported?	***Yes-*** follow-up period described and reported ***N/A-*** follow up period not applicable to the study ***Partially-*** follow up period described or follow-up period reported ***No-*** no follow up period described or reported	Yes or N/A-2 Partially-1 No-0
12	Was missing data dealt with appropriately?	***Yes-*** where possible missing data was reported and taken into account for psychometrics (i.e., not included in analyses or adjustments made) ***N/A-*** the study did not have any missing data and reported this ***Partially-*** missing data was reported but not taken into consideration in analyses/adjustemnts ***No-*** missing data was not dealt with at all ***Don't know/Unsure -*** not sufficiently described, study did not report whether there was any missing data	Yes or N/A-2 Partially-1 No-0 Don't know/ Unsure-unclear
13	Were drop-out rates recorded on the studies?	***Yes-*** Drop-out rates and stage drop-out recorded	Yes or N/A-2 Partially-1

		N/A- drop- out rates are not applicable *Partially-* Drop-out rate reported but stage of drop-out not *No-* drop-out rate not recorded *Don't know/Unsure-* not sufficiently described	No-0 Don't know/ Unsure- unclear
14	Were appropriate statistical tests used for the research design and question?	*Yes-* appropriate quantitative analysis was used to analyse the results (e.g., (ROC/AUC statistics, correlations, Multivariate statistics e.g regressions) *Partially-*quantitative analysis used but not the appropriate statistical test *No-* quantitative analysis was not used *Don't know/Unsure-* not sufficiently described	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
15	Were potential confounders taken into account?	*Yes-* any or most of potential confounders were taken into consideration *Partially-* Some efforts made to control for confounders *No-* no effort made to control for potential confounders *Don't know/Unsure-* not enough information given	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
16	Are the results reliable?	*Yes-* effect size is appropriate, results are significant, results are underpinned by research/theory, results are not due to chance/bias/confounders, no significant flaws in methods/design to make the results unreliable, benefits to research and practitioners is outlined *Partially-*met some of the expectations, but some flaws are present (e.g., in design/method, effect size is small, benefits etc) *No-* results are not reliable- too many flaws *Don't know/Unsure-* not	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear

		sufficiently described	
17	Can the results be generalised to other female offenders?	*Yes-* risk factors and offending behaviour can be predicted in other female offenders across different ages, ethnicity, offender type and settings (secure/community) *Partially-* risk factors and offending behaviour can be predicted in some but not all areas (e.g., age, ethnicity, offender type and settings: secure/community) *No-* risk factors and offending behaviour cannot be predicted in other female populations *Don't know/Unsure-* not sufficiently described	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
18	Do the results of the study fit with other available evidence? a)Yes b) Partially c) No d) Don't know/Unsure	*Yes-* results are supported by theory/existing research using other methods e.g., RCT, cohort studies etc. *Partially-* results are supported by theory/existing research but are not described *No- -* results are not supported by theory/existing research and are not described *Don't know/Unsure-* not sufficiently described	Yes-2 Partially-1 No-0 Don't know/ Unsure- unclear
			Total: /36 **Unclear:** /17

Appendix 4 – Data extraction form

General Information

Title	
Author	
Year	
Country of Origin	

Method

Type of study	
Recruitment process	
Sample size	
Participant characteristics	

Quantitative

Measures used	
Validity of measures used	
Statistical tests	
Findings	
Strengths	
Weaknesses	

Qualitative

Data collection method	
Analysis method	
Findings	
Main themes	
Strengths	
Weaknesses	

Score

Quality Score	
Percentage	

Appendix 5- Intermediate Outcomes Measurement Instrument (IOMI)

Please say whether you agree or disagree with the statements on the next two pages by circling a response, for example:

I enjoy watching movies	Strongly agree	(Agree)	Neither agree nor disagree	Disagree	Strongly disagree

Please answer all of the questions and remember that there are no right or wrong answers.

When answering the questions, think about how you feel today.

1. **I have close friends I can trust**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
2. **I don't really think about what I'm doing, I just do it**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
3. **There are people who really understand me**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
4. **My problems will dominate all of my life**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
5. **I often do the first thing that comes into my head**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
6. **There are people I can turn to when I have a problem**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
7. **I tend to bounce back quickly after hard times**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
8. **I make good decisions**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
9. **I feel confident**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
10. **I feel hopeless about my future**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
11. **There are some people who I trust**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
12. **I feel good about myself**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
13. **I feel capable of making decisions**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

14. **I have a hard time making it through stressful events**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
15. **I owe it to myself to change**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
16. **My life is full of problems which I can't overcome**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
17. **Anyone can talk about changing themselves; I'm actually going to do something about it**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
18. **I often do things without thinking of the consequences**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
19. **I usually deal with problems well**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
20. **I am confident that I can cope with unexpected events**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
21. **I am really working hard to change my life**	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Please indicate whether the problems below are a big problem for you or no problem for you by circling a response to the right of the statement. Please answer all of the questions and remember that there are no right or wrong answers.

1. **Problems with money**	Big problem	Problem	Small problem	No problem at all
2. **Problems with employment/ prospects**	Big problem	Problem	Small problem	No problem at all
3. **Problems with health and fitness**	Big problem	Problem	Small problem	No problem at all
4. **Problems with housing**	Big problem	Problem	Small problem	No problem at all
5. **Problems with drugs**	Big problem	Problem	Small problem	No problem at all
6. **Problems with drink**	Big problem	Problem	Small problem	No problem at all
7. **Problems with relationships**	Big problem	Problem	Small problem	No problem at all
8. **Problems with gambling**	Big problem	Problem	Small problem	No problem at all

Appendix 6- Descriptions of the dimensions of the IOMI

Dimension	Description	Interpretation of a low score	Interpretation of a high score
Resilience	Resilience is a complex skillset or capacity which allows an individual to recover from adversity, and to "move on" in a positive manner to reconstruct or begin again. It is related to individual coping skills (and efficacy), but also to wider relationships and support networks.	Those with low resilience are more likely to give up in the face of setbacks ("what was I thinking - nothing will change for me"). Those with low resilience are also more prone to depression.	Increased capacity to move on and continue to try, even in the face of setbacks and adversity.
Agency / self-efficacy	This dimension is about whether an individual is able to make autonomous and independent decisions about their own lives - and to "make things happen" in the outside world as a result of those decisions.	Passivity in relation to decision-making about one's own life. A perception that "things happen to me", rather than "I make things happen". Prioritisation of luck, or fate.	Increases in the individual's confidence in their own ability to make decisions about their own future, and to implement plans that they make to bring about change.
Hope	Essentially, hope is anchored in a calculation about perceived scope for positive future change. It is also linked to motivation and to self-assessments of efficacy.	A sense that the future is hopeless (feeds in to low agency, low motivation etc.). Low levels of resilience based on inaccurate perceptions and assumptions that are associated with a lack of hope. Sense that since it is inevitable that things will not work out well for me; I should therefore cut my losses and reduce my effort and commitment.	A new sense of hope – this could be a catalyst for a number of other changes e.g., a more flexible and positive perception of the future, internal motivation, and agency.

Dimension	Description	Interpretation of a low score	Interpretation of a high score
Wellbeing	This is a somewhat broader dimension than the others, which is usually defined in terms of general or overall mental/emotional/psychological health or balance. Our own construct involves a closer focus on positive self-regard, and confidence.	Low levels of positive self-regard, or self-esteem. Low levels of confidence.	Improvements in self-perception, estimations of self-worth. Increased levels of confidence.
Motivation to change	This dimension is strongly linked to positive engagement, and a key focus within it is on internal rather than external motivation.	Low levels of engagement with activities that may help with desistance (e.g., education, employment, programmes, etc.). Engagement with activities through external motivation (e.g., a desire to fake good, kill time, play the game). High levels of internal motivation to continue with offence-supportive activities.	Shift from no motivation to high levels of internal motivation. Shift from external motivation to internal motivation. Increase in levels of engagement – in the project's work, or with other interventions. Reduced internal motivation to continue with activities which support offending.
Impulsivity / problem-solving	Impulsivity and problem-solving are closely linked. Impulsive behaviour is marked by a lack of reflection and planning, and therefore by a disregard of the consequences of behaviour. People who are highly impulsive also generally lack well-developed problem-solving skills.	High levels of impulsive behaviour. Poor problem solving skills based on inaccurate perceptions, perceived limited range of options, no contingency planning.	Reduced levels of impulsivity. Increased ability to make conscious choices from a range of options. Increased planning and ability to think through options and consequences. Increase in focus and discipline – the ability to concentrate on one thing for a period of time.

Dimension	Description	Interpretation of a low score	Interpretation of a high score
Interpersonal trust	This dimension concerns attitudes toward and connectedness with others (with strong links to notions of social capital).	Other people are out to get me, dog eat dog attitude, people can't be trusted. Lack of interest in others. Sense of persecution, no one cares about me. Sense of being isolated and disconnected (indication of a lack of social capital, low skills, or poor attitudes towards others).	Increase in positive attitude towards other people. Increase in connectedness (to a wider range of people, pro-social connections).

Appendix 7- Opt out Form

Opt Out Form

Geese Theatre Company will facilitate a drama therapy group at the ……………….. Centre. As part of the group, Geese Theatre staff will meet with you to complete a short questionnaire (IOMI) before and at the end of the group. The questionnaire will allow us to assess any changes that may have occurred from participating in the group in helping you to continue with your journey to lead a healthy and a safe lifestyle.

Neha Purohit is working with Geese Theatre Company and will evaluate the group programme as part of her Doctorate research at the University of Birmingham. Your scores on the questionnaire before and after the group will contribute to the current research on working and supporting women who have experience of the Criminal Justice System.

If you do not wish to share your results on the questionnaire as part of the research, please complete the form below and hand this to staff from Geese Theatre Company. You can withdraw your results anytime during the group or up to 4 weeks after the group

Thank You

Signed: _____

    Neha Purohit

I understand that Neha Purohit will be conducting a research as part of the Geese Theatre Group. I do not wish for my results on the IOMI questionnaire to be included in this research.

Name: _____

Signed: _____

Appendix 8- Consent Form

Informed Consent

Geese Theatre Company will facilitate a drama therapy group at the ……………….Centre. The group will last for ………… weeks, each session lasting 2 hours per week. The group will start on………….. (date) and is expected to finish on………….(date). The group will take place every …………..….. (day) at ……..…. (time) in……………. (room details).

As part of the group, Geese Theatre staff will meet with you to complete a short questionnaire (IOMI) before and at the end of the group. The questionnaire will allow us to assess any changes that may have occurred from participating in the group in helping you to continue with your journey to lead a healthy and a safe lifestyle.

You are also invited to take part in an interview at the end of the group. The interview will give you an opportunity to reflect on your experiences of the group and the journey you have made so far. Your participation will contribute to the current research on working and supporting women who have experience of the Criminal Justice System. The interview will be carried out by a researcher (Neha Purohit) who will evaluate the group programme as part of her Doctorate research at the University of Birmingham. The interview will be recorded on an audio-recorder and the tape will be destroyed once it has been transcribed. Any information that you share will remain confidential and anonymised. This means that paperwork will be stored in a locked cabinet and the only person who will have access to this is the researcher and her supervisors. Also, if the project is put in for publication, your personal details will be anonymised and your identity will not be disclosed. However, if there are concerns regarding harm to yourself/others or disclosure of your contact with the Criminal Justice System that is not known to your Case Worker/Probation Officer, the researcher is obliged to share this information with these individuals. This is to ensure appropriate support can be given to those affected as necessary. You can ask for the results of the questionnaires and interview at the end of the research if you wish to do so.

If you have any questions regarding the research, please contact your case worker who will then contact the researcher.

Please tick

I confirm I have had the opportunity to read the information presented	
I have had the opportunity to ask questions and these have been answered satisfactorily	
I understand that my questionnaires and interview in the programme (if I choose to do the interview) will be used by the researcher as part of her Doctorate research project at their university. My responses will remain confidential and my anonymity will be maintained. I understand and agree to the limits of confidentially as outlined above,	
I understand that I can withdraw my consent for sharing my participation for the research purposes anytime during the group. When the group has finished, I can still choose to withdraw my data up to 4 weeks after the group and/or up to 4 weeks after the interview. I can withdraw my data by contacting my case worker	

at the Centre who will let the researcher know. If I decide to withdraw my responses, the questionnaire and interview will be removed/destroyed.	
I agree to attend the group	

_____   _____   _____

    Your name   Signature   Date

_____   _____   _____

    Staff name   Signature   Date
(Geese Theatre Company)

_____   _____   _____

    Researcher name   Signature   Date
(Student of Forensic Psychology
Practice Doctorate, University
Of Birmingham, Edgbaston,
Birmingham 15 2TT, tel:..........)

Appendix 9- Ethical Approval from the University of Birmingham

The approval letter is redacted to protect confidentiality.