Successful rehabilitation: the experience of charities working with short sentenced offenders (less than 12 months) with substance misuse problems after discharge from prison

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ABSTRACT

An individual released from prison after a period of time is more likely to experience mental health problems (Bradley, 2009). That individual often faces issues like unemployment and homelessness; drugs and alcohol are then used to overcome problems, leading to re-offence to fund the habit. The criminal justice system and the voluntary sector have always worked together to support ex-offenders on their way towards a successful rehabilitation. This study was designed to conduct a primary qualitative research to investigate charities and explore how they support ex-offenders. It was found that although they both work towards the same objective, the government and the voluntary sector do not share the same opinion on what “success” means. This was understood to be a determinant factor in the way government policies are designed and how charities support their clients. As recommendations, policies on offenders management should be made not only based on cost effective procedures but by considering the needs of the offender. Also, future studies could follow the implementation of the new regulations, and include the service users in the research, in order to explore their perspectives on the services they receive as part of their rehabilitation as well as their mental well-being.
DEDICATION

Lovingly dedicated to my parents Berthe and Damien Atangana
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Chapter 1 INTRODUCTION

Prior to embarking on this research programme at the University of Birmingham, my interest in mental health and community well-being led me to work as a mental health mentor with Sova in Essex. Sova is a charity that works at a community level to help people avoid committing crime by providing support and guidance to individuals facing difficult situations.

This chapter is an introduction to all the aspects involved in my research, the overall objective is to identify throughout the process of this dissertation, a specific area of concern as a background for my future doctoral research.

1.1 Aim of the study

The specific aim of this project is to conduct a primary qualitative research study that will investigate different charities involved in the rehabilitation of ex-offenders with substance misuse problems after they are discharged from prison following a short sentence that is less than 12 months. The approach will be to conduct semi-structured interviews with key members of staff in different charities in order to explore the experiences and perspectives of charities in their work in supporting ex-offenders (as defined above) towards successful rehabilitation.

1.2 The raison d’être of this research

Growing evidence suggests that properly implemented community sentences combined with payback and rehabilitation programmes can lead to an effective response (Ministry of Justice, 2010). In fact, diverse programmes and charities operating at a community level are, like Sova, very dedicated in assisting ex-offenders in turning their lives around and staying clear of crime. Nevertheless, the re-offending rate continues to increase every year, predominantly in those sentenced for
less than 12 months (Craig et al, 2013). During the time I spent working with Sova and in collaboration with other organisations involved in the rehabilitation and well-being of ex-offenders, I realised that despite all the efforts and dedication from volunteers and the rest of the staff aimed at supporting their clients (here ex-offenders), most of them re-offended or just stopped engaging with support services. Craig et al (2013) have also suggested that substance misuse is a risk factor that has repeatedly been identified in cases of violent recidivism. Another issue to be raised is the fact that, in comparison to the general public, prisoners are relatively more likely to experience mental health problems; this is explained by the fact that the prison environment can be seriously damaging to mental well-being. According to Bradley (2009), an estimated 95% of offenders are believed to suffer from mental disorders and be subject to substance misuse or both. I humbly hold the view that this research will help understand the correlation between successful rehabilitation on one side and mental health and well-being of ex-offenders on the other. It may also inform and prepare the ground for future research studies on the effectiveness of rehabilitation programmes, through an understanding of existing support services and identification of areas requiring improvement.

The methodology I have chosen to conduct this study is a descriptive qualitative design. The goal for this master by research programme is to explore how the different charities involved in short sentenced offenders’ rehabilitation programmes intervene to help them with their substances misuse and mental health issues. The rehabilitation of ex-offenders (as defined above) is an intervention involving numerous agencies, intervention programmes, and organisations working closely towards the same goal. In order to carry out an effective evaluation of the work done by those organisations, semi-structured interviews were conducted with charity workers that support
ex-offenders towards a successful rehabilitation. Such interviews are driven by the question “What works for whom, in what circumstances and in what respects?” (Pawson et al, 2005).

In order to avoid bias, as I have been a charity worker in the same capacity, the present research is taking place in a completely different geographical area from where I have worked and involves projects other than those to which I was a party. The study is set in Birmingham. With over 1 million inhabitants (Campbell et al, 2012), Birmingham is one of the largest cities in England. The Crime and Disorder Reduction Partnerships (CDRPs) has identified drug treatment and offenders management as a priority to tackle the issue of prolific offenders in the city. As a result, Birmingham is home to multiple services working towards the rehabilitation of ex-offenders (Millie and Erol, 2006).

1.3 Research question and objectives

Research question

• What are the perspectives of service providers on their contribution to the mental health and well-being of ex-offenders?

Objectives

• Explore the range of services provided by charities supporting ex-offenders on their journey towards rehabilitation.

• Investigate the perspectives of service providers on successful rehabilitation.
Chapter 2 RESEARCH CONTEXT

The aim of this chapter is to describe the research context from which the research questions and issues arise. In other words, the idea is to present and critically analyse publications that are relevant to the researched topic and can give an understanding of the setting in which the research is conducted. This is done by scrutinizing recent research studies on ex-offenders (as defined above), current guidelines and actions undertaken by the government to ensure appropriate support after release, and identification of the different types of third sectors organisations involved in the rehabilitation of those ex-offenders. I also outline information and thoughts gathered while: attending charities’ information sessions, assisting to charities’ evaluation meetings and chatting with charities workers. These data are worthy as they could complement or point out possible similarities and differences with information collected during interviews with key charities workers.

2.1 The concept of Rehabilitation

The World Health Organisation (WHO) (2014) has defined rehabilitation as a process that enables people with disabilities to attain and retain their ideal physical, intellectual, sensory, psychological and social functional levels. Nevertheless rehabilitation remains a vast concept and its focus and definition may sometimes vary from one context to another. For example there are terms such as Cognitive rehabilitation in neuropsychology, which is a wide-ranging cognitive boost programme in which cognitive stimulation, training and other approaches are used in a bio psychosocial context, in order to understand dementia (Choi and Twamley, 2013); and drug rehabilitation which is the term for the medical and psychotherapeutic treatments used for people addicted to psychotropic substances such as prescription drugs, alcohol, heroin, cocaine or amphetamines, that affect the central nervous
system (Madgula et al, 2011). Then there is rehabilitation counselling in which a specialised counsellor co-operates in a professional relationship with individuals to realise their personal, vocational, psychological and social goals (Mullins et al, 1997). In fact a specific definition of rehabilitation is yet to be agreed in the medical profession.

Ward and Maruna (2007) have stated that rehabilitation of ex-offenders is a constant and active educational problem solving process on the part of the support worker, focused on the person’s behaviour with components such as assessment, goal setting, intervention and evaluation. However, the two authors added that this definition might sound awkward for the average person within the criminal justice arena (probation officer or an offender) unless they are following a substance use programme or taking medication for their mental well-being. Therefore, according to Ward and Maruna (2007), we should also strive for the return of the old fashioned definition of rehabilitation, which is helping people who want to go “straight”. When reviewing the concept of desistance, Maruna (2001) has found that even though for some people, desistance is a process that leads to a crime free life, and for others it is more about the lived experience of going straight, the two are complementary for a better understanding of desistance. Evidently, when it comes to the penal system, it is not so easy to define the term rehabilitation. In fact as far as offenders are concerned, rehabilitation could be understood in many ways as stated by Raynor and Robinson (2009). In their paper, Raynor and Robinson (2009) discuss that even though the goal is usually reducing re-offending, some rehabilitation programmes in the criminal justice system focus on other goals such as the restoration of broken relationships, the redemption of human souls, or the security of everyday life; which creates a dynamic of whether rehabilitation here is about helping the individual to become a better person or a better citizen. On the basis of the work carried out by Raynor and
Robinson (2009), McNeill (2014) established that rehabilitation in this context could be defined based on the interrelationship between four components of rehabilitation: psychological rehabilitation that focuses on behavioural change and personal development that will address the individual problems; judicial rehabilitation that stresses on matters around punishment; then there is social and moral rehabilitation that work on doing something better with or for the individual: it could be bringing stability to their lives by giving them the opportunity to be a useful part of society or by changing them into making better choices.

Although differing from a context to another, the essence of the concept of rehabilitation seems to remain the same. In other words, whatever the context, rehabilitation is an instrument that when successful enables people to live independently and participate actively and positively in civic life. Right of entry into rehabilitation will favour key life elements such as health and quality of life by ensuring that: people’s basic needs are met and guaranteeing that they are a valuable part of society. Rehabilitation as a whole is the joint efforts of people receiving help, their families, the community and health, social, governmental and non-governmental services.

2.2. Setting the scene

For many years, the debate has been increasing about public protection against offenders (Henson and Rionrdan, 2012). As a result over time, probation services have been working more closely with other agencies, particularly health and social services, the police and voluntary organisations. According to Henson and Rionrdan (2012) the objective has been to ensure a better risk management and risk assessment when it comes to public safety; hence the multi-agency model.
The review undertaken in this chapter gives a background and an insight into the work of the criminal justice system, the voluntary sector and complementary agencies working with ex-offenders in the United Kingdom. It will enable us to examine the different types of organisations within the voluntary sector and their relationship with the criminal justice system; the recommendations and procedures in place to support ex-offenders, especially short sentenced ones, with substance use issues and all the measures taken to ensure their mental well-being.

2.2.1. The Criminal Justice System

In the United Kingdom, the Criminal Justice System (CJS) comprises the Ministry of Justice (MoJ) and the National Offender Management Service (NOMS), which is the organisation in charge of managing offenders and reducing reoffending. It embodies the Probation Service and the Prison Service (Clinks, 2012). It was created to serve purposes such as: protecting the public, penalising criminals and supporting them to reform. Despite its determination, almost half of all crime is perpetrated by people who have already been to prison; with most of the offences occurring within the first 12 months of release, the level of recidivism is still high and costs are estimated at 9.5 to 13 billion British pounds per year (Shonin et al, 2013). The reoffending rate is particularly high in prisoners sentenced to less than 12 months, it has increased to 58% (Prison Reform Trust, 2015); and adults of this group were not getting supervision from the Probation Service upon release from prison (Lai, 2013).

Added to that, one major problem faced by the criminal justice system in the country is prison overcrowding, with new prisons being built and among which some are privately run (Heidari et al, 2014). This seems to lead to further issues, because as argued by Grayling (2013), The Justice Secretary, at a point in time, most people in custody will be released and they will be in need of supervision and assistance in order to get back on track and not make the same mistakes again. The challenge will
then be to ensure that those who break the law are not only punished but also receive mentoring and rehabilitation support to get their lives on track so they stay clear of crime. According to Johnson and Godfrey (2013), in the last years successful rehabilitation has not been an easy task; especially with high levels of recidivism of those who have served short prison sentences. For that purpose, a new programme of reform called “Transforming Rehabilitation” was recently put together in order to change the way offenders are rehabilitated; contracting more than half of essential probation work to the providers within the voluntary and private sector, instituting a payment by result model (Guilfoyle, 2013), and covering the statutory supervision of individuals released from prison after a sentence of less than 12 months (Annison et al, 2014). According to the Secretary of State for Justice, “Transforming Rehabilitation” will help to guarantee that all those who are sentenced to prison or community sentences are not only well punished but also assisted in turning away from criminal activities for good after serving their sentence (Newburn, 2013).

2.2.2. Introduction to the voluntary sector within the criminal justice system

From the early Discharged Prisoners’ Aid Societies and police court missionaries to today’s Probation Service, the voluntary sector is known to have been supporting offenders and their families since the 19th century (Mills et al, 2011). Despite this long history of support, the successful rehabilitation of offenders and ex-offenders is still a major issue in today’s society. The voluntary sector seems to have tried various approaches and procedures over the years in order to bring adequate support to offenders and ex-offenders. According to Mills et al (2011), the main umbrella body for organisations working with offenders, over 1,200 voluntary organisations are believed to support offenders and ex-offenders both in prisons and in the community in the United Kingdom. These organisations, commonly referred to as charities, play an important role in helping the statutory sector to meet their goals, and they are
funded through grants, run fundraising activities, sales of goods and services. Most of the charities in the criminal justice system are independent and run locally. This can constitute an advantage as it gives them credibility with their clients who are ex-offenders and offenders, and help them build and maintain trust. In fact, the state has acknowledged its inability to fully address the experiences of people with complex needs (Bond-Taylor, 2014); and unlike the statutory sector, the voluntary sector can be more innovative and responsive. Added to that, its predisposition to being holistic permits it to meet complex individual needs in varying conditions before, during and after sentencing. Numerous voluntary organisations do not necessarily target ex-offenders but incorporate them within their clients because of the nature of their job (Clinks, 2013).

Nowadays voluntary organisations provide huge and extensive services to their clients ranging from advice and advocacy to spiritual guidance, mentoring and peer mentoring schemes. Also, they provide rehabilitative and resettlement services such as drug and alcohol treatment, employment and training, housing aid and many more. They can focus on a specific group: young people, women, men, and families, short sentenced and remand prisoners, minority ethnic, refugees and others (Clinks, 2013). Regardless of the focused area or the targeted groups, interventions and approaches taken by organisations supporting ex-offenders into turning their lives around are focused on what are believed to be the typical needs of the individual upon release. Those are accommodation, education training and employment, health, drugs and alcohol, finance benefit and debt, children and families, attitudes thinking and behaviour (Markson et al, 2015). Tomczak (2013) has stated that, charities in the criminal justice system are a mixture of organisations that work exclusively with offenders and/or their families and organisations for which offenders and/or their families are one part of their various client groups. Examples mostly include charities
that provide drug and alcohol services; as well as charities that support the socially excluded like the homeless.

Organisations in the voluntary sector have a wide range of functions, not only can they provide direct support to their clients, like delivering trainings for skilled jobs and providing guidance, but they can also support them by other means. (Billis and Glennerster (1998), have mentioned voluntary groups running with a mutual aid function; the attention here is on self-support and interchange around a common need. One good example is the ACT 4 Women Project in Merseyside, which is a project that provides opportunities for project beneficiaries, unemployed women ex-offenders, to give support to their peers in reaching their goals (Tomczak, 2013). There is also a managing or caring function, where an umbrella organisation will care for other voluntary organisations by engaging in activities that will serve their members, such as communicating rules and codes, and offering practical aid (Brandsen et al, 2007). A perfect example is Clinks that supports voluntary organisations working within the criminal justice system (Tomczak, 2013). It is worth mentioning that the Resettlement and care for older ex-offenders and prisoners (RECOOP) (2014) has recently added two additional pathways, which are abuse and prostitution. It is well known that ex-offenders constitute a vulnerable group in society, however within that group some such as the disabled, the old people and those involved in prostitution might be considered more vulnerable. Hence adding abuse and prostitution to the pathways of reducing re-offending is comprehensible.

To sum up, the voluntary sector could be defined as a system of organisations that carry out a vast scope of activities and services. Not only they do not seek profit from the work they do, they are also non-governmental. This sector plays a vital role in the society, and the population that donates a considerable amount of their time and money fortifies its work greatly.
2.2.3. Who is the ex-offender?

Under the Rehabilitation of Offenders Act 1974, most convictions are considered spent after a five years period; convictions that lead to fines, probation and community service orders are perfect examples. Convictions that result in conditional discharges are usually spent after a year, sentences that lead to prison sentences of, for example, six months, become spent after seven years and condemnations that result to prison sentences of two-and-a-half years and more can on no occasion be spent (Home Office, 2002). The fundamental question here is: when does the individual lose the label “offender” and become “ex-offender” or the person he or she used to be before the offence?

According to information gathered from a chat with a probation office during fieldwork, the individual remains an offender if he or she is still under supervision after release. This is confirmed by various reports from the Ministry Of Justice (2010). However for the purpose of this research, that same individual will be qualified as an ex-offender if he or she has been released from prison and is engaging with voluntary organisations and other agencies to start a new life outside the criminal realm.

At the exemption of few blogs in which the terms “offenders” and “ex-offenders” are often presented as being offensive and judgmental towards people with convictions, there has not been a “real” debate on the issue regarding the technical term versus the assumptions about the person.

2.2.4. The substances misuse and mental illness factor

Substance misuse refers to the detrimental or dangerous use of psychoactive substances, including alcohol and illegal drugs (WHO, 2015). More than 50 percent of prisoners are believed to meet the criteria for substance abuse and addictions. Moreover, sustaining such behaviour after discharge has been associated with
criminal reoffending (Malouf et al, 2012). According to the Prison Reform Trust (2015), 64 percent of those in prison were known to have been using drugs in the four weeks preceding custody and 70 percent admitted of being under the influence of alcohol when they committed their offence. This is the reason why it is important to understand the risk factors for substance abuse amongst this group not only from a criminal justice point of view but from a health point of view as well. As reported by Wright (2014), substance misuse is believed to be instrumental in mental health issues (for example, cannabis to psychosis, alcohol to depression); and also it could be a consequence, for instance drinking alcohol heavily in order to cope with anxiety. It was found out that after leaving prison, most people with mental health issues are also reported to have a substance use problem. Moreover, a substance misuse problem is a serious relapsing issue and having a dual diagnosis is very common among people who are in the criminal justice system and have mental health issues (Hartwell et al, 2012).

According the WHO (2013), mental health also known as psychological well-being is a fundamental part of an individual’s ability to live a satisfying life, with the capacity to form and maintain relationships, to work, and make everyday decisions regarding housing, employment, education and other choices. Consequently, disruptions to the individual’s mental well-being can weaken the capacity of functioning at the individual level, and extend to broader welfare losses for the household and society. Markowitz (2010) has stated that the interdependence between mental health and criminal justice systems has been demonstrated as early as the year 1939. Nowadays, about 60 percent of prisoners have history of mental health illness, and despite mental health services provided in prison settings, many leave prison without appropriate treatment due to the lack of screening procedures (Drapalski et al, 2009) and suitably trained staff (James and Glaze, 2006). Torrey et al (2010) went further in their study
by stating that the number of persons with mental health issues incarcerated is three times higher than those in psychiatric institutions. Also, the prevalence of issues such as depression mild personality disorder, stress and anxiety is known to be much higher in prisoners compared to the general population. In fact, rates regarding those issues have been estimated between 30 to 75 percent in the United Kingdom (Leigh-hunt and Perry, 2015).

Recently, the Prison Reform Trust (2015) has reported that 25 percent of women and 15 percent of men in prison custody have reported symptoms suggestive of psychosis. Also, in the last two years the rates of self-harm have increased by 13 percent; 46 percent of female and 21 percent of male prisoners have tried to commit suicide at some point in their lives. Markowitz (2011) also found that only a small percentage of people with mental health problems are at risk of violent or criminal behaviours. In fact, a person who is mentally unstable is more likely to be a victim than a crime perpetrator (Ascher-Svanum et al, 2010). However, the increase in the rate of violent and further varieties of crime has led to a noticeable larger number of people with mental disorders involved in criminal justice. In addition, evidence has put forward that when mental health disorders involve paranoia or a delusional definition of the situation, it can instigate aggression (Felson et al, 2012).

It has been suggested that for people with mental health issues who are out of the criminal justice system, paid employment is usually effective in contributing to mental health improvement (Mueser et al, 2011). Hence the need to provide extra support to ex-offenders with mental health issues, in order to lay emphasis on both reducing the risk of reoffending and improving the socio-economic well-being by bringing stability to those willing to turn their lives around.
There is a number of rehabilitation programmes committed to supporting ex-offenders after their release from prison. The main goal of those programmes is to cut down the risk of offender recidivism by encouraging ex-offenders to change their habits and adopt a pro-social lifestyle. Each of these programmes uses a plurality of strategies in order to reach their goal (Wood et al, 2009). Forensic mental health professionals have found that the core components of interventions configured to support mentally ill offenders to re-integrate the community successfully include:

“A focus on stabilising the offender's illness; enhancing their independent functioning; maintaining their internal and external controls so as to minimise the likelihood they will act violently and commit new offences; Establishing a liaison between treatment staff and the justice system; providing structure in the offender's daily life; using authority comfortably; managing the offender's violence and impulses; integrating treatment and case management; obtaining therapeutic living arrangements; and, working with the offender's family to determine if they are a reliable source of social support ” (Griffiths et al,2007,13).

2.3. Ex-offenders: Management and Support

2.3.1. Transforming Rehabilitation

In the United Kingdom, 45 percent of offenders are believed to reoffend within a year (Prison Reform Trust, 2015). As mentioned previously, this reoffending rate is even higher in those sentenced to 12 months or less. In fact, nearly 60 percent of those are reconvicted within a year of release; and in those with more than ten convictions, 79 percent reoffend within a year (Collins, 2011). By introducing new procedures in terms of offenders’ management, in the name of “Transforming Rehabilitation”, the British Ministry of Justice has reaffirmed its intention to address the high rates of reoffending.
The changes within “Transforming Rehabilitation” involve having one and only National Probation Service, as opposed to the previous 35 individual Probation Trusts, that will manage high-risk offenders; and Community Rehabilitation Companies (CRCs) that will manage low to medium risk offenders and supervise short sentence offenders after release. From April 2015, the work carried out by the CRCs will be contracted out to organisations from the private and voluntary sectors. These organisations known as Tier 1 will be expected to build supply chains involving smaller organisations known as Tier 2 and Tier 3, in order to subcontract some of the services (Annison et al, 2014). Given that most voluntary organisations are small and local, and that they rely on volunteers, the main concern here remains as to whether these new arrangements will enable charities to compete equally with the private sector as well as larger and national organisations that typically receive the bulk of their funding from statutory sources. Even though it is still too early to make self-assured predictions, a fair amount of concern has already been expressed about the possible long-term consequences of the long-term impact that the new commissioning landscape will have on some of the key players, charities and their clients, involved in the process; the threat against the very essence of the voluntary sector which is the trust and engagement between service providers and service users, the voracity of large organisations when competing for contracts with smaller local providers, the decline of charities unable to compete and secure funding (Maguire, 2012).

The Breaking the Cycle Green Paper highlights that with the decentralisation of the criminal justice services, opportunity will arise for providers from all sectors to work together in the criminal justice system with the mission to make a ‘real difference’ (MoJ, 2010). However, it is worth mentioning that despite this positive policy rhetoric, there are disagreements between the voluntary sector’s core value of consideration
and attention to the needs of the offender as an individual (Silvestri, 2009) on one side and government policy on the other side. The government has often been in favour of punitive measures such as imprisonment and more intensive supervision in the community (Maguire, 2012). Also, service providers will be paid in terms of their success in reducing reoffending. A system of “will be payment by result” will be introduced to offenders in the community and custodial sentences (Ministry of Justice, 2010). Amongst other specific actions were the promotion of an integrated attitude in managing offenders and the production of more local performance data to favour good practice; the refinement of the effectiveness of community penalties and the introduction of a standard “health treatment requirement”; the introduction of payment by results for drugs services and intensive drug treatment in the community; the introduction of measures that will help offenders to move into employment and the restoration of the Rehabilitation of Offenders Act 19.

It could be argued that the new changes in the criminal justice system put the organisations of the voluntary sector at risk. This has already been mentioned by Tomczak (2014), who affirms in his paper that charities are shifting away from their primary mission in the quest for contract funding thus jeopardising their campaigning and advocacy roles, in favour of delivering services for statutory organisations. Neilson (2009) previously stated his fears in the fact that increasing numbers of voluntary organisations will compromise their independence and they will then become quasi- governmental: engaged with and dependent on the government. Therefore operating in this market-type model, based on competing funds, might pose risks in terms of ‘potential loss of the sector's distinctiveness and critical voice’ (Mills et al., 2011).
2.3.2. Support towards successful rehabilitation

It has long been documented that ex-offenders frequently face a series of nested problems that hinder their separation from crime. Those are complex issues such as accessing healthcare services, accommodation, relationship difficulties, benefits and financial management (McSweeney and Hough, 2006). Therefore, they might require additional support in order to be effective in their social reintegration process and stay out of trouble. As a matter of fact, accommodation is also believed to be central in facilitating access to other opportunities and services such as employment and healthcare (Millie and Erol, 2006). This was confirmed by a research conducted by the Ministry of Justice where it was shown that 74 percent of ex-offenders facing employment and accommodation problems are convicted during the year after their release, compared to 43 percent of those with no difficulty in either. Another fact to point out is that having paid employment is a crucial element in terms of health improvement and subsequently diminishes the chances of recidivism (Durcan, 2012).

Nevertheless, it is important to mention that bringing the focus of the intervention on only one specific issue might not be enough to support individuals effectively. One good example is one from the Audit Commission (2004). This is a case where despite the significant efforts put in drug treatment provision in lately, the absence of cohesive support in areas like employment, education training, housing and other aftercare needs frequently affects service efficiency and challenges any progress made. Coming back to the case of ex-offenders, it is well known that they have multiple and complex needs, that are often personal, social and health related. Consequently, it might be a very big challenge for clients to conform with and respond to the interventions they receive from supporting agencies. While it is clear that charities try their very best to tackle each one of ex-offenders needs, there is still much ambiguity concerning the best approaches to addressing the issue effectively. Whilst stable
accommodation and employment play a significant role in reducing the risk of reoffending by taking away the economic need involved in criminal activities, the motivation and the will not to reoffend are also necessary as far as the individual is concerned. Hence initiatives like mentoring schemes or supporting workers that assist clients in coping and overcoming crises that arise (Mullins et al, 2013). In a study conducted in England, Harrington and Bailey (2005) found that continuity of care was highly variable and the needs of ex-offenders were not frequently met. This was mainly due to the inability to identify the specific needs during the intervention process. On top of homelessness and unemployment, substance use has been found to be a causative component not only in the development of criminal behaviour but also in the development of mental disorder. In addition, the chances of having an addictive problem for those with mental health disorder are about three times higher than in the general public (Sheidow et al, 2012).

2.4. An insight into mentoring as an intervention

The Mentoring and Befriending Foundation (2008) has defined mentoring as a one to one relationship that is non-judgmental and in which an individual encourages and provides support to another. Many charities have used mentoring over the years, as they seem to believe that it makes a difference when it comes to supporting their clients into staying on the right track. As a matter of fact, there has been evidence of reductions in reconviction among clients who maintain contact with mentors after release from prison (Lewis et al, 2007).

Sova is one of the leading charity in the UK criminal justice system, that works essentially based on the principle that when facing difficult situations, all that is needed by individuals is somebody by their side to help them make a better choice so that they will stay clear of trouble and live better lives (Sova, 2012).
Mentoring is delivered in different ways depending on the charity or organization involved. It can involve peer mentoring schemes; programmes in prison, in the community and ‘through the gate’; programmes in which mentoring is the only or main service provided; those where it is delivered to support other kinds of interventions (Taylor et al, 2013). The common characteristic with all mentoring procedures is that the mentor – mentee relationship is often client led. This means that the content and objectives are adapted to the specific needs of the client and, therefore, may differ from one client to another (Taylor et al, 2013).

Depending on the clients’ needs, the work of mentors generally progresses towards the following goals:

Getting into employment: The vast majority of studies on the subject have found that, there is a clear association, between mentoring and the improvement in employment results. Also, it is well established that there is a correlation between increased employment and reduced reconviction (Social Exclusion Unit, 2002). Hence, the idea of having a mentor to support client into acquiring and sustaining a job could constitute an important factor in a successful rehabilitation.

Engaging in programmes and interventions: Even though there is a lack of conclusive evidence between programme engagement, the desistance journey and reduced reconviction, some studies have found that mentoring could be associated with increased involvement in other programmes intended to reduce reoffending (Bauldry et al, 2009).

Housing: There are proven empirical links between housing and reduced reoffending; however, those concerning the effect of mentoring on housing are still inconclusive (Taylor et al, 2013). It could be very difficult to find a direct link between mentoring
and housing, as housing issues are mostly based on specific council requirements, delay in paperwork and others, which are always beyond the control of individuals.

Health: One major aspect here concerns substance misuse. Findings are not always statistically significant but the association between mentoring and reduced substance misuse was recognized. Small sample sizes studies have reported mentees’ accounts of drawing great support from mentors at times when they were contemplating suicide (Taylor, 2013).

Attitudinal and cognitive change: Despite the lack of fully convincing evidence, the idea that mentoring has positive effects on coping, stress and on the way mentees view their day-to-day issues is supported by various studies. Lewis et al (2007) in their research study, found that although accommodation, drugs and education/training are often pointed as priority for most clients, a vast majority have affirmed that the benefits of working with a resettlement project were help on intangible areas such as “self-confidence”, “peace of mind” and “having someone to talk to”. They recognised the potential advantage of remaining in contact with someone, whether a volunteer mentor or a member of staff, to talk about their problems and day-to-day progress. A crucial point Lewis et al (2007) have reiterated is the argument that attention to offenders’ mental processes is a key factor in prompting change. That is probably where lies the benefit for ex-offenders to be in contact with people like mentors, who have more time to pay attention to individual needs by providing personal and emotional support.

A look at peer mentoring

Over the years, reports on desistance have emphasised the importance of both human and social principal (MoJ, 2013). While the human aspect stresses on the individual’s abilities and attitudes, the social aspect emphasizes the value of
relationships with others, as well as bonds and associations with those they equally stand to, commonly known as peers (Skrine et al, 2013). Andrews and Bonta (2010) have stated in their work that the role of peers can be a major risk and need factor for offenders. Moreover Boyce et al (2009) have previously made a fairly similar point, stating that the presence or absence of peer pressure can act as a stimulus either to reduce offending or to persist with it. In short, the quality and extent of peer relationships can influence antisocial behaviour and offending in different ways. Nevertheless, some charities have found success with peer mentoring. As a matter of fact, the High Sheriff’s Beat Crime Awards judging panel has acknowledged the success of the Sova Hertfordshire Mentoring project in reducing reoffending (Sova, 2012). Many of the mentors working in that project are ex-offenders and are considered to have a profound understanding of the challenges faced by people trying to turn their lives around, but they also act as great role models because of what they have achieved.

2.5. Statement of the problem

As part of the Criminal Justice Act (2003), a community sentence implies a choice of 12 different requirements that can be instructed to an offender to complete. For 3 of the 12 requirements: alcohol treatment, drug rehabilitation and mental health treatment, the length of rehabilitation will be from 6 to 36 months depending on the seriousness of the case and individual circumstances. For those three community sentences to be carried out, the offender must give his consent. In the case of drug rehabilitation, this is mainly due to ethical reasons; and regarding other elements discussed by Seddon (2007). While on community sentence, most offenders are required, under standard conditions, to stay out of trouble. Otherwise, the result could be a return to custody. Not only are offenders serving less than a year in custody given limited opportunity to engage with prison rehabilitation programmes, they are
also not entitled to probation supervision on release unless they are under 21 years old (Bradley, 2009). This is until “Transforming rehabilitation is fully effective.

Taking everything into consideration, it appears that an offender released from prison after a short sentence is most likely to experience problems with emotional well-being and mental health conditions. They are then prompt to use or re-use drugs in order to cope and consequently re-offending. Bradley (2009) seems to confirm this hypothesis as he stated that if the individual's mental health issues are not solved, chances of rehabilitation might be difficult.

Even though the context of rehabilitation here, is criminal justice, a work towards the successful rehabilitation of ex-offenders must embrace social, drug and mental health rehabilitation. According to Patel (2010), an effective and well-adjusted drug treatment and interventions co-ordination would have a positive impact in a variety of criminal justice and health outcomes, such as reducing drug-related offending and re-offending, public safety, individual drug user’s health and social functioning.

In fact, people who have a history of offending or reoffending usually have high health and social care needs; and accessing adequate services is not often easy for them (Davies et al, 2013); added to that, mental health issues, substances misuse and addiction are major problems amongst this population (Davies et al, 2013). Thus establishing health as one of the seven pathways designed by MOJ (2010) to reduce reoffending.

There has been considerable work in the community in terms of assisting ex-offenders with all aspects in the hope to reduce recidivism and keep the community safe. The specific aspect of this research will be to focus on charities working with ex-offenders who have been sentenced for less than 12 months and who have a substance use problem.
Chapter 3 RESEARCH DESIGN AND METHOD

The aim of this research study is to investigate the work of charities supporting short sentenced ex-offenders with substance misuse problems toward their rehabilitation. From information gathered, in regards to how charities support their clients on their journey towards rehabilitation and the perspectives of service providers on successful rehabilitation, the work undertaken will help understand the correlation between successful rehabilitation and mental health and well-being of ex-offenders. Also it will inform and prepare the ground for future research studies on the effectiveness of rehabilitation programmes through an understanding of existing support services and identification of areas requiring improvement.

To carry out the research, the original plan was firstly to determine how well existing national policies in terms of offenders’ management are put into practice; and secondly to examine the work carried out by service providers. I quickly realised that when it comes to guidelines and procedures, the field of criminal justice can be very dynamic; in other words things were changing a lot on the ground. This study started at the moment where the criminal justice system was going through major changes following the Transforming Rehabilitation, name given to the new government programme aiming to reform the way in which offenders are managed in the United Kingdom. Full details and information on the new programme were available on the Ministry of Justice website, and further clarifications could be found on Clinks website. However, as the new policies were yet to effectively take place on the ground, no literature could be found on how these new regulations translate into practice.

Instead, available publications on the matter could only make predictions about the potential effects of what is believed to be a marketisation of the offender management system (Bastow, 2014). As changes were happening at the moment the research was
being carried out, the best thing to do was to rely predominantly on data collected from the interviews conducted with stakeholders.

The approach used here was a combination of two qualitative exploratory designs. Firstly, a thematic analysis of the data was conducted in relation to the research questions by pinpointing themes and patterns through the data. This method allowed me to explore in detail the work done by stakeholders and their standpoints on offenders’ rehabilitation, to pin down emerging themes through specific words and sentences of the data that caught my eye, whether because they were mentioned numerous times or were somehow in relation to the research questions, and elaborate tentative theories. The study explored how stakeholders are affected by the existing and new policies in place and their determination in contributing to the mental health and well-being of their clients. Secondly, a research design inspired by the realistic evaluation approach of Pawson and Tilley (1997) was adopted. Unlike other evaluation methods, realistic evaluation has more of an explanatory rather than judgmental focus and is driven by the question “What works for whom in what circumstances and in what respects?” (Pawson et al, 2005). Pawson and Tilley (1997) have worked in developing “realistic evaluation” or “realistic review” based on the following definition of evaluation research by Campbell and Popper: evaluation research is a way of investigating and developing social theory with the purpose of informing the development of policy and practice (Tilley, 2000). They came to that conclusion by testing out the efficiency of interventions designed at dealing with specific issues prior to their general application. In this particular study, the specific issues we will be addressing are contributing effectively to the well-being of ex-offenders and working towards a successful social re-integration.

If like Popper, Pawson and Tilley interpret evaluation research as a way of testing and developing social theory, the major difference lies in some of the means in which
Campbell’s indications (Campbell and MacPhail, 2002) about research have been construed and mechanically applied. Unlike the questions asked in traditional experimentation, “Does this work?” Or “What works?” a realistic review put emphasis on “What works for whom in what circumstances?” (Pawson and Tilley, 1997). Thus the equation: Context + Mechanism = Outcome. In a realistic evaluation, the cycle starts with theories on how mechanisms are introduced in contexts to generate outcomes; consequently, hypotheses will be drawn from these theories with reference to what might work, for whom and in what circumstances. The hypotheses will then be verified through observations that will lead to programme specification on what works in reality; and these will make room for theory refinement where required (Figure 3.1).

In other words, measures vary in their impact depending on the conditions in which they are introduced. The goal in a research review is then to figure out how and under what circumstances a given measure will produce its impacts. Undoubtedly, the outcome is not always the one expected and sometimes it can be a concoction of predicted and unpredicted outcomes (Tilley, 2000).
Figure 3.1 The Realistic Evaluation Cycle (Pawson and Tilley, 1997, p.85)
In realistic review, there has to be an understanding of the context in which the programme is taking place (Pawson, 2013). In fact, whether a programme works or not will largely depend on the context and there are always different layers of context within a programme. If we take the example of the rehabilitation programme for ex-offenders (as defined above), does the programme work? The answer will depend on the context. The context here could be many things, the individuals involved in the programme, the inter-relation between the individuals, the institutions or the rules within the organisation and others.

Pawson (2013) has stated that social interventions being very complex, it is the job of the evaluator to recognise and understand that complexity. To help with this task, Pawson (2013) provided a checklist with the acronym VICTORE; each letter representing an aspect of complexity that is characteristic of all programmes.

**Volitions:** This implies the understanding of the people and stakeholders. In fact people interpret and react to a programme differently;

**Implementation:** involves understanding the programme from the top of the process to the bottom, as a programme susceptible of change throughout the process;

**Contexts:** which refer to the different individuals, institutions and infrastructures where the programme is set;

**Time:** taking into account the time frame within which a programme takes place is crucial;

**Outcomes:** programmes always have various outcomes and a good review should pursue compound outcomes;
**Rivalry:** most programmes are implemented and work alongside other programmes; and **Emergence:** Programmes are sometimes able to change or adapt to the conditions that make them work.

All researchers should consider these elements when embarking on the investigation of an intervention (McGrail, 2014).

According to Pawson (2013), realistic evaluation is multi-method and multi-evidence based, and qualitative data fits well with the idea of programme mechanism which is how stakeholders understand the resources that are given to them. This will then be the best way to answer the research questions of our study.

The idea will be to

- Start with a “mapping of the contours of complexity” for the different types of organisations involved in the rehabilitation of ex-offenders (as defined above), using the VICTORE specification. What this means is that realistic evaluation is shaped on the basic belief that programmes are complex interventions put into a social context (Pawson, 2013). Therefore, the first action to carry out as a researcher is to figure out how these organisations operate, for example how they recruit their clients, before considering all the parts in play;

- Research and collect information on programme theories and programme mechanisms, by reviewing government reforms on offenders’ rehabilitation; and by conducting interviews with stakeholders.

A major emphasis will be put on the Contexts and Outcomes. One of the main outcomes for this study is the successful rehabilitation of ex-offenders and working towards the enhancement of programmes that support the mental well-being of ex-offenders.
Comparative evidence from different organisations and subgroups of stakeholders will be used to find the contexts in this research. Although the main purpose of the research is to investigate how charities contribute to the emotional well-being of ex-offenders, we are also interested to know if they bring stability to their lives, help them further their education, support them effectively with their substance misuse problems, assist them in getting into employment, getting an accommodation and having a better social life.

The theoretical attitude implemented for this study is closely related to inductive thematic analysis in the sense that specific observations (as explained above) will be made within the data, independently from existing national policies (Braun and Clarke, 2013), and then patterns will be identified from the observations, followed by a broader generalisation and tentative theories (Gioia et al, 2013). In this study, instead of tentative theories or hypothesis I will sometimes use the term “programme specification”. In realistic evaluation framework, the programme specification is the theory or set of theories developed at the end of the research analysis and that will be essential to the understanding and indication for the implementation of programmes and development of further research studies (Webb, 2012). These will then be used to enlighten and prepare the ground for impending research in related areas.

3.1 Reflexivity

As a mental health mentor, I supported ex-offenders on issues around addictions, substance misuse, social integration, job search and relationships building. Despite being challenging at times, the experience was rewarding and worthwhile. I then found myself developing a major interest in rehabilitation, recovery and social inclusion within the sphere of criminal justice. It also prompted my interest to contribute in the health promotion among this population at individual and collective
levels. I quickly realised that there was a limited number of research studies that focus on ex-offenders in the criminal justice system and their mental well-being whilst on their journey towards social reintegration after release. In addition, I found out that even if mentoring seems to be a promising intervention, there is currently little or no evidence, within existing literature, in support of the effectiveness of mentoring in enhancing the mental well-being of those leaving prison with substances misuse problems after a short sentence (Bradley, 2009). Furthermore, mentoring was reported not to be an effective intervention for re-offending in a review article by Jolliffe and Farrington (2007). However it will be difficult to validate such findings in a British context as only 2 of the 18 reviewed studies were conducted in England and Wales. Besides, researchers on mentorship have mainly focused on three specific areas: youth, student-faculty relationship and within the work place and not much is known about mentoring within the sphere of criminal justice (Brown and Ross, 2010) and its relationship to emotional and mental well-being of ex-offenders.

In my experience providing support to ex-offenders, I have worked with clients who suffered from emotional problems and mental illnesses such as bipolar disorder, borderline personality disorders and depression. The day to day interaction with my clients has allowed me to see how those health issues can make it challenging for them when it comes to breaking the cycle of reoffending and turn their lives round. Apart from that, the weaknesses noticed in the system put in place to bring support to the ex-offender can sometimes also contribute to his/her backslide; which can make it more frustrating. For instance I remember one specific client, a 20-year-old male on methadone with no identity papers (except a prison identification document), homeless and unemployed. I started working with him right from the day he was released from a short prison sentence. The goal was to support him “until he gets back on his own two feet” which required getting him accommodation (in the
meantime he was staying in various homeless hostels), making sure he stays clear of
drugs, searching for jobs and most importantly getting an appropriate identification
document. Despite all the efforts made by his case worker, the earliest appointment
he could get for a new piece of identification was about 2 months from when he was
released. Given the fact that he lacked a proper document that could have allowed
him to be identified, he could not have access to housing or job seeker’s allowance.
Unfortunately 6 weeks later we lost track of him and he was eventually caught
shoplifting and subsequently returned to prison, one week prior to his appointment for
a new identification document.

From my daily experience working with ex-offenders and alongside people involved in
the process of their rehabilitation, not only has my perception of ex-offenders
changed, but I also started to value the determination of support workers in helping
their clients turning their lives around. This developed my interest in researching on
the issue; that is to understand the support system around ex-offenders, its effect on
their mental well-being and consequently the outcome in terms of recidivism.

This research inspired stakeholders to talk about their work by asking about their
views on offender management, their challenges as charity workers supporting ex-
offenders, in order to develop theory that will re-inforce or guide the efforts of policy
makers to assist ex-offenders effectively in a successful rehabilitation.

Lastly, thanks to my position as a researcher that has been a charity worker in the
same capacity as the participants, charities were eager to open their doors to me and
I found that participants talked to me easily and openly. These factors were
considered to be an advantage, as a matter of fact, according to Graneheim and
Lundman (2003), data created from interviews is shaped by the interaction between
the interviewer and the interviewee; communication is then very important. Also in
cases where the data collection and analysis is carried out by the researcher, training and experiences are a key element (Patton, 1990). As a result, to improve the credibility of my analysis, for each interview I tried to develop and maintain that good rapport with interviewees; and this has helped me conduct what I believe were valid and reliable interviews. Also, I tried to interview at least one participant from the various services within the charity; the objective was to collect different answers on the same specific issue. As for the analysis of the data collected, the themes I developed from the initial and the last stage of the analysis were discussed and agreed with my supervisors. I think this also reinforced the credibility of my analysis.

3.2 Ethical considerations

Due to the nature of the study, I needed ethical approval from the University of Birmingham Ethics Committee. The appropriate form was completed and submitted in May 2014 and the ethical approval was granted a few weeks later. The charities that participated in this were happy with the Ethics approval from the University of Birmingham. Those that requested for additional ethics review (within their own organisations) could not be considered for this research because the time for this study was very limited.

Throughout the research, I was careful in observing potential ethical obstacles bearing in mind the ethical issues subject to the study. Participants’ information sheets regarding the study were distributed to stakeholders as well as consent forms to those who agreed to take part in the interviews. A sample of the participants’ information sheets and consent forms used are presented in Appendix 1, along with the study’s application for ethical review form (Appendix III) and the interview schedule (Appendix II).
3.3 Data collection method

Primary research interviews were held with a range of stakeholders in Birmingham. The interviews were semi-structured; questions were open with the flexibility of exploring emerging topics as the interviews advanced. Whilst fundamental questions such as “How would you describe your organisation”, “what is the biggest challenge in your role” were asked to all participants (See Appendix), specific questions such as “what are the agencies you commonly work with?”, “In your experience so far is it something you can say works?” and “I guess you have to match mentors and mentees, how does it work?” were asked to respondents depending on their role in the organisation.

Semi-structured interviews were conducted with a range of stakeholders of participating organisations and charities including a mentor/counselor, alcohol support workers, volunteer/client, mental health workers, and mentors’ coordinators. A room in the organisation premises was used for interviews, as it was easier for the participant to take part in the interviews when on their breaks or in between meetings and appointments with clients. An effort was made to recruit at least one participant in each subdivision of the organisation. The point of contact was asked to recommend suitable participants; especially those involved directly with clients, in some cases those at a managerial position (mentors’ coordinator) and former clients now volunteering for the organisation when possible. After a general introduction, relevant stakeholders were identified and approached by myself directly. Informed consent to take part in the interviews was obtained and all interviews were audio recorded using a digital recorder.

Audio files were transcribed verbatim by the researcher on a personal computer, using the software “Inqscribe”. Transcriptions were done as recommended by Braun
and Clarke (2013). All verbal utterances from the interviewee were recorded in the transcript in written form both actual words and non-semantic sounds such as “hum” and “euh”; nothing was corrected or changed in order to produce a reliable interpretation of what was uttered; significant paralinguistic features of the data such as laughter were mentioned when obvious. In order to minimize transcriptions errors, punctuation was minimized: full stops were added when judged obvious, audio was double checked for intonation; quotation marks were included when the interviewee was reporting what someone said or what he/she said himself/herself at another point in time. Also transcripts were anonymized, names of charities/organizations, people and locations were changed to pseudonyms.

3.4 Data analysis strategy

When reflecting on the methodology to apply for the analysis, I was informed through my reading that interview transcripts could be analysed using various approaches such as grounded theory, interpretative phenomenological analysis (IPA), narrative analysis and many more. Nevertheless, my research did not deal with the participants' lived experiences and the purpose here was not to build theories (Braun and Clarke, 2013). The thematic analysis usually consists of three major stages that involve reducing or breaking down the text, then exploring the text and finally interpreting the examination (Attride-Stirling, 2001).

For my particular analysis I decided to use a thematic analysis following the framework developed by Braun and Clarke (2006). Thematic analysis is an approach used primarily to identify, analyse and report patterns within items of data (e.g. an interview) as well as across the whole dataset. It differs from other analytic methods like thematic discourse analysis or grounded theory in that it is not wedded to a particular theory or specifically used to develop theory (Braun and Clarke, 2006). The
flexibility given by this approach makes it possible to combine thematic analysis with the pragmatic outlook of realistic evaluation.

Thematic analysis was chosen because unlike for example IPA and grounded theory, it is not theoretically bounded despite seeking patterns in the data. Also, as argued by Braun and Clarke (2006), it can allow a more malleable form of analysis. Added to that, it can be a method that depicts ‘reality’ and unravels the surface of ‘reality’, which is a characteristic of critical realism. In the end, the most important aim will be to make sure that theoretical framework and methods put in place match what we want to know. The focus at this stage of the research was to highlight ideas, patterns, and specific observations based on context, mechanism and outcomes relating to the support received by ex-offenders. By reading and re-reading the transcripts with attention, I identified the procedures used by charities and the thoughts of the stakeholders that could be given a better perspective into ‘what works for whom, in what circumstances’. I then used that information to engage into the process of producing themes. A theme is a word or group of words derived from the data, and that comprehends an important point or idea in relation to the research question and denotes some level of significance within the data set (Braun and Clarke, 2006).

Therefore, thematic analysis offers the best qualitative research approach for a comprehensive investigation of the work of charities supporting ex-offenders and how it contributes to the mental well-being of their clients. This is the reason why this methodology was chosen to explore the views of charity workers supporting ex-offenders towards their rehabilitation in the city of Birmingham. The search for prevalent policy documents was conducted early in the study in May 2014. Signposting requests from probation services in Birmingham were also done around that time. Over the past 2 years, the Ministry of Justice has been working towards developing a “tough and smart” criminal justice system; especially targeting those
who have served or are serving short sentences (Allen, 2012). On one hand, this has led to a range of new and on-going publications in terms of policy on reducing reoffending and improving rehabilitation. On the other hand, it had made the fieldwork difficult as to reviewing the implementation of national policies in ex-offenders’ rehabilitation. In fact, when contacting probation services and charities working with ex-offenders, it soon became obvious that they were already affected by the current government changes. As a researcher at that point in time, it was difficult to get charities to discuss the issue as they were not sure of what the future held for them. Also it made it difficult to find participants; as a matter of fact one charity had to withdraw from the project because they had lost the funding in Birmingham. On another occasion, some of the participants had stopped working due to the charity losing funding for the particular project they were involved in. This resulted in only one interview being conducted in that specific charity.

Following emails and phone calls to about thirty charities and organisations, more than half failed to respond. Actually, in terms of emails, charities were contacted via the contact email address provided on their websites to which very few answered to. As for phone calls, sometimes phone numbers were not valid or there was just no answer (especially with very small charities); some other times when the phone calls were successful the line was passed on to various people and services or new phone numbers were given to contact but all attempts offered no prospects of progress.

Apart from that, several charities were not in a position to participate because they were being restructured, and bigger organisations requested additional authorisations from their research departments; which was inconvenient because the research project was only for a year. Five responsive charities were selected, contact was lost with one, another dropped out and some participants were lost in a third one. In the
end, eleven interviews were carried out. Table 3.1 presents a brief overview of participating organisations in terms of their central work focuses.

Charity 1: Five interviews; Charity 2: Five interviews and Charity 3: One interview.

Table 3.1 Charities’ overview

<table>
<thead>
<tr>
<th>Charity</th>
<th>Work focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charity 1</td>
<td>Tackling homelessness and alcohol misuse</td>
</tr>
<tr>
<td>Charity 2</td>
<td>Supporting women with complex needs</td>
</tr>
<tr>
<td>Charity 3</td>
<td>Dealing with addictions (drugs, alcohol and gambling)</td>
</tr>
</tbody>
</table>

At the initial stage of the coding the size did not matter, themes were mainly: words, group of words and sometimes sentences. Criteria of initial coding was done with flexibility: prevalence across the entire data, pointed out by interview, relevant to the research question, captures something important in relation to the research question, judged important by the researcher, somehow driven by answers to the “what works for whom in what circumstances” question.

I used an inductive approach. Here, the themes identified are purely connected to the data themselves (Schulz, 2012). In fact, the coding process was without bias and data were coded with no attempt to follow an established coding frame. I read and re-
read the transcripts of any theme related to offenders’ support, mental health, substance use, well-being; and the coding process was carried out peculiarly in regards to the research questions, and without taking into consideration preconceived ideas or knowledge on the topic. Themes were thoroughly identified, the process evolved from description where data were organised and summarised to reflect patterns, prevalence and importance to interpretation where there is an effort to elaborate hypothesis in regards to the patterns and their implications and meanings, in relation to existing policies.

3.5 Thematic analysis step by step

The process started with the observation of patterns and issues of prospective interest in the data and the endpoint was the reporting of the final themes isolated from the data. The analysis was carried out following a continuous back and forward between the data, the coded extracts of data analysed, and the analysis of the data produced. The entire analysis process was done following the recommendations of Braun and Clarke (2006) and can be understood following six steps (Table 3.2).

3.5.1 Phase 1: Familiarising myself with my data

The main characteristic shared by all the participants was that they were employed by charities and organisations supporting ex-offenders. Upon presenting the study to the participant and getting consent to contribute, an interview (approximately 30 minutes) was carried out using an audio recorder. Questions asked during the session sought the views and experiences of charities workers regarding support given to ex-offenders. All interviews were later transcribed verbatim and analysed using a thematic analysis as described by Braun and Clarke (2006). Even though audio interviews were listened to numerous times, it is while transcribing that I felt closer to the data. I then had a better understanding and perspective of what was presented by
the interviewee. Also it gave me a better recollection of key information as well as easy localisation, which was time saving. A significant advantage with transcribing the data myself was that my knowledge on the interview subject made it easier to get the acronyms and jargon used by interviewees, which avoided confusion and significant transcription errors. On the other side, a major disadvantage was that not being a professional transcriptionist, transcriptions were very time consuming, about 5 hours for a 30 minutes interview. And it was coupled with the fact that English is not my first language, which meant I had to listen to some audio passages numerous times to familiarize myself with the accent of the interviewee.

This step involved reading and re-reading the data in an active way while looking for meanings and patterns. Interview transcripts were read meticulously before starting the coding process. By doing so, I had already acknowledged preliminary ideas for the actual coding. A similar process was done throughout the entire analysis. The transcription of audio interviews into written form was in itself a way to familiarise myself with the data. As a matter of fact it had informed the early stages of analysis.
Table 3.2 Phases of thematic analysis phase (Braun and Clarke, 2006)

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description of the process</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Familiarising yourself with your data:</td>
<td>Transcribing data (if necessary), and reading and re-reading the data, noting down initial ideas.</td>
</tr>
<tr>
<td>2. Generating initial codes:</td>
<td>Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code.</td>
</tr>
<tr>
<td>3. Searching for themes:</td>
<td>Collating codes into potential themes, gathering all data relevant to each potential theme.</td>
</tr>
<tr>
<td>4. Reviewing themes:</td>
<td>Checking in the themes work in relation to the coded extracts (Level 1) and the entire data set (Level 2), generating a thematic „map“ of the analysis</td>
</tr>
<tr>
<td>5. Defining and naming themes:</td>
<td>Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells; generating clear definitions and names for each theme.</td>
</tr>
<tr>
<td>6. Producing the report:</td>
<td>The final opportunity for analysis. Selection of vivid, compelling extract examples, and final analysis of selected extracts relating back of the analysis to the research question and literature, producing a scholarly report of the analysis.</td>
</tr>
</tbody>
</table>
3.5.2 Phase 2: Generating initial codes

The transcripts were printed double line spaced with a large margin on the right hand side to give me space to write; the entire transcript was read highlighting blocks of texts considered significant to the research question using a green highlighter pen. The transcript was read again with emphasis on the highlighted fragments; and prominent declarations characterising relevant thoughts and processes were identified and given codes. A typical example for this is demonstrated on Table 3.3.

Codes and corresponding fragments of the interviews were ‘cut and pasted’ into a new word document. Coding depended on the fact that the themes are “data driven” in that sense, the themes depend merely on the data. The coding process was done manually. Codes were identified and matched with data extracts that validate those codes. This involved copying chunks of data from each transcript. As advocated by Bryman (2001), I coded as many potential themes as possible in order to ensure that important information was not missing; surrounding data was kept when relevant to guarantee that the context was not lost and in certain cases, distinct pieces of data were coded as many times as relevant. For example the data extract “I might see someone on a weekly basis for an hour as a traditional one to one counselling session as long as they are in position each week” was coded as “giving or receiving mental support” but also generated other codes like “individual choice” and “traditional support”.

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3.5.3 Phase 3: Developing themes

The goal was to identify themes as an attempt to understand how charities supporting ex-offenders work, putting in evidence the challenges they face and exploring the link between intervention and outcome using the realistic approach developed by Pawson, characterised by the following question: what works for whom and in what circumstances? This was done as illustrated by D’Cruz and Noronha (2012); using a sententious approach where the text was scrutinised to capture its fundamental meaning, a highlighting approach where the text was read repeatedly, and where necessary a line-by-line approach where every sentence and chunks of text were studied to determine the underneath message (D’Cruz and Noronha, 2012). Themes were composed to go in line with the subject of interest, which is the views of charities workers on the rehabilitation process of ex-offenders, with a focus on mental health and substance use problems.
After data were coded and organised into a list in a separate word document, the analysis was refocused into a broader level of themes rather than codes. In other words, codes were sorted into probable themes and were put under identified themes depending on their relevance. The aim here was to turn the data into a more convenient set of substantial themes embracing the key questions subject of the research. A table was used to sort the various codes into themes. When some early codes were cast-off, others were used to form core overarching themes and sub-themes. Codes that could not be classified were grouped under a temporary theme named ‘Extra’. Initially I developed a total of 54 codes, similar codes were then combined which brought that number to 30 and further refinement resulted in 25 codes. The 25 codes were grouped into 5 clusters and led to 10 themes being identified (Table 3.4).
### Table 3.4 Illustration of example of codes developed into themes

<table>
<thead>
<tr>
<th>Codes</th>
<th>Themes identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working with groups</td>
<td>1. Work approach used by the organisation</td>
</tr>
<tr>
<td>Working with individuals</td>
<td></td>
</tr>
<tr>
<td>Person centered perspective</td>
<td></td>
</tr>
<tr>
<td>Counseling</td>
<td></td>
</tr>
<tr>
<td>Mentoring</td>
<td></td>
</tr>
<tr>
<td>Being non judgmental</td>
<td></td>
</tr>
<tr>
<td>Assessment</td>
<td>Giving support in a traditional sense</td>
</tr>
<tr>
<td>Agreement</td>
<td></td>
</tr>
<tr>
<td>Boundaries</td>
<td></td>
</tr>
<tr>
<td>Key workers</td>
<td></td>
</tr>
<tr>
<td>Emotional support</td>
<td></td>
</tr>
<tr>
<td>Using environment other than organisation's premises</td>
<td>3. Giving support in a non-traditional way</td>
</tr>
<tr>
<td>Coming for a chat</td>
<td></td>
</tr>
<tr>
<td>Help with job search</td>
<td>4. Client's basic needs</td>
</tr>
<tr>
<td>Dealing with housing issues</td>
<td></td>
</tr>
<tr>
<td>Clients not engaging</td>
<td>5. Work limitations</td>
</tr>
<tr>
<td>Clients not attending sessions</td>
<td></td>
</tr>
<tr>
<td>Sometimes making a judgment call</td>
<td></td>
</tr>
<tr>
<td>Funding</td>
<td></td>
</tr>
<tr>
<td>Pressure from the outside world</td>
<td>6. Overcoming challenges</td>
</tr>
<tr>
<td>Maintaining relationships</td>
<td></td>
</tr>
<tr>
<td>Addiction and temptations</td>
<td></td>
</tr>
<tr>
<td>The door is open</td>
<td>7. The client's will</td>
</tr>
<tr>
<td>Individual choice</td>
<td></td>
</tr>
</tbody>
</table>
3.5.4 Phase 4: Revising themes

This step started after I had identified potential themes. The main task here was to review those themes. Some themes were broken down into distinct ones when judged necessary; for example the theme “Work approach used by the organisation” was broken into 2 separate themes: “What the organization offers” and “Tackling individual issues”. Similar themes were put together to form a single theme, and those that did not have strong data to support them were simply dropped during the process or tentative efforts were made to develop new themes from those exact same data.

To review my themes, I examined the coded data extracts: a comparison was made between the chunks of data and their corresponding theme; this was to make certain that coherence was not lost during the process. I then proceeded to a second comparison but this time in relation to the entire data set: the purpose here was to compare individual themes with the data set and determine if my entire chart of potential themes echoes the ideas behind the entire set of data. This was also an opportunity for me to identify codes that might have been missed during the initial coding process. On one hand, in cases where the first comparison process was deceiving, before moving to the next level I had the following alternatives: rephrasing the themes by creating new ones, relocating the pieces of data into existing themes or not considering them for the analysis. On the other hand, when the second comparison process was not satisfied, I had to go through further reviewing and coding until I came up with a substantial thematic table.

Braun and Clarke (2006) have stated that coding data and producing themes might possibly go for ever and ever, thus the importance of not getting caught in an endless procedure. For this study, I decided to stop my coding procedure at the moment I realised that I had a set of characteristic and articulated themes that were conformed
all together and to the overall data. I was able to come up with revised themes that carried the message behind the data (Table 3.5)

**Table 3.5. From potential to revised themes**

<table>
<thead>
<tr>
<th>Potential themes 1</th>
<th>Potential themes 2</th>
<th>Revised Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work approach used by the organization</td>
<td>Organisational approach</td>
<td>What the organisation offers</td>
</tr>
<tr>
<td>Attitude towards clients</td>
<td></td>
<td>Tackling issues at individual level</td>
</tr>
<tr>
<td>Giving support in a traditional sense</td>
<td>Traditional support</td>
<td>Traditional support</td>
</tr>
<tr>
<td>Giving support in a non-traditional way</td>
<td>Room to flexibility</td>
<td>Being open-minded</td>
</tr>
<tr>
<td>Client's basic needs</td>
<td>Client's basic needs</td>
<td>Dealing with outside world pressure</td>
</tr>
<tr>
<td>Overcoming challenges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work limitations</td>
<td>Challenges faced by service providers</td>
<td>Challenges faced by service providers</td>
</tr>
<tr>
<td>Overcoming challenges</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>The client’s will</td>
<td>Giving choice to the client</td>
<td>Put the power into clients hands</td>
</tr>
</tbody>
</table>
3.5.5 Phase 5: Outlining and identifying final themes

In this phase, I defined and refined my chosen themes based on the thematic table of phase 4. In other words, I identified the fundamental idea behind each theme as well as the themes in general. It was done in a narrative way by stressing what is particular about them and why. For each individual theme, I wrote a detailed analysis considering how the theme was linked to the overall message supported by the data and in relation to the research questions. In addition, themes were re-evaluated in regards to the inter-relationships between them, and sub-themes were developed in the case of large and complex themes to signify the chain of command of meaning within the data. In the end I was able to clearly define my themes. One of the decisive arguments was that the scope and content of each theme be described in just a couple of sentences. Otherwise further refinement was done until suitable outcome.

In qualitative methods, numerous researchers code for topics and themes rather than actions and processes (Charmaz, 2012). However Charmaz (2012) argues that coding for the latter group allows the researcher to outline the existing connections between data. In fact while coding, the researcher is mentally and physically active in the process; so in order to build action and see processes, it is recommended to code in gerunds. This coding approach was subsequently adopted in the final stage of coding for this research. Identifying the clients, Engaging clients and Reaching set goals, were identified as main themes and then put into subthemes covering the following aspects: challenges, achievements, motivations, needs, relationships as illustrated on the table below. And forward in the research analysis, the overarching theme linking the three present themes defining what success is, this will be thoroughly discussed in the overarching theme section.
At the end of the analysis, the title given to each theme was short, forceful, and gave the reader the essence of the theme. The thematic content analyses on all interviews resulted in three themes and eight sub-themes (Table 3.6).

Table 3.6. Final themes and subthemes

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identifying the clients</td>
<td>• Being homeless</td>
</tr>
<tr>
<td></td>
<td>• Being a woman with complex needs</td>
</tr>
<tr>
<td></td>
<td>• Suffering from addiction</td>
</tr>
<tr>
<td>2. Engaging the clients</td>
<td>• Offering help</td>
</tr>
<tr>
<td></td>
<td>• Finding about needs</td>
</tr>
<tr>
<td></td>
<td>• Working in partnership</td>
</tr>
<tr>
<td></td>
<td>A) With other organisations</td>
</tr>
<tr>
<td></td>
<td>B) With clients</td>
</tr>
<tr>
<td>3. Reaching set goals</td>
<td>• Tackling vulnerability</td>
</tr>
<tr>
<td></td>
<td>• Discouraging dependency</td>
</tr>
</tbody>
</table>

3.5.6 Phase 6: Writing the report

With all my themes worked out, this was the final stage of the analysis followed by the writing up of the report. The aim here was to present the story of my data in order to show and the quality and strength of my analysis.
3.6 Interpretative analysis

In this section, I will provide a clear sense of the extent and multiplicity of each theme, supported by actual data extracts. It will be descriptive as well as interpretative in relation to national policies on offenders’ health and offenders’ management. Thus, the work here will be shaped around questions such as “What does this theme mean?” “What are the assumptions underpinning it?” “What are the implications of this theme?” “What conditions are likely to have given rise to it?” “Why do people talk about this thing in this particular way (as opposed to other ways)?” and “What is the overall story the different themes reveal about the topic?” (Braun and Clarke, 2006).
Chapter 4 RESULTS

4.1 Introduction

This chapter reports the results of the thematic analysis of interviews conducted amongst charities working with ex-offenders in Birmingham. The thematic analysis described herein informed an important part of the theoretical framework outlined above (Chapter 3). Also, initial analysis helped develop further interviews that were used as a major tool for the study to gather information. For participants quoted, a pseudonym and description of their role within the charity are included.

4.2 Themes and subthemes:

4.2.1 Identifying the clients

One relevant point of this study is to understand and investigate the charities supporting ex-offenders. In that respect, discussing the context in which charities work and support their clients is essential in order to present the setting and the issues pointed out by those who took part in the study.

*Being homeless, Being a woman with complex needs and Suffering from addiction*

While discussing the problems affecting charities and their clients in Birmingham, the recurring point of concern raised by interviewees was around their primary field of work, which often refers to their main focus. As presented by Clinks (2013), charities in the criminal justice system are usually recognised and classified according to their main line of work, which generally focuses around the vulnerability of their clients, homelessness for example. Likewise, the primary field of work usually goes in pair with the people the charity ends up having as clients, homeless people as a matter of fact. Consequently, about 40 different fields of work and 16 categories of people to
work with were identified by Clinks. That can be homelessness, addiction, alcohol or drug treatment, employability, women, young people, learning and personal development, and many more. In fact they are not all explicitly ex-offender charities but qualify and access grants for working with ex-offenders, because they end up having ex-offenders as clients.

For this particular study, the charities that participated were primarily working with homeless, women with complex needs and people with addiction problems. Although these charities each have a specific area of focus, more often the staff has to deal with vulnerable people who all have multiple and complex needs, which means they most likely experience several problems at the same time. Those problems can range from mental ill health, homelessness, drug and alcohol misuse, family breakdown, employment and many more, hence the notion of vulnerability. As a matter of fact when asked to describe the charity he works for, Alex, a key worker, stated: “it is a charity that works with vulnerable clients and vulnerability could be homelessness…and a number of issues such as alcohol problems or mental health problems…alcohol addiction for example learning difficulties or mental health illness”. One can argue that, in the long run, the primary line of work of the charity is not always the “real” and immediate issue in need to be dealt with. As stated by Mary, a support worker:

*If somebody has got an alcohol problem, it might be that there are other things that are going on as well that maybe could impact on the alcohol use so it is not just about the alcohol it is about everything else that is going on.*

The idea here will then be to try to address whatever is going on in the person’s life before tackling the alcohol use, as alcohol could only be a tool to help coping with a
certain situation. And unless that situation is addressed, the alcohol problem might never completely go away.

Clearly, as mentioned by the participants of the study, the other common factor is that the majority of individuals seeking support from these charities generally have a criminal background: “...A lot of people who are coming to the drop-in are ex-offenders” (Alex, key worker); “I work with people with alcohol problems and some of those are ex-offenders as well” (Mary, support worker). However those ones are not treated any different from those without convictions; charities are clear on the fact that clients receive equal support whether they have a criminal background or not. Here is an example of what Lisa, a support worker had to say on the subject:

Ex-offenders are not treated differently within our organisation; basically you walk through that door and you are an individual. We work with everyone and the treatment is exactly the same. We work with offenders as well as ex-offenders as well as teachers, the homeless guy or the guy that just started his business.

However it could be noted that, having to work with an ex-offender might be more challenging, especially if he or she is still under the probation service. The fact is, charities sometimes work with people on license, which means those clients are not completely free from the criminal justice system; and working with charities is often one of the conditions of them being out in the community. Consequently failing to do so could result in them being back to prison as charities have the duty to work closely with probation services. In fact a single mistake, as little as it could be: missing an appointment for instance, can land the client back in prison. As a result, it might be more pressure on the charity in their efforts to put the client on the right track. Added to that there is the stigmatisation of the ex-offender, this can make it difficult to get
him/her a place to live or a job. For the service providers this was common knowledge; Mary, a support worker affirmed:

People who have got offending backgrounds may feel judged and stuff because they have been to prison but people that come to this drop in can come in here without feeling judged by anybody and that's the staff and other service users because they don't have to tell their business they can keep themselves to themselves or they can mingle.

Voluntary organisations working with ex-offenders operate a non-judgemental policy undeniably. But as great as it is for the concerned individual, the society is yet to follow that direction.

In the realm of criminal justice, from the drug addict to the sex worker or homeless, the background problems seem to be the same without distinction. Due to the complexity of the aspects of the client’s life, a great amount of skills, time and manpower must be needed within the charity, to challenge all those problems effectively. And obviously, as illustrated by Kate, a support worker, it is not always possible:

We've got a lot of clients that are referred to us and sometimes it can be spending enough time with each clients because hum...we've sort of hum...there's only 2 of us that cover sort of 6 offices...So it can be quite difficult to sort of like spreading yourself out so that you can see as many clients as you can.

In fact it is not easy for charities to organize themselves into distinctive services with specific operatives according to their clients’ specific needs. Regardless of the size of
the charity, the problem remains the same. Janet, team manager in a different charity declared:

> My challenge is that sometime I have...I am not supposed to case work anymore because I am their service manager or team leader before hum with a case load but I still do some of the case work because if there is 2 things going on and they are equally important and there is only one person to do it, the other 2 might be out or in prison or whatever.

And the bottom line is ultimately funding; it is very well clarified by a quote from Kate, a support worker:

> Other teams have got support workers that kind of things so they help clients if they need to fill forms or whereas we don't have that in our team we haven't got the budget to do it so we sort of spend more time doing stuff like that other than the alcohol support sometimes if someone's accommodation or something affecting them and they need to address that before they can look at their alcohol use.

### 4.2.2. Engaging clients

Clients' engagement to the services is a very important factor. All charities involved in this research identified clients' engagement as one of their biggest challenge.

> “I think one of the main challenges that sticks out for me is a lot of DNAs yeah so people go for the assessment process and then they are allocated a key worker and then… sometimes we don't even get to meet the client, the client just don't turn up he might have been in crisis that day…we don't see him again so we do get quite a lot of DNAs which can be quite demotivating at times” Lisa, support worker).
For a lot of the clients, engaging with service providers is a voluntary decision; consequently charities do not always have all the means to get into contact with them. This makes it difficult to get them back when they suddenly stop engaging.

**Offering help**

In order to attract clients and facilitate their engagement to the service, charities sometimes need to use diverse approaches. Generally they will start by offering a form of help that will tackle basic issues. In one charity it could be food, as mentioned by Alex, a key worker:

*Food is really the hook food brings people in, it brings people into the service and then we can then engage with those clients on their alcohol addiction for example or mental health problems or whatever their problems might be but the food is the hook.*

In another charity it could be organising activities that help with loneliness “… we’ve like got art groups hum…there’s like a walking group all different sort of groups they can engage with if they want to…hum…gardening group” (Kate, support worker).

Charities go out of their way to ensure equal support to as much people as they can but it is reasonable to say that at a given point they have to prioritise some cases over others. Especially that in view of the new government policies on offenders’ management, only “successful” charities will have most of the funding allocated to them. Funding is a critical aspect for the voluntary sector, because they fully rely on funding in order to keep functioning. It was mentioned numerous times during interviews that charities rely on funding to provide to their clients, engaging activities such as walking groups, gardening groups, music groups, art groups and others. In fact those activities are beneficial in ensuring clients’ engagement, but with funding
running low, charities are clearly anxious as to what will happen if they have no other choice than to stop these group activities.

**Finding about needs**

So the first step is to find a way to get the client to know the charity, to be familiar with the organisation and come to realise that they can be of use to him. That is when the organisation might be able to move on to identifying the exact needs of the client and refer him or her to a suitable service within the organisation.

All the charities in this research mentioned that they use the exact same process to identify the needs of their clients, and that is the Outcome Star. Claire, one of the support workers interviewed, described the process:

“We use simply what is called an outcome star so when they first come here we look at the star and this star really each point of the star hum looks at every single area of their lives, accommodation drugs alcohol hum how they are using their time, motivation hum...every sort of area...and we will chart that between king of 1 and 10.”

The Outcome Star is a set of tools designed to support and measure change when working with people. Each variety of the star consists of a number of scales organised in the shape of a star. The expected outcomes are clearly defined in each version of the instrument and the scales are built around a model of change, which outlines the end goal and steps along the way (MacKeith, 2011).

Identifying the client’s need requires teamwork. Together, the workers discuss all the areas of the client’s life, which are represented on the Star and agree where they are on each scale. “Once we’ve gone through the outcome star and have identified areas in which they need support we will then design an action plan, we will work together
with the client to identify any goal that they set themselves” (Erica, support worker). Charity support workers might be there to provide help, but they would not get any results without the collaboration of their clients. For the support given to be effective, the relationship between client and worker should be a two way street. The interpretations from their discussion are then mapped on the Star to give an overview of the client’s current situation. A picture of change is later obtained when the process is repeated and the difference in the two readings created (See Figure 4.1).

Source: © Triangle Consulting Social Enterprise

Figure 4.1 The Family Star (completed twice)

Working in partnership

On a bigger scale, charities will often work in collaboration with external agencies to ensure that their clients get all the support they need, especially when they are not
able to offer a particular service. Health is one area in which charities often need a helping hand. Participants have stated during interviews that they find the need to work in collaboration with health professionals, as physical or mental health can constitute a major barrier in successful rehabilitation of their clients:

“The mental health service for Birmingham in terms of the NHS we got a good relationship with them and I know our mental health worker work specifically with them to help clients we also got the health exchange, we’ve got a nurse here on a Tuesday and Friday” (Alex, key worker).

On a smaller scale there is a level of partnership between charity workers and their clients. For the charity and client relationship to bear fruit, both parties need to work together. Charity workers need the client to be open so that they can easily identify areas they need support with; the willingness of the client to change plays a big part in his or her journey to recovery. As Kate, support worker, said: “Obviously it’s up to them as well if they want to change their alcohol use then you are sort of there to support them in doing that as much as you are able to”.

4.2.3. Reaching set goals

Charities in the criminal justice system often have for mission to give support to vulnerable ones, without judgment, by providing them with opportunities to achieve their goals and live a decent life as part of a community. For that, one thing to do is to take away the vulnerability factor; and the other will be to work on individuals’ needs and help them get back on their feet. This process is elaborated below, with information gathered during participants’ interviews. As explained previously, using an outcome star, areas of concern - thus vulnerability - will be identified and from there, both the support worker and the client will design an action plan, to tackle the issues that were acknowledged.
Tackling vulnerability

Vulnerability here can range from health to financial, personal and family issues. In terms of health, the common issue seems to be mental illness in various forms. Support worker Claire, stated the following:

*When I was in the criminal justice team we had a lot of anxiety, depression...because with the mental health team we’ve got people with bipolar, manic depression we’ve got people who have...hallucinations so we’ve got clients with schizophrenia a lot of personality disorder I would say probably 90% of our case load are clients who have got personality disorder.*

It is known that prison does have a negative effect on the mental well-being of most of those incarcerated. Added to that, they do not always receive the appropriate support throughout their stay in prison. This was reaffirmed by Janet, a team manager: “The system in the prison...people get hum funny ideas about prisons I think that social media does that...that it’s that place where you've got television it’s all easy peasy no it's not it's very hard...especially for young women, they get bullied by other women hum...not by everybody but they do, their health is not looked after and it takes ages for them to get a doctors' appointment it takes ages for them to get a mental health referral”.

On the long run this situation makes it difficult for them to find stability when released to the community. It can be reasoned that the main challenge with mental health issues is the fact that, unlike other vulnerability factors such as homelessness, drug and alcohol abuse, and prostitution, mental health issues are not always visible.

Vulnerability is the primary aspect charities focus on not only to identify their line of action but also to assist each one of their clients. The idea is that by taking the
vulnerability away, the individual would be more focused and ultimately more likely to be rehabilitated successfully. As this is a key aspect, determining the client’s vulnerability and working on it is the way forward.

**Discouraging dependency**

More often than not people seeking support from these charities do have very chaotic lives. Equally it could be argued that the charities themselves and their staff work in a chaotic environment, having to try to bring a form of stability to the lives of their clients so that they can attain a successful rehabilitation. The only difference is when charities sometimes have “the power” to stop the support when they feel the situation is beyond their capabilities. In that case the client cannot get away from the situation and has to live with it every day of his/her life. As Ken, a former client who is now a volunteer in one of charities said: “I am 60 now and I have been using them since I was 30 I think... ...You never recover...the temptation is out every day...like they say you have to take it day to day...it just gets easier”. This individual has been free from alcohol and prison for a long time but he has been using the services of the charity back and forth for almost 30 years, despite being sober for the past 10 years: “I haven’t had a drink now for about 10 years” and living in a flat for the past 7 years, “I live in... Housing...it is in a block of flats...yeah council”.

The charity seems to constitute the place where he has built strong relationships, and where he turns to in order to have a form of human interactions, it’s his “safe place”.

“I was married and then I got divorce.... I was married then I got a son but since then me family live ...hum...more...hum...going from one thing to another...you know..... Well family my mom died my dad died and...I've got a couple of brothers but hum... like my one brother he runs his own business. ..He is like a hum...busy man and me son works at ...I do see him pretty
hum...I mean I see him next month, and it is his birthday next month so hum” (Ken, volunteer).

Charities often ensure that they make sure not to create dependency:

“We don’t want to create dependency so we wouldn’t just sit down and having a chat just for the sake of having a chat it has to be demonstrated that they are working towards something and at the same time we do not push a client away before they are ready” (Mary, support worker).

But when referring to this specific case, it seems like “the survival mode” of this volunteer/client has been to stay close to the charity that has accompanied him for all this year. Although charities are adamant on the fact that they “do not want to create dependency”, it is very hard to achieve that, for instance this was admitted by Linda, a team coordinator, “Women spend so much time in (Charity) hum they do develop a bit of dependency to the support that we give them...” and in those specific cases, efforts are made to slowly break that dependency, by using various approaches such as community mentors:

“We want to break the dependency but do it obviously slowly hum...that’s what the mentor hopefully will try to do so... the mentoring...actually work towards an action plan hum we have set objectives that are agreed with the mentees and we would meet outside of (Charity)...so we work on specific objectives and it's actually set on a 3 months basis” (Linda, team coordinator).

However one may think that this is somehow the continuation into dependency. It was established that even when the client is considered to have achieved his or her set goals, it is not always easy to guarantee that a form of contact will not be maintained. Here is a perfect example, when asked if their clients or former clients get to work as
volunteers in their organisation, Janet, a team leader in one of the services said the following:

“they need to be away from hum...show that they can hum...like this person went off to uni and hum... or did other things, kept in touch but her case was closed because she didn't need the intensive support...it was just a phone call really like a friend you know like a mentor you know just to see how you are doing or give a bit of advice about a course she was doing or something like that.”

Even though this particular lady achieved the goals that were set at the beginning of the journey, entering university, and her case was closed, she kept regular contact with the charity even despite the fact that she was considered to have reached a successful stability. She was desperate to give back to the charity that once helped her, according to the charity worker, the exact words of her former client were “(Charity) has saved my life and it’s (Charity) I want to work for and I will do”; and she has done so, as she is now working for the charity, delivering workshops to clients once a week. It seems like no matter what is done, a “successful” relationship between the charity and the client is one than cannot easily fade away, as it has somehow had on both sides an impact that cannot always be denied. Thus the dependency on the client side and the sense of accomplishment on the charity side.

4.3 Overarching theme

The presentation of these results brings out the complexity of the research environment but also the complexity of the situation of all the individuals involved. The existing tensions within the criminal justice system have once again brought to light the never-ending discussion around the Victorian crime control system, which involved a penal – welfare ideal, and the modern crime control system that focuses
more and more on punishment. This has previously been recognised and discussed in literature by Garland (1985) and Garland (2001).

There is on one hand the statutory system that has an obligation to ensure the protection of the community by making sure that those who have harmed that community are punished and are discouraged into engaging in such activities again or expose others to insecurity; as a result they are playing tough. On the other hand there is the voluntary sector that works in a more human way, as they believe that everyone deserves a second chance and by bringing stability into people’s life, they can turn their lives around. That’s why they work hard in giving adequate support to their clients by tackling their various personal issues in a non-judgmental way. And in the middle there is the ex-offender who is trying to go back to a “normal” life, working hand in hand with the statutory sector and the voluntary sector. That journey to a normal life, a successful rehabilitation, is what is presented in this research.

Undoubtedly a contentious aspect through this study has been the notion of success. Most of the money will now be allocated to charities depending on how “successful” they are. However the statutory sector and the voluntary sector do not always perceive success in the same way. In actuality, if for the first one success is a “tick in the box” type evaluation; for the latter success is defined in human interactive care. When asked about what success meant for them as part of their work, here is what charity workers had to say:

“Hmm I guess success is about...the client group we are working with is keeping them functional so if this person’s got a roof over their head and they are happy for me that mean success. It is great to have stories that somebody’s got a high flying job earning thousands of pounds or whatever or they are back into education or they’ve got an employment that’s great but it’s
not for everybody so there may be just people who they are happy with what they've got...I think that's what it's about, just to keep someone functional to the level they are happy with” (Tom, support worker).

Clearly for charities success is not about the numbers; they evaluate their work more on a human aspect, it is more about care. Dealing with their clients’ group requires patience: “We are working with the client until the client feels ready to work” (Mary, support worker). It can take a considerable amount of time to get an individual to the stage where he or she is ready for a change, and it is something service providers must understand if they want some results:

“We go once a week at night to meet with any women we meet on the streets… they will come in and have a chat we can give them a card with all the emergency numbers… and they have a cup of coffee and a chocolate bar and a chat hum they may not be ready to leave what they are doing yet but that's not the object to this going out to the streets to make them exit sex work; it is to show them that somebody cares that they are out there doing what they are doing, they care about them that's the most important thing and I think when they know that that's when they begin to trust you and that's when we can start working with them” (Janet, team manager).

Added to that, given the chaotic life of their clients, a single misstep can make everything collapse. Jessica, support worker in one of the charities provided a perfect picture to illustrate that:

“I always think it is like juggling balls when working with the offender, you have to keep all these balls in the air and then when one of them fall...so the housing falls then you are more likely to drop the rest of them because it is all interlinked.”
The Ministry of Justice (2013) states that they are constantly working towards efforts contributing to better reform programmes to reduce re-offending. And it is evident that to accomplish their mission they need the voluntary sector. However, with the new regulations in place, “the payment by results” for example, the caring aspect of charities could be jeopardised as they might be forced to shift their priorities if they want to keep receiving funding thus stay alive.

Another fact that was obvious was that most of themes and subthemes were somehow interconnected, whether by their similarities or by their disparities, which gave a more complex characteristic to this research; for example tackling vulnerability and identifying the client group. Tackling vulnerability is mostly what ends up defining the client group the charity is working with. Given that vulnerability is mostly what is causing the majority of the clients’ problems, it is then what the charity worker will focus on in the action plan. And as discussed earlier, completing that action plan is what terminates a successful relationship.

In terms of discouraging dependency, a form of contrast is observed here. In fact even though charities claim not to create dependency, it cannot be avoided because sometimes dependency is the way out for the client. The charity often becomes like a family, the place to hang out, and the place to get a job, which might put the charity in a difficult spot. In general, to avoid cutting off the person, a certain level of contact will be maintained because also to be honest, for the charity worker there is some level of curiosity and a comforting feeling in knowing that the former client is doing well.

Charity workers and clients always stay connected in a certain way because the charity worker is the person helping the client when others have given up on him/her, not judging him/her. On the other hand charity workers get to hear a lot from these people, their stories, what they have been through and learn who they are as
persons. As a result, even if they manage not to be emotionally involved with their cases, there might be at least one client who will make an impact on them. After all, charity workers are not trained psychologists and most of them work in this field because they are caring people. On one side, there are those who are always willing to do more, to go the extra mile when working with their clients: they believe not enough is done by the government to support ex-offenders. And then there are those who work in a more professional way, as they believe they are already doing a lot for ex-offenders. There is clearly a division amongst charity workers when it comes to what they think in terms of the level of support available out there for ex-offenders.

When questioned on the subject Lisa, a support worker stated:

“My opinion on what they are offered and stuff like that I think it is there for them to take. I do think there is nobody in this world that is responsible for me and I will not be responsible for another in this world you know. And that has to be taken into consideration I think that is what separates organisations from fellowships for me you know, community and recovery faith groups.”

While the view of another charity worker on the same issue was not quite the same:

“We could do a lot more and also seeing how even very small interventions can have a really great impact on someone and so I think obviously with a little bit of money there is quite a lot of hope really” (Linda, team coordinator).

Alex, a key worker reaffirmed this by saying:

There needs to be a better holistic approach whether that is the prison, maybe the job centre the council voluntary organisation like us having a more holistic approach so that person doesn’t end up just going round again...More looking at the prevention side.
Without doubt, there is no consensus on what success means. Whilst for the government it is in accordance with numbers (here the re-offending rate), for charities the success is down to the progression of their clients (stable accommodation and employment, reducing their alcohol consumption…). Given these tensions, the way to determine whether or not a client has been successful should be holistic and encompass the multiple perspectives involved in offender management.
Chapter 5 DISCUSSION, CONCLUSION AND RECOMMENDATIONS

5.1 Discussion

The purpose of this study was, through the investigation of the work of charities supporting ex-offenders, to understand the correlation between successful rehabilitation, mental health, and well-being of ex-offenders. It was also to inform and prepare the ground for future research studies on the effectiveness of rehabilitation programmes, through an understanding of existing support services and identification of areas requiring improvement.

The research involved the analysis of eleven interviews of staff members from three different charities operating in Birmingham. The thematic analysis carried out allowed identifying theories applicable to the two research questions: How well are the existing national policies to support ex-offenders put into practice, focusing on ex-offenders (as defined above); and what are the perspectives of service providers on their contribution to the mental health and well-being of ex-offenders?

The results obtained from the thematic analysis projected that the voluntary sector and the statutory sector rely on each other to ensure the successful rehabilitation of ex-offenders. Although they work together towards the same objective, they operate differently. The voluntary sector depends on the statutory sector, so the latter expects the former to follow certain regulations when it comes to managing clients in the criminal justice system. As it was presented in the findings, charity workers have stated during the interviews conducted that they do not always find this to be an easy situation. As a matter of fact, it makes their work more challenging and they believe things might not get better with the new changes in regulations, especially for smaller
charities. Ultimately they might end up not being able to give their clients the exact support they need. Data interviews for this research seem to go in line with what Neilson (2009) and Tomczak (2014) forecasted in their respective publications, which is that the voluntary sector is being put at risk of losing its independence and identity. This has previously been recognised out of the criminal justice system; for instance Thompson and Williams (2014) have argued that with the new changes in the way the government funds the third sector, there will surely be negative effects on organisations within that sector, mainly on the way they provide goods and services.

In a broader context, the voluntary sector as a whole has always been seen as playing a key role in terms of providing various services for the well-being of the community; and in order to survive, this sector relies greatly on the public sector for funding. In recent years, there has been a shift from public funding to that of contracts, due to demands for greater accountability and sustainability (Thompson and Williams, 2014). In fact, according to Sheil and Breidenbach-Roe (2014), with the payment by results model public money is paid to organisations based on what they have achieved (outcome) rather than what they have done (process). With these changes, voluntary organisations are trying to adapt but it is very challenging for them because their efforts to generate income might undermine their aptitude to carry out their charitable purposes. This, for example, is reflected by the way social enterprises have found the need to ‘develop requisite entrepreneurial skills to guide the transition from grant-funding to trading’ (Seanor et al, 2011).

Clearly, the payment by results-system put rehabilitation forward as an outcome, while its process aspect is equally important and should not be dismissed (Maruna and Ward, 2007). Another aspect of the payment by results model is the fact that it does not sit well with charities that support people with complex needs, such as ex-offenders (Sheil and Breidenbach-Roe, 2014). As previously discussed in Chapter 2
of this thesis, those with complex and multiple needs do not easily conform with and respond to the more structured support they receive from service providers. This is because they usually have a lot to deal with at the same time (personal, social and health related issues); and hence the new ways of payment will make the situation more difficult.

On the contrary, the government believes that the reforms can only bring positive results, arguing that the intention here is to not only save money but also to enable service providers to concentrate more efforts on rehabilitation and the reduction of the re-offending rate (Phillips, 2014). One might dispute that argument, given the fact that in the sphere of the criminal justice system, it is well documented that the notion of rehabilitation cannot easily be defined in only one way (Raynor and Robinson, 2009). Clearly, when talking about rehabilitation here, the key player is the offender; thus it might worth taking a closer look into the direct support he or she receives when released from prison.

The findings of this study have suggested that, even though ex-offenders primarily seek help with accommodation, substance use and others, their core issues are usually those that are not visible such as their mental health and well-being. In fact, interviewees have stated that with poor mental health and well-being it is difficult to maintain a stable employment, accommodation or a sober life. Individuals often turn to drug and alcohol to cope to whatever is going on their lives and to theft to fund their addictive habits; that is only presented as an example scenario amongst many others. This approach is well supported in the literature. For example Ward and Brown (2004) asserted that to work positively with ex-offenders, in other words reducing the reoffending rate, intervention programmes should tackle the dynamic risk factors that are associated with reoffending.
As already mentioned, ex-offenders seek support with various issues but as noted by interviewees in this research, one issue that is common to this client group on top of homelessness, employment or any other, is the effect of substance misuse. This also reaffirms Ogloff et al’s (2015) discussion of the high frequency of substance misuse within the criminal justice population. Also, earlier research had already drawn attention to the issue: as an example Fountain and Howes (2002) found that levels of substance misuse and alcohol dependence in the United Kingdom is a major concern and is especially high among homeless populations. Also, Fountain and Howes (2002) established that in terms of drug use the consumption of more than one drug, particularly heroin together with cocaine, is very common. According to Hartwell et al, (2012), most people with mental health issues in the criminal justice system, are also reported to have a substance use problem. In other words, having a dual diagnosis is very common among the prison population. From what I found in this research, in terms of a person’s journey towards a successful rehabilitation, the environment (emotional and material support, personal development, better relationships) is a contributing factor to good mental health as it can assure a more stable life to the individual. As discussed in Chapter 4, most of the time, ex-offenders can find themselves trapped in a very chaotic environment and that could subject them to a negative influence; hence making poor choices and fall into substance abuse for example.

From my personal experience working as a mental health mentor, I found not only that most of my clients had substance misuse problems, the substance misuse was also a major issue affecting the mentoring relationships. In some cases, clients stopped engaging because their drug or alcohol habits had landed them yet again in prison. In other cases, our organisation had to stop engaging with them because they would turn up to appointments under the influence. This experience informed the
focus of this thesis. As the idea was to use this Master’s level research as a pilot study for a Ph.D. and given the limitation of time, it was decided that this thesis would focus on how ex-offenders with substance misuse problems are supported, and for the Ph.D. expand the subject depending on what is found during this pilot study.

From interviews conducted it was clear that for all charity workers, showing empathy and being real to their clients was very important, as well as developing a partnership with them by using person-centred and client-driven approaches. By working in a caring and human way, charities hope to bring a form of stability to their clients as it might be what they really need in order to avoid making the same mistakes over and over, and to break the vicious cycle they often get caught up into.

Some criminologists have argued that as much as the offender is treated with respect and could be given ‘unconditional’ support, victims of their crimes should not be neglected (McNeill, 2006). In reality, some charities supporting ex-offenders are beginning to consider that aspect, Charity 1 is one good example, by incorporating the restorative justice approach within the organisation. Restorative justice could be defined as an intervention where victim and perpetrator come together and work mutually in dealing with the aftermath of the wrongdoing and its repercussions (Daly, 2002). Although this is relatively new to the voluntary sector (Three months in one of the charities at the moment of the interview), the restorative justice team member interviewed has stated the following:

it's quite difficult actually to get victims to engage in the process and that's for a number of reasons so sometimes the crime we are discussing happened in about a year ago so they feel like oh am kind of over it now I don't want to go back over it other time they just feel like the crime did not have any impact on them that much then or even now.
No sufficient evidence was found in this research, to make an argument for or against the restorative justice approach. As this was relatively new to charity workers themselves, it was not investigated further. However, it does show that charities are open to hearing all parties. Service providers believe that to succeed in their mission, which is to ensure that their clients do not make the same mistakes they must help them in improving their mental health and well-being. This usually involves giving them a purpose, helping with self-development, and helping to restore their relationships. However, as it has intensively been discussed here, changes in government’s regulations on offenders’ management do not always help in that direction.

The semi-structured interviews conducted with stakeholders represented their various views on offenders’ management and how things could be made better. The questions for these interviews were designed following a realistic evaluation approach to recognise and develop theories in terms of about what works for whom, in which circumstances in order to understand existing policies and support services, and identify areas requiring improvement. In other words, what needs to be done to give to ex-offenders the maximum of chances to be healthy, stable, and useful to society?

Table 5.1 presents some examples of the contexts and mechanisms that can lead to a less demanding job for service providers and to a healthier journey to rehabilitation for ex-offenders. Achieving a successful rehabilitation requires not only a stable and reliable support system but also an environment that will allow individuals, here ex-offenders, to be able to express themselves fully, not be judged again and over restricted. It is undeniable that the ambiguity around the notion of ‘success’ here deeply influences the mechanisms involved in the process. For the government, it is about numbers (percentage of reoffending rate) and for charities it is about client’s
progression (stable accommodation, getting into employment, reducing alcohol intake and other).

Table 5.1 CMO patterns facilitating a successful rehabilitation

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<th>Context</th>
<th>Mechanism</th>
<th>Outcome</th>
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| Good support links and communication between services in the criminal  | External: funding is well directed  
| justice system                                                          | Internal: reinforce communication between charities and partner agencies | There is continuity in services provided to clients                      |
| Variety of projects within charities                                    | Ability to tackle specific issues depending on the client's need and set goals | Clients that are referred to charities all have a chance to receive the support they need |
| Person-centred and client driven intervention approaches                | External: no excessive pressure on the client in terms of regulations      | Independence and stability of the client                                |
|                                                                        | Internal: flexibility in intervention used to support clients              |                                                                        |

The mechanism and contexts that constitute barriers for a successful rehabilitation (Table 5.2) involve the limitation in government funding, the usually chaotic life of ex-offenders and the social and community perceptions in regards to someone who has been to prison. The obstacles to the journey towards rehabilitation come from all fronts, from the criminal justice system itself to the social environment of the ex-offender. In fact the first mission of the government is to punish those who have committed offences again society, however that punishment does not stop after
prison as the offender carries a label even after leaving prison; and that is where society has a specific role to play. Ex-offenders are often judged and not trusted, as a result it becomes difficult for them to get or maintain decent employment, housing or relationships; voluntary organisations often become their safe place. However, as noticed in previous chapters charities are not completely free of their movements when it comes to funding and to clients that are still under the probation service.

To enable a successful journey to recovery, individuals in the criminal justice system need to be monitored closely. When the statutory system looks more at a punishment approach, the voluntary system focuses more on a caring approach.

**Table 5.2 CMO patterns constituting a barrier to a successful rehabilitation**

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<th>Context</th>
<th>Mechanism</th>
<th>Outcome</th>
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<tr>
<td>Limitation in government’s funding</td>
<td>Even when successful, funding is not always available</td>
<td>Local charities tend to disappear</td>
</tr>
<tr>
<td>Chaotic life</td>
<td>Usually when leaving prison the life of the offender is pretty much dysfunctional</td>
<td>Do not attend appointments with service providers, return to old habits</td>
</tr>
<tr>
<td>Social and community perceptions</td>
<td>Ex-offenders are judged by others and have difficulties accessing basic services</td>
<td>Poor health and mental well-being</td>
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Ex-offenders are considered vulnerable people after all and have already paid for their crimes. Their rehabilitation journey not only requires them to have access to adequate support but also to make better choices so that they will not commit the
same old mistakes. The emerging theories and hypothesis suggest that all services involved with ex-offenders must speak the same language; a continued support should be maintained right from the prison gate to the successful rehabilitation. This should ensure that the client is progressing in a secured and controlled environment and that he will ultimately make the right choices along the way. This then suggests that the line of thoughts prevailing at the top of the criminal justice system, in terms of offenders’ management, may have a significant impact on how charities provide support to their clients, and on how the clients respond to the support they receive. This theory seems to follow the realistic approach of Pawson and Tilley (1997) recognising that when it comes to social interventions, choice making is dictated by social constraint and is controlled by the power and resources of “stake holding”. Consequently, the more charities depend on the statutory sector, the more they have to play by its rules.

An interesting point that also came out of this research is the question regarding when an individual with conviction becomes an “ex-offender” or the person he or she used to be before the offence. In fact, for the statutory sector the individual remains an offender if he or she is still under probation supervision whereas for the voluntary sector the same person is considered an ex-offender, as he or she has been released from prison. One can argue being released is a significant event in the life of someone that has been incarcerated. It is a further step towards the person he or she was before the offence. Therefore, the label ‘offender’ does not help the individual to move on. It is important for the individual to see and feel the mark of evolution in his or her rehabilitation process. As mentioned early in chapter 2, there has not been a “real” debate on the issue; nevertheless, in regards to the chaotic life of individuals after prison (unemployment, mental well-being, homelessness and many more), it is
safe to say that a change of language could be an important factor in the journey of that individual towards a successful rehabilitation.

5.1.1 Views on the chosen methodology

While studying the outcomes of a study, Realistic evaluation allows the research to also focus on how contexts lead to specific outcomes through specific mechanisms. In fact in this particular area of study, the intervention works following the various mechanisms (different approaches used by the statutory and voluntary sector) in place within the social context that includes a set of norms, regulations and relationships. Although there is still a lot to learn about realistic evaluation, for a first attempt using it, I found it to be very helpful in such a complex setting with numerous structures working towards the same objective, and yet different from one to the other.

Witnessing the changes as they happened at government level (through review of policy documents) and on the ground (through field work, contact made with probation services and charities) has proven to be a major advantage during this study, in terms of exploring the various aspects involved in the rehabilitation of ex-offenders. Interviews were used to gather the thoughts of stakeholders regarding the new guidelines introduced by the ministry of justice, and how they, as well as their clients, were beginning to be affected by those changes. Information collected from interviews helped in efforts to develop and refine theories based on contexts, mechanisms and outcomes. In other words, hypotheses were outlined following:

What works for whom in what circumstances?

Thematic analysis played a major part in this research, especially in the data analysis of interviews. The approach used was inductive and involved searching and identifying patterns across the data. Whilst coding, the priority was given to action and
processes as recommended by Charmaz (2012), as it best defined the connections within the data.

5.1.2 Limitations of the study
The limitations of this study are that the time was very limited for an in-depth study. A lot of time was spent in the recruitment phase for interviews because of the changes organisations were going through. Also, it was not always possible to get hold of staff members in each service within a specific charity as interviews were mainly conducted on the basis of the staff members that were available. In charity 3 only one interview was conducted (against five in charity 1 and five in charity 2) and it might not be representative of the views of all staff members of that specific charity. Amongst all the interviewees, one was a former client, although the information collected from that particular individual puts into perspective a key aspect of the relationship between charities and their clients: predisposition to dependency. Although that trait was confirmed based on interviews we had with other charity workers, it would have been better to develop that characteristic further with more interviews of former clients.

5.2 Conclusion
As government policies are becoming tighter when it comes to offenders management, the work of charities supporting ex-offenders is becoming more and more difficult and their clients might end up lost in the perpetual cycle of re-offending. The Ministry of Justice have stated that in order to ensure the reduction of the reoffending rate (especially in short sentenced offenders) smarter and tougher regulations will be put into place. At the moment these regulations are put in place, the voluntary sector is already paying a huge price. In fact, bigger charities are growing and smaller ones are disappearing. During the fieldwork I conducted, numerous charities were not available
to participate in the study as they were going through major changes and some others lost their funding in the process and could not take part in the study anymore. Some of those that contributed to the research lost part of their staff members in a space of three months. In other words for most of the charities working in the criminal justice, the future seems unclear. The new policies have put major emphasis on the management of short sentenced offenders (those who have been in prison for less than 12 months) and the financial cost. In fact, this group of ex-offenders will be supported towards rehabilitation by organisations in the voluntary sector, and funding will be allocated depending on how successful those organisations are.

This qualitative study explored and investigated charities supporting ex-offenders towards their rehabilitation, and started working in the development of broad theories based on information gathered from stakeholders. According to information collected from the charity workers who took part in this study, mental health well-being has been found to be of central importance when it comes to the way ex-offenders engage and respond to the support they receive. Accordingly, in order to ensure a successful rehabilitation the following factors are essential:

- Supporting networks of social and professionals
- Mental health and well-being stability
- Adequate support

Barriers to successful rehabilitation are related to:

- Limitation in funding given to charities
- The chaotic life of ex-offenders
- The social and community perceptions on the ex-offender

This study has explored and investigated charities supporting ex-offenders towards their rehabilitation, and has attempted to develop hypotheses on the enablers and obstacles of the mental well-being of ex-offenders and ultimately their successful
rehabilitation. This will help to inform emerging policy and practice in the government efforts in designing a more effective programme in terms of offenders’ management. Elsewhere within the third sector, doubts have already risen in terms of the isomorphic changes affecting voluntary organisations and social enterprises (Thompson and Williams, 2014), due to the latest cuts in government funding. Comparably, this study could contribute in giving an idea on how the voluntary sector, in the sphere of criminal justice, is affected by the current changes brought by the Transforming Rehabilitation agenda.

5.3 Recommendations

In the light of what precedes, the recommendations we are able to make are as follows:

- For future research in the field of offenders management and rehabilitation:
  Given that the Transforming Rehabilitation reforms are at the inception stage, this research could lead to an original piece of work in which the researcher would embed himself/herself into a selected charity and follow the development and effective implementation of the new regulations.

- For policy makers: Policies on offenders management should be made not only based on cost effective procedures but by considering the needs of the offender, emphasising particularly on the mental well-being of the offender, as reoffending rates depend on the way he or she conducts himself/herself.

- For supporting agencies: The different agencies working with a specific client must be aware of everything that is going on with that client in partner agencies, and decisions should be taken considering the situation of the client.
E.g.: If a Job Centre appointment is missed, instead of cutting the individual’s allowance, the reason for not turning up should rather be investigated.

- To possibly improve this study: The study is quite multidisciplinary, therefore conducting such research requires more than a year; in order to be able to have the opportunity to understand and tackle all the aspects involved in an effective way. As a matter of fact, this study is a good pilot study for a Ph.D. that could go deeper by including the service users in the research, in order to explore their perspectives on the services they receive as part of their rehabilitation as well as their mental health and well-being overall. It could also be the opportunity to focus more on mentoring as an instrument to successful rehabilitation within the sphere of criminal justice.
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APPENDICES

APPENDIX I  Participant’s information sheet and Consent Form

*Presented on the University of Birmingham headed paper*

Participant’s information sheet

Successful rehabilitation: the experience of charities working with short sentenced offenders (less than 12 months) with substance misuse problems after discharge from prison

WHO ARE WE?

We are a team of researchers at the University of Birmingham who are doing a primary qualitative research study that will investigate different charities involved in short sentenced offenders’ rehabilitation programmes and explore how they intervene to help them with their drug use and mental health issues.

WHY ARE WE DOING THIS RESEARCH?

By doing this research, we wish to understand existing policies and practice in place to support short sentenced ex-offenders. We also wish to explore the perspectives of people working in the third sector, on how they see the actual support system in the wider context of rehabilitation and mental health and the overall well-being of their clients.

WHOSE VIEWS DO WE WANT?

We want to hear from key people in charities and organisations involved in the rehabilitation of ex-offenders - project managers, volunteer coordinators, charity workers, offender managers, and mentors.

WHAT DOES IT INVOLVE?

We would like you to conduct interviews in which we ask you some questions about your organisation and your experience in the rehabilitation of ex-offenders. We also ask you for your thoughts on current policies in terms of ex-offenders management. The interview should take no more than 30 minutes, but you are welcome to give us more time if you have more to add.

CONFIDENTIALITY

Every effort will be made to ensure that the information collected cannot be used to identify you. While transcribing the interview, all data that can identify you will be removed.

DO I HAVE TO TAKE PART?

No, you do not have to take part in this research, and you are not required to participate as part of your job. If you do not want to take part in the research, this will not in any way affect your employment. Also, your name will not be recorded if you do not wish to.
WHAT TO DO NEXT

If you would like to take part in an interview, please sign our consent form. Alternatively, email Bibiane Manga at [email] for more information.

WHAT WILL WE DO WITH THE RESULTS OF OUR RESEARCH?

All the information we get will be summarised to help concerned services to address the issues raised. It will also become part of the main researcher’s (Bibiane Manga’s) Masters by Research dissertation and may inform further research conducted by her. We will ensure that you cannot be identified from any reporting of the research results.

You can contact us in a 2-week window after the interview and ask us to remove your data if you wish.

As this research will aim to identify areas for improvement in support systems for ex-offenders and prepare the ground for further research on whether this support can reduce re-offending, everyone’s contribution to this process will be valuable.

To contact the research team, please email EITHER Bibiane Manga at XXXXXXX OR the project supervisor Antje Lindenmeyer at XXXXXX. Her University phone number is XXXXXX

Thank-you for taking the time to read this information sheet
Consent Form

Project: Successful rehabilitation: the experience of charities working with short sentenced offenders (less than 12 months) with substance misuse problems after discharge from prison in Birmingham, United Kingdom

Investigator: Bibiane Manga
Supervisor: Antje Lindenmeyer
Sponsor: University of Birmingham
Course: MSc by Research (Dept. of Primary Care Clinical Sciences)

1. I confirm that I have read and understand the information sheet for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason.

3. I agree to take part in the above study.

4. I understand that if, after the interview has taken place, I would like to withdraw, I have 2 weeks to notify the investigator.

5. I agree to the interview / consultation being audio recorded

6. I agree to the use of anonymised quotes from my interview in publications, reports and the final thesis relating to this study.

7. I agree that my data gathered in this study may be stored (after it has been anonymised) for the purposes of the research and any publications arising from it.
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Contact details:

Bibiane Manga, Research Student, University of Birmingham at XXXXXXX

Antje Lindenmeyer, Academic Supervisor, University of Birmingham at XXXXXXX or phone XXXXX
APPENDIX II  Interview schedule

Theme:

Successful rehabilitation: the experience of charities working with short sentenced offenders (less than 12 months) with substance misuse problems after discharge from prison in Birmingham, United Kingdom

Interview Reference Number:

Brief introduction:

We are carrying out an investigation on how your organisation is involved in the rehabilitation ex- offenders and explore how you intervene to help them with their drug use and mental health issues. Would you mind answering a few questions on your experience?

Your answers will be treated with confidentiality among people involved in the research process and in the production of the project report. All responses will remain anonymous. Would you be agreeable to that?
1. What made you decide to work in this field?

2. How will you describe your role?

3. Do you interact with clients?
   If yes, how?

4. How would you describe your organisation?

5. Do you work in partnership with other organisations?
   If yes, how?

6. Who would you say are you clients?

7. Do you make any difference between offenders and ex-offenders?
   If yes, in which category do you put your clients?

8. How successful would you say your organisation is?

9. How many clients do you work with each year?
   9. a) about how many are short-sentenced offenders?
   9. b) about how many have drug use problems?
   9. c) about how many have mental health difficulties?

10. What support do you give to clients with drug use problems?

11. What support do you give to clients with mental health issues?

12. What support do you give to clients with both drug and mental health difficulties?

13. What are the challenges you encounter in your role?
   a) At organisational level
   b) At personal level

14. What are your thoughts on the current support system for ex-offenders?

15. Is there anything you would changes?
   If yes, what is it?

Thank you very much for taking the time to answer my questions.
APPENDIX III Application for Ethical Review Form