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Original Citation

Robinson, Garreth (2014) Drug treatment and desistance from crime. Masters thesis, University of Huddersfield.

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Drug treatment and desistance from crime

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Human and Health Sciences

Submitted of the degree of Master of Science by Research

Acknowledgments

I would like to take this opportunity to say a big thank you to Grainne McMahon and Rachel Armitage (research supervisors) for their patience, and guidance throughout the process of preparing this research project. I would also like to thank the participants and organisations which were involved in this project. Further, I would like to thank my family, friends and current employer for their patience and support throughout the year.

Abstract

This project examined desistance from crime for drug-using offenders, and explored the apparent disjuncture between what is known about desistance from crime and the work that is done with offenders in the criminal justice system. The project concentrated on three central theoretical ideas: first, the impact of social bonds on the process of desistance; second, the need for the development of a pro-social identity in order to desist; and, third, the importance of motivation in the process of change. In addition, the study explored the links between desistance research and the criminal justice interventions which aim to rehabilitate drug-using offenders.

The study used a qualitative approach and collected semi-structured interview data from ten members of staff working in criminal justice agencies, and ten drug-using offenders subject to a Drug Rehabilitation Requirement. The findings indicate that the desistance needs of drug-using offenders were broadly aligned to the theoretical frameworks of desistance and were concerned with forming or re-forming social bonds, adopting a pro-social identity, and maintaining motivation for change. The extent to which current drugs rehabilitation provides for those needs, however, remains variable.

The findings from the current study indicate that, in theoretical terms, there is a need to continue to investigate how, why and when offenders desist from crime, while in policy terms, the gap between criminal justice practice and knowledge of desistance from crime needs to be further addressed.

Contents

Introduction to the thesis

Academic focus on desistance from crime has grown since the 1970s and 1980s. The main areas of interest around this time were the relationship between age and crime, in addition to issues around maturity. Academics within this field of study, however, are also interested in the effect that social bonds, such as attachments to families, social networks, and institutions of informal control (for example, schools and employment), have on the process of desistance. There is also a focus on the offender's part in his/ her own desistance process where the formation of informal social control and social bonds are argued to facilitate motivation to desist. Furthermore, research suggests that changes within an individual's life, such as gaining employment or entering education, in addition to creating strong parental bonds, are also important for desistance as this leads to conformity and the development of a pro-social identity. Moreover, these changes are argued to help the offender to increase their personal agency and responsibility, which in turn generate the motivation that is essential to desistance.

Research has consistently uncovered strong links between problematic drug-use and persistent patterns of offending. Moreover, drug misuse and the negative factors surrounding this behaviour complicate the process of desistance from crime. The prevalence of problematic drug-users is arguably unknown; however, those accessing treatment for drug misuse is currently at its highest. In response to the problem of drug-related crime, the former Labour government introduced the Drug Treatment and Testing Order, which was amended in 2003 to become the Drug Rehabilitation Requirement (DRR). This is a community order which requires an offender to undergo drug rehabilitation with the aim of terminating his/ her offending.

There is evidence which indicates that drugs rehabilitation programmes in the community are successful in controlling crime. However, conflicting evidence suggests that a large percentage of community orders and treatment programmes are not completed, and that the reoffending rates of offenders on such orders are high despite efforts to rehabilitate. One of the main criticisms of these programmes is that they are not sufficiently informed by desistance research.

The current research is concerned with the needs of drug-using offenders in terms of desistance and with this apparent disjuncture between drugs rehabilitation programmes (specifically, the DRR) and what is known about desistance from crime. To investigate these issues, five members of the probation service (who manage offenders), five members of a drug treatment agency (who work with offenders on the DRR), and ten drug-using offenders subject to a DRR, were interviewed. In the thesis, their views and experiences are discussed and evaluated in terms of theoretical ideas and existing research around desistance.

The thesis contains the following sections:

- A literature review which discusses previous research on desistance from crime and identifies the theoretical framework for this project.

- A description of the aims of the project and research questions.

- An exploration of the methodology employed for the research, the methods of data collection, the sampling technique, data analysis, and ethical considerations.

- The findings from the data and a discussion of these findings in relation to the aims of the research and the theoretical framework of the research.

- Finally, the conclusions from the research, which will include its implications (for theory and policy) and limitations.

1.0 Literature Review

The purpose of the literature review is to offer a critical account of current academic and policy literature on desistance from crime and the rehabilitation of drug-using offenders. The review will be used to identify key concepts in the desistance debate, and to explore recent literature on the links between drug treatment in the criminal justice system (CJS) and desistance from crime. These links are central to the current study. The review will begin with a brief overview of the relationship between drug-use and crime, and how individuals may cease their drug-use.

1.1 Problematic drug-use, crime and cessation

Drug misuse has been defined by the National Drugs Advisory and Treatment Centre (2009, p.1) as "illegal or illicit drug taking or alcohol consumption which leads a person to experience social, psychological, physical or legal problems related to intoxication or regular excessive consumption or dependency". The World Health Organisation (1992, p.5) has a more complex definition of drug misuse, the key aspect of which concerns "difficulties in controlling substance-taking behaviour in terms of its onset, termination or levels of use". Regardless of the definition, there is a common consensus that illicit and illegal drugs are a serious threat to those who use them and to the health and wellbeing of communities. The Misuse of Drugs Act 1971 ranks illicit drugs into three categories (A, B and C). Class A drugs are considered the most harmful and include heroin and crack cocaine, among others (Home Office, 2009). Both heroin and crack cocaine have addictive qualities which make it difficult for the user to terminate their use, and over time a tolerance develops making the user need more of the substance to achieve 'a high'. As such, those who continue with drug-use and do so on a regular basis may be unaffected by a small amount; while a highly tolerant user may consume up to several grams of heroin and high quantities of crack cocaine daily. The literature suggests that heroin and crack cocaine are commonly used together, and that a large percentage of users are dependent on both substances. These individuals are commonly referred to as 'problematic drug-users' (Hayes 2011, cited in Drink and Drug News, 2011).

Evidence indicates that when drug-use becomes problematic, an individual's voluntary control is weakened, which can lead to criminality.[1] As such, Frisher and Beckett, (2006) note that problematic drug-use (PDU) has an influence on persistent patterns of offending. Furthermore, Packer et al. (2009) contend that due to the fact this group of people will be dependent on a drug, it is likely that the proceeds from their offending will be used to fund their addiction. Research has established strong links between drug-use and crime, particularly acquisitive crime such as theft, burglary and vehicle crime. Indeed, Simpson et al. (2007) note that 56% of all acquisitive crime is committed by problematic drug-users. Similar findings suggest that these individuals "commit between a third and a half of all acquisitive crime" (Home Office, 2010, p.6). The links between drugs and crime have been established through several UK and international studies (Hammersley et al., 1989; Parker and Kirby, 1996; Parker et al., 2009; Coid et al., 2000; Gossop et al., 2000; 2005; Nurco, 1993; Van der Zanden et al., 2007). According to the Home Office (2010) there are an estimated 320,000 problematic drug-users in England and Wales with 170,000 in treatment in any one year for their dependency.[2]

PDU is believed to be a chronic, relapsing condition. As such, treatment for individuals involved in PDU should, it is argued, be around symptom management because cessation from drug-use is not a "realistic treatment option" (Best et al., 2008, p.619). This has implications for the ways in which drug-use is treated. However, Granfield and Cloud (1996) conducted research on problematic drug-users who had terminated their use without the help of formal treatment programmes and concluded that the rejection of an addict identity and the shift away from deviant peer group associates, to non-deviant peers, were key factors in the recovery process. These authors went on to argue that acquiring positive social bonds may insulate individuals and, in turn, protect them from further immersion in an addict subculture. These changes may, therefore, allow them to retain their

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[1] Three main models explore the drug-crime link. These are: (1) drug-use leads to crime; (2) crime leads to drug-use; and (3) the common cause model. These models have some implications for the ways in which PDU is addressed. For example, if drug-use should be addressed before offending or the other way around.

[2] The true extent of drug-use is hard to measure. In the addiction field, statistics on the prevalence of drug-users comes from longitudinal drug treatment studies. However, many users remain hidden from services; therefore, they are not included in the statistics. In addition, the Home Office relies on household surveys to obtain an estimate of drug-use in the UK which omit, for example, those living in hostels or those who are homeless. Further, the findings must be considered with some caution because people who use the most problematic of drugs, such as heroin and crack cocaine, which are argued to be in the highest proportion of offenders, are unlikely to participate in these surveys (Frisher and Beckett, 2006).

pre-addict identities and relationships. White and Kurtz (2006) have provided further evidence that the cessation of drug-use is possible under certain conditions. That is, that the termination of drug-use is mediated by the motivation of the user, and the extent of support (such as, family, peer networks and partnerships during the termination process), in addition to the possibility of employment and secure accommodation.

Best et al's (2008) research aimed to assess the factors that lead to the cessation of PDU from a group of former offenders. The results showed that a high percentage failed in their first attempt to terminate their use, and that on average it took five attempts before any change in behaviour was achieved. When the cessation from PDU was achieved, however, the motive reported most frequently was around the maturing out phenomenon and reports of becoming "tired of the lifestyle" (Best et al., 2008, p.623). Nevertheless, the dynamics associated with maintaining this termination were undoubtedly linked to social factors. As such, the participants in Best et al's study were asked about the influences which assisted in their attempts to abstain from PDU. The themes most commonly discussed were support from a partner, moving away from drug-using associates and finding support from new-found peers and having a job, in addition to having reasonable accommodation.

The issues identified in the studies above are similar to those which have been identified in research on desistance. Indeed, and interestingly, in his study, Maruna asked participants if they could continue drug-use without offending and vice versa, and "most thought the question to be ridiculous" (Maruna, 2001, p.64). As such, Maruna concluded that if offenders wish to terminate their drug-use, they must also stop offending and associating with deviant peers. Equally, if an individual wishes to desist from crime s/he must abstain from drug-use. Thus, according to Maruna, (2001, p.64), "The study of desistance is almost necessarily a study of abstaining from both types of behaviour". The next part of the literature review will define desistance and explore the main theories of desistance from crime.

1.2 Defining desistance from crime

In recent years the scientific study of "desistance from crime has come of age" (Maruna et al., 2004, p.271). Owing to this development, several theories are competing to explain how

an individual terminates his/ her[3] criminal behaviour. The study of desistance from crime, however, faces a range of conceptual difficulties. As such, those who study why and how offenders desist are often "hampered by definitional, measurement, and theoretical incoherence" (Laub and Sampson, 2001, p.1). Maruna (2001) suggests that one of the significant problems that desistance researchers face is how desistance can be defined, in addition to the difficulty of operationalizing the concept in criminological research. There is no actual agreed definition of desistance; however, those who study this issue are in agreement that it must involve a cessation of criminal activity in some form (Maruna, 2001; Weaver and McNeill, 2007). According to Weaver and McNeill (2007), if offending behaviour is no longer repeated then this simply means an individual has desisted. Laub and Sampson (2001, p.1) similarly note that "Termination is the point when criminal activity stops and desistance is the underlying causal process". As such, termination is not just about "predictable lulls" (Maruna et al., 2004, p.272), or crime-free gaps between offences (Maruna et al., 2004).

To overcome this definitional concern, an important distinction has been made between primary and secondary desistance. Primary desistance has been defined as the short-term lull or crime-free gap within an individual's criminal career. Secondary desistance, on the other hand, is considered the long-term movement away from offending behaviour to a non-offending lifestyle (Maruna, 2001). Maruna and Farrall (2004) assert that researchers and those who study desistance are not interested in primary desistance; rather, the focus is, and should be, around charting secondary desistance and the mechanisms in place which support this process of change. However, Farrington (1986, cited in Tonry and Morris, 1986, p.222) points out that: "Even a five-year or ten-year crime-free period is no guarantee that offending has terminated". Indeed, Maruna (2001) argues that secondary desistance can only truly be determined when the individual offender has, in fact, deceased (Maruna, 2001; Maruna et al., 2004; Laub and Sampson, 2001). In addition, Laub and Sampson (2001) contend that offenders who have desisted from criminal activity may still continue with forms of low-level offending during their life-course.

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[3] Both gender pronouns have been used here though it is notable that most desistance research to date has been carried out with male offenders. This is an important gap in the study of desistance, as evidence suggests "that factors identified as supporting desistance may have a differential impact or, in some cases, a completely different effect for females" (Farrall et al., 2011, p.221). However, while potential gender differences in desistance are noted here, it is not the remit of this thesis to explore them in particular.

As such, desistance as a concept remains relatively undefined and its measurement remains challenging. It is not the purpose of this thesis to measure desistance from crime specifically but, rather, to focus on views on the factors and processes related to desistance from crime. Nonetheless, while a definitive definition or measurement of desistance is not crucial in the current study, the literature on the process of secondary desistance was used as a starting point for the study and the data analysis.

1.3 Theories of desistance

There is accord among scholars within the field of criminology that most individuals who participate in crime eventually mature out of offending behaviours (Maruna, 1999). Farrall (2002, p.3) argues that individuals "who embark on offending careers would appear to stop at around the same time that they gain stable employment, embark upon stable life-partnerships, and disengage from a delinquent peer group". Nevertheless, there is still limited understanding of what this change process involves. Maruna (1999, p.1) argues that the lack of understanding "stems from the shortcomings of the traditional criminological framework for examining desistance". That is, although there are concerns among criminologists around why and how individuals terminate their offending, attempts to derive a theoretical framework of the desistance process has been somewhat sporadic. Arguably, the attention of criminological research and theory has in the past been devoted to, and concerned with, the 'causes' of crime. As such, criminologists and other researchers have devoted research efforts to addressing individual involvement in crime and examining local and national crime rates (Uggen and Piliavin, 1998).

Academic interest in desistance radically increased during the 1970s and 1980s.[4] Thomas Meiseihelder (1977) and Neal Shover (1983) were two of the early pioneers who contributed to the developing interest in desistance. These scholars in particular aimed to understand desistance from the view of the individual ex-offender. Meisenhelder, in his then influential essay on desistance, quoted from his sample of ex-offenders that "You rehabilitate yourself" (Meisenhelder, 1977, p.329). Later research into criminal careers and

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[4] Rational choice theory was one of the earliest theories of desistance driven by Clarke and Cornish (1985). This approach enjoyed popularity during the 1980s and up to the mid-1990s with studies conducted by Clarke and Cornish (1985); Cusson and Pinsonneault (1986); Leibrich (1993); Shover (1983); and Cromwell et al. (1991). These studies argued that an ex-offender made a rational choice to terminate offending. However, this theory as an explanation for offending "did not last long and this theoretical approach is largely dormant at present" (Farrall and Calverley, 2006, p.10).

life-course perspectives conducted by Sampson and Laub (1993) uncovered evidence that desistance from crime was associated with structural factors involved in the transition into adulthood. Three main theoretical perspectives seem to characterise desistance research now. They are age-crime theories, informal social control theory, and perspectives on personal agency and motivation, and it is these positions which are now examined.

Maruna (2001) highlights two of the most cited explanations of how desistance is maintained: ontogenetic and sociogenic paradigms. Ontogenetic explanations argue that offenders will ultimately "age out of crime, with the sheer passage of time" (Maruna, 2001, p.27). Conversely, sociogenic explanations assert that prolonged employment and a positive or loving relationship are needed in order for the offender to cease offending. The analysis of the relationship between age and crime has a long-standing history in the field of criminology. Adolphe Quetelet was one of the first scholars to discuss associations between statistics, age and crime and maintained that young people were more likely to be criminal than older people, and those areas which contained higher concentrations of young persons would undoubtedly have a higher prevalence of crime (Quetelet, 1842). Similar early examinations of age and crime (Goring, 1919) argued that the process of aging out of crime was a law of nature. That is, desistance from crime is linked to biological processes such as puberty. Later research conducted by Glueck and Glueck (1937) included components of Goring's idea on desistance from crime to develop the theory of maturational reform. This theory argues that offending behaviour will decline soon after the age of 25. From these and further longitudinal studies came the notion of the age-crime curve which led Gottfredson and Hirschi (1990) to contend that the association between age and crime can be considered one of the most undisputed links in criminology and that age is the singular most important factor in desistance.

Gadd and Farrall (2004) argue, however, that ageing alone does not lead to desistance and that the processes involved with ageing have influence over age itself. That is, the increasing involvements that the individual has with social networks, in addition to his/ her psychological development and maturation, all have bearings on desistance. These authors posit that these processes occur, often organically, at certain ages but are themselves crucial. Indeed, Laub and Sampson (2001, p.17) maintain that, "overall, the [age-crime] approach represents a significant movement in criminology, but appears to have

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reached a point of stagnation". In addition, crimes related to drug misuse present a further limitation of the age-crime curve. Heroin and crack cocaine are not drugs that are commonly used by individuals under the age of 24 (DrugScope, 2010; National Treatment Agency (NTA), 2012a). Moreover, those presenting for voluntary drug treatment or those sanctioned to do so through the CJS are generally older (National Drug Treatment Monitoring System, (NDTMS) 2011), with recent findings indicating that the over 30s and 40s represented the highest age-group in treatment (Kirby et al., 2011; NDTMS, 2011). As such, the evidence indicates that the age-crime curve does not apply so easily to this group of offenders.

In terms of a sociogenic paradigm, Farrington (1992) points out that social bond theory is an important explanation of desistance and that it is considered critical in understanding why individuals may desist from crime. Hirschi (1969, p.16), who conceived of social bond theory, contended that "elements of social bonding include attachment to families, commitment to social norms and institutions (for example, school and employment), involvement in activities, and the belief that these things are important". Family, friends and the individual's social networks are argued to positively influence the individual's life and therefore reduce his/ her offending behaviour. For example, Trasler, (1980, p.10) contended that as most young men age out of delinquency, they do so due to having found access to "other sources of achievement and social satisfaction" such as employment, a partner or wife, a stable home and, for some, children. This body of work indicates that age is still a key variable in the process of desistance but it alone cannot explain desistance.

There is now substantial evidence which supports the position that desistance from crime is connected to gaining employment (Farrall, 2002; Farrall et al., 2010 Farrall et al., 2011; Glaser, 1964; Meisenhelder, 1977; Mischkowitz, 1994; Sampson and Laub, 1993; Shover, 1985; Uggen, 2000; Uggen and Kruttschnitt, 1998). Uggen and Kruttschnitt (1998) found in their study that being employed significantly reduced the requirement for illegal earnings, for both men and women. Further studies (Meisenhelder, 1977; Shover, 1983) found that gaining decent and stable employment provided desisters with much needed social and economic resources, and also provided "constructive use of one's leisure time" (Farrall et al., 2011, p.223). In addition, employment is argued to "[generate] a pattern of

routine activities – a daily agenda – which conflicted with and left little time for the daily activities associated with crime" (Shover, 1983, p.214). Relatedly, the contention that desistance is linked to the individual acquiring significant life partnerships (or being married), has also been established in an array of studies (Farrall et al., 2002; 2011; Farrington and West, 1995; Gibbens, 1984; Irwin, 1970; Meisenhelder, 1977; Mischokwitz, 1994; Rand, 1987; Rutherford, 1992; Rutter et al., 1990; Sampson and Laub, 1993; West, 1982). Shover (1983, p.213) maintains that: "The establishment of a mutually satisfying relationship with a woman was a common pattern [and] an important factor in the transformation of their career line". However, Farrall et al. (2011, p.221) point out that male partners influencing their female partners to desist "tends not to be found". In addition, another strand of social bonding associated with desistance which has received considerable attention is that of becoming a parent (Jamieson et al., 1999; Sampson and Laub, 1993; Uggen and Kruttschnitt, 1998). Sampson and Laub (1993) found in their study that if marital relations were successful and child rearing occurs, as long both parents display strong bonds to their children, the subjects were likely to desist from crime.

Sampson and Laub (1993) applied the life-course framework to current criminological issues and used Hirschi's social bond theory to develop the age-graded theory of informal social control. This theory aims to explain offending behaviours over the life-course and suggests that "salient life events and social ties in adulthood can counteract, at least to some extent, the trajectories apparently set in early child development" (Laub and Sampson, 2001, p.19). As such, these authors argue that desistance may be the result of an individual developing lost or missed social bonds in adulthood. Sampson and Laub (1993) posit that their theory also applies to individuals at all ages; therefore, the effects of informal social control in childhood, adolescence and adulthood are central to their theoretical model (Sampson and Laub, 1993). The key element of Sampson and Laub's approach is that the individual must have a strong bond to society because the strength of the bond to social institutions, such as education, marriage, family, and employment, in adulthood, will act as a turning point in an offender's life. As such, the argument maintained by these authors is that social bonds will provide individuals "with a stake in conformity" therefore giving them a reason to "go legit" (Maruna, 2001, p.30).

However, despite all the evidence, the theory of informal social control (social bond theory) is not without criticism, and previous evaluations of this theory have produced varied results (Uggen, 1996). For example, Gottfredson and Hirschi (1990, p.138) concluded that, when all other factors are equal, the difference in rates of offending among those employed, compared to those unemployed, are "small, non-existent, or even in the wrong direction". Similarly, Rand (1987) discovered that males who enter into the contract of marriage are no less likely to desist from offending than those who do not, in addition to finding little supporting evidence that offenders who become fathers are less likely to continue committing crime. Further, Gottfredson and Hirschi (1990, p.141) contend that, in fact, young adults engaged in relationships are more likely to offend than their counterparts, and argue that: "The offender tends to convert these institutions (of marriage or jobs) into sources of satisfaction consistent with his previous criminal behaviour".

Those who advocate the social bond theory are themselves in agreement that it is contentious (Uggen, 1996). Indeed, Sampson and Laub (1993, p.140) point out that employment "alone" does not have an effect on desistance, however, when employment is "coupled with job stability [and] commitment", in addition to "mutual ties" (that is, an interdependent relationship between employee and employer) there is a reduction in offending behaviours. Further, others argue (Cusson and Pinsonneault, 1986; Mischkowitz, 1994; Rutter, 1996; Sampson and Laub, 1993; West, 1982) that it is not the relationship or marriage by itself that influences criminality but rather the quality and strength of the relationship (interdependent relationship). In addition, the same can be said for educational opportunities; that is, entering into education per se does not correlate with desistance but rather it is the individual's attitude towards education that does (Loeber et al., 1991). For these reasons, Maruna (2001, p.32) contends that: "desistance depends not only on the existence of social attachments but also on the perceived strength, quality, and interdependence of these interactions".

Finally, Maruna and Farrall (2004, p.179) suggest that, in some respects, Warr's (1998) analysis "provided the best-developed sociological alternative (or, possibly, complement) to Sampson and Laub's theory". Warr (1998) maintains that the changing of peer relations in adulthood is critical to the desistance process, rather than the other forms of social bonding suggested by Sampson and Laub. Warr argued that changes to social

networks (that is, spending less time with deviant peers and breaking loyalty towards this group) will go some way to explaining a reduction in crime with age (see also Farrall et al., 2011). As such, when individuals disassociate from adolescent social networks, especially those which encourage and account for offending behaviour, they lose both the motivation to commit, and the means of committing, further offences. Giordano et al. (2003) note that previous studies around this topic have only focused on adolescent samples; nonetheless, in their Ohio life-course study these authors discovered that deviant peer contact and romantic partner criminality are, in fact, related to high levels of adult offending. Indeed, Farrall's (2002; 2006) more recent study found that in his sample, many probationers stated that two of the main obstacles they faced, related to re-offending and desistance, were indeed their drug-use and peer group involvement. (See also, Jamieson et al., 1999; Osborn, 1980; Sampson and Laub, 1993.)

In terms of drug-using offenders, previous research has also suggested that drug-use negatively influences adult social bonds (Shroeder et al., 2007), and that drug-use is unsuited to individuals who wish to conform to conventional social roles such as acquiring a partner, entering employment, or being a parent (Sampson and Laub, 2003). As such, drug-use makes the development of social bonds all the more difficult for these offenders. In that respect, Shroeder et al. (2007) maintain that drug-use impacts on the desistance process through a number of characteristics such as addiction, stigma, and the drug culture itself. Specifically, some authors suggest a differential association explanation (Sutherland, 1939) for the role of substance misuse in criminality. That is, that drug-using networks also provide "help, encouragement, and support for such drug-users" (Shroeder et al., 2007). In addition, it is through contact with these deviant networks that an individual will gain criminal capital (Sullivan, 1989), and the investment in this will restrict access to conforming to societal norms. This may make the process of desistance even more challenging for drug-users.

Importantly, Farrall et al. (2010; 2011) maintain that desistance from crime is linked to both the agency of the offender and the structural circumstances within which s/he lives. That is, individuals' decisions to stop offending will be affected by their social setting, the opportunities available to them and their own decisions and desires (personal agency). Farrall et al's (2010) contention mirrors that of Meisenhelder (1977) who, as above, cited the words of his ex-offenders that "you rehabilitate yourself". Similarly, other studies

(Farrall, 2002; Maruna, 2001; Mischkowitz, 1994) discovered that although the professionals in their studies attributed desistance to external and social factors, the ex-offender participants indicated that their now crime-free behaviour was related to their own "free will" and "personal effort" (Mischkowitz, 1994, p.325) (which are, incidentally, elements of the unfavourable rational choice theory cited above).

The idea of personal agency is now crucial to desistance "yet there have been few attempts to build a model of desistance that comprehensively takes into account individual agency, the input of specific criminal interventions [...] and the role of wider social and economic considerations" (Farrall et al., 2011, p.219). It is argued that it is not that structural opportunities (for example, employment, positive relationships or geographic location) are irrelevant to desistance but rather that "external causal factors alone cannot account for the desistance phenomena" (Farrall et al., 2011; Maruna and Farrall, 2004, p.182).[5] As such, an important factor that is absent from the ontogenetic and sociogenic approaches is the individual, or as Maruna (1999, p.5) notes "the wholeness and agentic subjectivity of the individual". Maruna (1999) highlighted this position by arguing that narrative theory and studies offer an explanation which views desistance as intentional and purposeful human behaviour. Maruna (1999, p.8) argues that "From the narrative perspective, individuals desist from crime, they 'act as [their] own change agent' and are not merely the product of outside forces of social control or personality traits". Indeed, Laub and Sampson (2003) revised their earlier theory to accommodate Maruna's and similar contentions. As such, Laub and Sampson (2003, p.280-281) highlight that "personal agency looms large" in desistance efforts and the individuals studied were "active participants in constructing their lives".

The recent focus on personal cognition (Giordano et al., 2002) and self-identity (Burnett, 1992; Farrall, 2002; Maruna, 2001) suggests that turning points (Laub et al., 1998; Laub and Sampson, 2001; 2003) could arguably impact on individuals differently depending on their levels of "motivation", their "openness to change", or their "interpretation of events" (Maruna and Farrall, 2004, p.179). For example, Giordano et al's (2002, p.999-1002)

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[5] "As individuals move into middle age they experience crucial age-related changes in self-concept, motivations, aspirations and attitudes. These subjective changes do not simply accompany changes in the objective sphere of life, but trigger them as well, and determine how external events or physiological states will be interpreted and acted upon" (Gartner and Piliavin, 1988, p.299).

four-part theory of cognitive transformation is arguably the most fully developed theory relating to these positions. These authors contend that the process of desistance consists of: (1) the "openness to change" of the offender; (2) exposure and reaction to "hooks for change" (or turning points); (3) the envisioning of an "appealing and conventional replacement self"; and (4) a "transformation in the way the individual views deviant behaviour". As such, Giordano et al argue that, first, offenders need to be motivated to change and to be open and exposed to positive life opportunities, or hooks for change (for example, getting a job) in order for reform to occur. If change occurs, they argue that the individual has accepted new opportunities therefore triggering a new pro-social identity. Consequently, the individual has gone through a transformation from 'offender' to 'non-offender' (Giordano et al., 2002). This can be related to the same change process identified in secondary desistance mentioned above. In this paradigm, therefore, motivation and identity change are key.

The subjective changes in individuals' self and identity are reflected in their changing motivations, greater concern for others and their desire for a more positive future (Maruna, 2000 cited in McNeill, 2002). For example, Maruna (2001) sought to understand how changes in ex-offenders' identities allow for desistance by analysing the self-narrative of two groups of offenders, one persisting and one desisting. Or, as Maruna (2001, p.8) notes, to "identify the common psychosocial structure underlying [ex-offender's] self-stories". Maruna's (2001, p.7) analysis showed, that "to desist from crime, ex-offenders need to develop a coherent, pro-social identity for themselves". Maruna contended that those individuals who desisted from crime had high levels of self-efficacy[6], were in control of their futures, and were motivated by a clear sense of purpose. Maruna discovered two dominant themes in the narrative accounts between the persisting offenders and the desisters, in relation to generativity and agency, which led him to conclude that the persisting offenders lived by a "condemnation script" (wherein they believed that their lives were pre-determined because of past behaviours) while the ex-offenders lived by a "redemption script" (Maruna 2001, p.75-87) whereby they were able to move away from offending and

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[6] Self-efficacy is an individual's belief in their own ability to succeed in certain situations. This concept plays an important role in Albert Bandura's Social Learning Theory. According to this theory, people with high self-efficacy (that is, individuals who believe they can perform well) are more likely to view obstacles they face in life as something to be mastered rather than something to be avoided (Bandura, 1977; Farrall and Calverley, 2006; Maruna, 2001).

to aspire towards generative goals. These ex-offenders illustrated the "language of agency" (Maruna, 2001, p.77) and were able to "make good" and give something back to society (and indeed the CJS) as "wounded healers".

Further evidence from narrative studies (Maruna, 2001; Maruna et al., 2004; Burnett, 1992; 2000; Burnett and Maruna, 2004; Farrall, 2002) suggests that those in their sample who did desist found new interests that led to a new societal role, new identity, self-concept and agency that preoccupied and overturned the individual's value system. It could be argued that the achievement of acquiring these new found aggregates, which the individual is not prepared to jeopardise, over-rides the interest and need to offend (Farrall et al., 2011; Lebel et al., 2008). This is itself an aspect of social bond theory. Further, the discovery of agency appears to be important as it involves significant others in shaping a new identity and a positive outlook on the individual's future (Weaver and McNeill, 2007).

Further studies (Burnett, 1992-1994; 2004; Farrall, 2002; Healy and O'Donnell, 2008) have revealed similar findings. Burnett's study, for example, illustrates that a breakdown of social bonds will affect "a person's attitudes and motivation" and s/he "may be overwhelmed by reality" (Burnett and Maruna, 2004, p.399). However, "Burnett discovered [also] that those offenders who were most confident and optimistic about desisting had greatest success in doing so" (Weaver and McNeill, 2007, p.5). Moreover, the analysis from Burnett's study found a strong correlation between those who predicted their reoffending and those who were found to reoffend. From this the argument appears to be that individuals are able to foresee (at least in part) whether or not they are going to offend. Similarly, Farrall (2002) found that a belief in the ability to desist was linked to desistance. Again, motivation and the "language of agency" is key. Interestingly, however, Healy and O'Donnell (2008) found in their sample that the majority of participants had a strong desire to desist from offending, however, their aspirations and desires (evidenced by their short term goals) revealed very ordinary needs such as, finding employment or moving into education, finding appropriate accommodation or to stopping drug-use. As such, the focus remained on those social goals. Indeed, the sample in Healy and O'Donnell's study appeared to be unconcerned with generative concerns or "giving back" while they did not find much evidence of personal agency in their sample (though they themselves concede that their

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sample was in only the very early stages of reform (and younger) compared to the samples involved in the studies above).

In all, then, the relationship between social bonds, structural change and agentic conditions in desistance remains relatively unclear and very complex. Indeed, there are several theories of desistance from crime (and more besides, which have not been covered in this review) which are still being developed, and there is still much debate on what brings about and sustains desistance. The theories above suggest that it is a lengthy and complicated process that is linked to a combination of psychological, sociological, and demographic factors that vary between individuals. This complexity has obvious implications for the work conducted with offenders in the CJS. As this thesis is focusing on drug-using offenders; the next section of the review discusses the nature of drugs rehabilitation in criminal justice.

1.4 Offender rehabilitation and drug treatment

Policy changes during the 1990s saw the emergence of a movement known as 'what works', and a shift towards the treatment and rehabilitation of drug-using offenders in order to reduce offending. This movement saw a greater emphasis placed on cognitive-behavioural interventions and a rapid growth of structured day care interventions, group-work programmes and various other specified activities (Farrall, 2004, cited in Mair, 2004). McGuire and Priestly (1995, cited in McGuire, 1995, p.16) argued that cognitive and behavioural interventions offer the most "encouraging approaches" for addressing offending; that is, teaching offenders new styles of thinking and acting should assist them to evade those situations and temptations which lead them to offend. Equally, McIvor (2009) points out that the rationale behind this change was that if individuals' drug misuse is addressed, it would result in lower levels of crime, as they will not need to commit crime to support their addictions.[7] According to McNeill (2006, p.45) "the change process involved in the rehabilitation of offenders *is* desistance from offending" (emphasis added). Rehabilitation is reductivist in intent as it aims to reduce crime through punishment and stems from the positivist school of criminology. Positivists argue that individuals are not rational actors and are driven by biological, psychological or sociological forces that

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[7] Leavitt et al. (2000, p.237), however, points out that "the best supported conclusions are that treating someone who does not want to stop rarely succeeds and treating someone who does is often unnecessary".

determine their behaviour. Positivists further state that offending may be prevented by addressing the social, economic or individual factors argued to be the root cause of crime (Crow, 2001). Raynor and Robinson (2009) point out that within the literature, offender rehabilitation rarely comes with a definition and those definitions that have been presented are brief and questions may be asked around the objective of rehabilitation. That is, does it take away the need for offending or are its aims to reform and reintegrate offenders back into society?

In terms of drugs rehabilitation, however, the National Treatment Agency[8] (NTA) (2002, p.2) has produced the following definition:

> *"[Drug treatment] describes a range of interventions which are intended to remedy an identified drug-related problem or condition relating to a person's physical, psychological or social (including legal) well-being. Structured drug treatment follows assessment and is delivered according to a care plan, with clear goals, which is regularly reviewed with the client. It may comprise a number of concurrent or sequential treatment interventions".*

Following this definition, concerns were raised around the aims of treatment interventions within a criminal justice setting. That is, there are fears that viewing drug treatment through a criminal justice or punishment lens may "[distort] service provision" (Seddon, 2007, p.274). Seddon (2007, p.274) argues further that there could become too much emphasis on the priority given to crime reduction and that this "represents only one set of problems"; therefore, there could be a fundamental shift in the way the term 'treatment for drug-use' is perceived. For example, prioritising crime reduction may lead to treatment modalities which omit physical, psychological and social domains as primary treatment goals.

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[8] The National Treatment Agency for Substance Misuse (NTA) was established in 2001 to improve the availability and effectiveness of drug treatment. The NTA, however, did not provide treatment, but works in partnership with local commissioners and treatment providers to improve the quality of services, promote evidence-based practice and improve the skills of the drug treatment workforce. However, on the 1st April 2013 and during the writing of this thesis, the NTA's key functions where transferred to Public Health England.

Nonetheless, the Crime and Disorder Act 1998 introduced the Drug Treatment and Testing Order, now known as the Drug Rehabilitation Requirement (DRR). The Drug Intervention Programme (DIP) launched in 2003 and adopted with it the DRR, with the aims of facilitating integration between criminal justice agencies (police, probation, courts and prison with treatment providers) in order to address drug-related problems (NTA, 2011). The DIP uses all the possible opportunities from the point of arrest to post-sentence aftercare to enable drug-using offenders to access treatment. This reflects the growing consensus that treating these particular offenders (even coercively) is a successful approach to breaking the link between drugs and crime, while "government policies suggest that [such] intervention is essential" (Frisher and Beckett, 2006, p.140; Home Office, 2010).[9]

A DRR is imposed as part of a community order or suspended sentence. The order requires the offender to engage in a period of treatment and urine testing and undergo medical and psychological interventions, complemented by lifestyle interventions which aim to tackle the correlates of PDU. A DRR intends to engage offenders in treatment for between six months and three years and also aims to help offenders to identify ways of terminating their offending, to understand the links between their offending and drug-use, and to help to set realistic goals to change their lives for the better (Frisher and Beckett, 2006; NTA, 2011; Someda, 2009). The DRR is facilitated by the probation service which manages the order with a partnership approach from drug treatment agencies which provides treatment (Bourn, 2004; Home Office, 2010).

There are four main types of interventions that are likely to be delivered on a DRR. These include the use of drug testing, prescribed clinical interventions, one-to-one supervision, and structured group-work. Prescribed clinical interventions, recommended by

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[9] Indeed, the general trend of the CJS is its faith in the concept of coercive treatment, and it is now a fundamental element of British drug policy and practice (Hunt and Stevens, 2004). The rationale behind the nature of coercive treatment is established by an array of evidence. For example, research has identified that coercion into drug treatment can result in positive outcomes. As such, coercion helps offenders to stay in treatment longer (Turnbull et al., 2000; Harrison, 2001), and the longer these individuals are engaged in treatment, the more likely it is that they will be successful in abstaining from drug-use and desisting from crime (Appel et al., 2000; Scott et al., 2003). However, there are concerns among academics, probation staff and treatment practitioners that treatment needs to be voluntary if positive outcomes are to be seen (Home Office, 1999). According to Seddon (2007, p.273), for example, "It has been argued that coerced treatment is doomed to failure precisely because individuals do not have this internal motivation". Moreover, research suggests that only a minority of offenders are motivated to change early on an order (McMurran, 2002). Therefore, interventions such as, motivational interviewing should be adopted in order to help offenders recognise their problems, in addition to using this technique throughout the order to sustain motivation.

the National Institute of Clinical Excellence (NICE, 2007), include the use opioid substitution treatment (OST) which uses medication such as methadone or buprenorphine with drug-users. OST, it is argued, helps to stabilise problematic drug-users whilst reducing their cravings for illegal substances (Gossop et al., 2005; NTA, 2012c; Moffatt et al., 2005; Lind et al., 2005). Individuals entering treatment for the first time may be ambivalent to change, therefore, adding to the risk of early drop-out. OST, however, aims to engage and stabilise offenders "in their own treatment, and if they drop out, bring them back in quickly" (NTA, 2012c, p.15). Within a criminal justice setting, there is an even greater emphasis placed upon the use of OST as it is believed to be an effective tool for reducing the offending of problematic drug-users. As such, in many localities in England and Wales, rapid methadone prescribing is viewed as a means of making coerced treatment, for this group of offenders, more attractive (Gossop et al., 2001). However, according to Seddon (2007, p.274) this is a strategy which causes "some tension with a more careful and clinically driven approach to prescribing".

The issues between PDU and crime and the effectiveness of drug treatment in reducing both crime and drug-use have been reviewed in previous research (Stevens et al., 2006; Gossop et al., 2005; Holloway et al., 2005). The success of community rehabilitation, in general, for problematic drug-users has been supported by research that argues that the interventions and approaches used work with some drug-using offenders in controlling crime. In this research, offenders offered drug treatment within the community saw decreases in their offending behaviour (Home Office, 2010; McSweeney et al., 2008; NTA, 2011). The strongest evidence appears to be in favour of those interventions with a criminal justice coercive approach which incorporate an element of OST, in addition to the use of recovery communities (Best and Laudet, 2011; McSweeney et al., 2008; Sampson and Laub, 2003).

However, there is little research published on the effectiveness, development or impact of DRRs specifically (Ministry of Justice, 2011; The National Audit Office, 2010), or which has specifically examined desistance factors and processes within the DRR. Notwithstanding, one such study conducted by the Home Office (2007) followed a cohort of 7,727 drug-using offenders given a DRR and found that over half of them showed a 79% decrease in offending during their time on the order. Further, the same research found that

the overall volume of offending among the cohort was 26% lower following DIP identification. Additionally, research published by the NTA (2012b) on 19,570 drug misusing offenders found that individuals who are retained in drug treatment for around a two-year period showed an average of 47% reduction in convictions, and even those who successfully completed treatment after being retained for six months or more saw a 48% reduction in offending behaviours.

Hollingworth's (2008) review of DRRs, however, indicates that there are concerns with the high-rate of non-completion of orders and many inconsistencies regarding the large amount ("approximately three quarters") of orders being revoked due to breaches for further offending and non-compliance (Bourn, 2004, p.3). As such, Hollingworth (2008, p.132) concluded that there is a need for the agencies involved with the DRR to focus on a wide-range of "health and social issues […] which affects offenders" and their ability to engage in treatment. Further, Buchanan (2004) maintains that coerced drug treatment will be unsuccessful unless the interventions tackle the underlying social factors such as poverty, education and employment. That said, McSweeney et al. (2008) point out that the agencies involved with coercive treatment are limited in their capacity to tackle those underlying social and environmental factors.

In addition, The National Offender Management Service (NOMS) commissioned a review of DRRs which was carried out in 2010. The findings revealed that further concerns with DRRs were around the effectiveness of local treatment provision and multi-agency working. Indeed, there were a number of issues found concerning the assessment and referral process, a lack of clarity over the interventions to be used and a disjuncture between the desired operational outcomes between probation and treatment agencies. Furthermore, drug testing results, which is an important part of the DRR, were not used consistently by staff to develop motivation or to hold offenders to account for their drug-using behaviour; this was interpreted by the services users as a lack of "care about their progress" (Ministry of Justice, 2011, p.15). Finally, a large percentage of service users stated that they had no involvement in their care plans which led to a lack of knowledge of the DRR objectives. Notwithstanding, when the service users were asked about what interventions worked best to reduce their drug-use and offending there was an overall agreement that the relationship with their worker and those staff who are caring, willing and "go the extra

mile" (Ministry of Justice, 2011, p.18) worked best, and was perceived to be an integral part of their desistance and recovery process.

Further to the concerns above, there are also criticisms that CJS interventions, in general, rely too heavily on psychological interventions, such as cognitive behavioural therapy and motivational interviewing, which aim to encourage offenders to address "individual pathological deficits" (McSweeney et al., 2008, p.46). Burnett et al. (2007, cited in Gelsthorpe and Morgan, 2007) argued that such interventions deflect attention from the arguably more important need to address the individual's wider social and environment factors that can help move along the cessation from drugs or desistance from crime efforts and promote social inclusion. Furthermore, Weaver and McNeill (2007) suggest that rather than concentrating on individual deficits the emphasis should be on promoting behaviour change by developing on individual strengths. That is, by facilitating positive life transitions and forming constructive social ties may indeed empower drug-using offenders to look beyond negative labels of 'junkie' or 'offender'. This new-formed identity could lead the individual to believe in their own potential and recognise the possibilities for change.

Finally, there are concerns overall about the extent to which drugs rehabilitation (and rehabilitation in general) programmes actually take account of what is known about the desistance process (Farrall and Calverley, 2006). As such, Maruna (2001) argues that interventions should focus less on trying to change offenders demonstrating low motivation and focus on those who demonstrate evidence of motivation. That is, those who show signs of embarking on the process of desistance. A study that underlines this point was conducted by Farrall (2002) and Farrall and Calverley (2006) and their research on 199 offenders from different probation services. This was a longitudinal study that involved open-ended interviews about their experience whilst on probation and their reoffending or desistance. The findings show that desistance may be only marginally related to interventions during the order, and in their place, desistance was facilitated by the motivation of the offender and the formation of social bonds. As such, Farrall (2002) argued that the CJS should develop its provision in line with the findings from desistance research. Furthermore, Farrall (2002) concluded that the intervention by the order may only be important by providing positive encouragement that would help maintain motivation. According to Farrall and Calverley (2006, p.19) "having the motivation to avoid further offending is perhaps one of

the key factors in explaining desistance". In short, then, it is contended that "constructions of practice should be embedded in understandings of desistance" (McNeill, 2006, p.46).

The current government's green paper on the punishment, rehabilitation and sentencing of offenders suggests that there is a strong economic case for continued investment in rehabilitation, in addition to now using an evidence-base developed on desistance research in order to better understand "how and why people stop offending and the role of practitioners in supporting this process" (Ministry of Justice, 2010, p.2). In terms of drug-using offenders, the government's drugs strategy (Home Office, 2010) notes the concept of recovery capital. In recent years the drug treatment field has been increasingly referring to the idea of recovery. As such, drug treatment agencies and the practitioners who work within these services have been gradually driven towards recovery-focused practice (Best and Laudet, 2011). The key elements of the recovery capital are to provide emotional and practical support which is paramount to drug-using offenders if any process of change is to be adopted. The drugs strategy outlines the following type of resources needed for change: increased social capital, peer and family support and commitment towards these relationships; increased physical capital, income and stable accommodation; increased human capital, skills, mental and physical health, employment; and increased cultural capital, values, beliefs and attitudes.

On the face of it, then, this new model appears to fit well with the theories around desistance from crime. For example, desistance from crime is a process that can be achieved by practical and emotional support from significant others and treatment services. Desistance also requires the involvement and cooperation of the offender as well as access to (opportunities for example, stable accommodation, training, education and employment) as these will arguably prevent further offending (McNeil and Weaver, 2010). Nevertheless, treatment agencies and workers are confused as to what the concept of the recovery capital means in practice and therefore what changes need to be made. Further, Best and Laudet (2011, p.2) note that "There is an increasing awareness that people do recover, but we have limited knowledge or science of what enables recovery or at what point in the [process] recovery is sparked and made sustainable". Moreover, this is a relatively new concept for the CJS and drug treatment as a whole and up to date little research has been conducted on

its effectiveness in these settings. As such, making the links now between desistance research and rehabilitation in criminal justice practice seems to be even pressing.

1.5 Summary

This review has discussed the links between drug-use and crime, desistance from crime, and some of the issues concerned with the rehabilitation of problematic drug-users. Desistance from crime has been identified as a process which involves changes within the individual and engagement with pro-social others and social institutions. These aggregates, if the individual is motivated, will arguably lead to the cessation of drug-use and offending. This process involves attachments to social bonds, institutions and networks, in addition to psychological development and maturation. It could be argued that attachments to informal social controls such as families, marriage, being a parent are turning points. Conversely, changes such as the offender gaining employment or entering education are equally important as this leads to conformity, and the development of a pro-social identity and agency, which overrides the interest and need to offend. It is apparent from the literature that problematic drug-use influences patterns of offending. Furthermore, drug-use and its impact on social bonds, in addition to difficulties concerning the ability to make informed decisions, complicate the process of desistance. Therefore, it is fair to suggest the treatment of problematic drug-users should be aimed around these issues. Treatment for this group of offenders has been noted to be effective for some, in that research evidence suggests that offenders sentenced to community treatment may reduce their drug-use and offending behaviour. However, research has also identified that a high proportion of DRR orders in particular are not completed and that some treatment on the DRR is limited. Indeed, the effectiveness of DRR programmes in general is still unknown. Finally, it has been argued that rehabilitation policy is not sufficiently informed by desistance research. It is all of these issues which the current research explores.

1.6 Research aims and questions

The review of the literature around desistance and the rehabilitation of drug-using offenders suggests that there is a disjuncture between rehabilitation programmes and what is known about the desistance process. As such, it may be the case that these programmes (and the DRR programme in particular) are unsuccessful in their rehabilitative goals. Much

of the desistance research has, however, been concerned with community interventions overall, and has not focused specifically on drug-use or the DRR. Therefore, this project aims to (1) explore the role of drugs rehabilitation (DRR) in desistance and (2) further explore the particular disjuncture between drugs rehabilitation and desistance from crime. By accessing the views of those who work with drug-using offenders, and drug-using offenders themselves, this research will address the following research questions:

- What are the factors related to desistance from crime for drug-using offenders?

- To what extent do rehabilitative programmes help drug-using offenders desist from crime?

- Is there a disjuncture between theories of desistance and rehabilitative work with drug-using offenders?

The next section will present explanations for, and justifications of, the methodology and methods used in this research study.

2.0 Research Methodology

The aim of this study is to further the understanding of the factors involved in desistance from crime, the role of drugs rehabilitation (specifically, the DRR) in desistance from crime, and the extent to which desistance research informs these rehabilitative programmes. The focus of the research will be one criminal justice intervention – the DRR - that attempts to rehabilitate drug-using offenders, and will consider that intervention alongside the findings from desistance research. In order to do so, the study will explore the views and experiences of those involved with the management and rehabilitation of drug-using offenders, and drug-using offenders themselves. This will enable an assessment of the practices currently used to deal with this group of offenders and compare these to evidence of what the desistance from crime research suggests that interventions should entail.

This research project employed a qualitative methodology. Qualitative research is an approach that generally "emphasizes words rather than quantification" when collecting and analysing data (Bryman, 2008, p.36). The data collection for this project consisted of a number of semi-structured interviews, and employed a thematic coding approach in order to analyse the data (Gibbs, 2007). Ten members of staff who are working with drug-using offenders undergoing a drug rehabilitation requirement (DRR) (five probation officers, and five drug treatment practitioners), and ten drug-using offenders subject to a DRR, were interviewed.

2.1 The qualitative approach

Qualitative research, above all, pays attention to words rather than numbers "as the unit of analysis" (Denscombe, 1998, p.174). This method works with text and uses various methods for collecting data such as, interviews or observations that produce data, which are then transformed in to transcripts by recording and transcribing (Flick, 2009). This research project is associated with the interpretive epistemological position which is concerned with understanding the meanings behind, and understanding of, experiences (Creswell, 2009). A positivist epistemology is concerned with what is, or should be, regarded as acceptable knowledge about the social world and in particular the knowledge about a given discipline (Bryman, 2008), while an interpretive approach offers insights into how an individual, in a

given context, makes sense of a given phenomenon. A positivist epistemology is important as it gives research projects a compatible framework for design and methodology choice. However, an interpretive epistemology is best suited to this study as the phenomenon being studied concerns the experiences, and their subjective understandings, of drugs rehabilitation (Holloway and Wheeler, 2002).

Qualitative and quantitative methods are based on different paradigms (Bryman, 2008). The aims of quantitative research are to discover universally applicable laws "that govern cause and effect" (Bryman, 2008, p.141). This method is concerned with questions about: how much, how many and how often and is deductive in that it tests theory that already exists and examines specific concepts and issues that uncover large-scale social trends. In addition, this approach most often uses random sampling to evade personal biases that may contaminate the results (Bryman, 2008). Despite its advantages, however, quantitative research is still a largely numbers-based approach that may overlook the individuality of participants. According to Schulz, (2003, p.12) this approach "has often been criticised as being dehumanising". Furthermore, it has been criticised as being a one-dimensional approach which is argued to be ineffective in addressing the complex questions which are needed for understanding the social world (Bryman, 2008). In addition, owing to the highly structured process of this method, it may limit flexibility, which may be necessary in the study of the social environment (Schulz, 2003).

A qualitative approach, however, aims to answer questions about why individuals behave in a certain way, how opinions and attitudes are shaped by experience and how individuals are affected by social events that occur around them (Hancock, 1998). The questions asked in this method may entail; Why? How? In what way? This method defines a social phenomenon as it occurs naturally, unlike a quantitative method which may manipulate a situation. Concepts and theories are developed which further understanding of the social world and this is known as an inductive approach. Qualitative data is collected directly from people, often through the use of, for example, one to one interviews (Hancock, 1998; Bryman, 2008).

The qualitative approach is also not without criticism, however. According to Denscombe (1998) the issue of reliability and validity in qualitative research is problematic.

Bell (2005, p.117) points out that: "Reliability is the extent to which a test or procedure produces similar results under constant conditions on all occasions". Further, Bell, (2005, p.117) queries "Would two interviews using the same schedule or procedure get a similar result?", and "Would an interviewer obtain a similar picture using the procedures on different occasions?". Moreover, validity is argued to be the most important criterion of any research and asks "whether an item measures or describes what it is supposed to measure or describe" (Bell, 2005, p.117). Reliability and validity are important criteria for assessing the quality of research. However, according to Bryman (2008, p.33) "Both reliability and […] validity are essentially concerned with the adequacy of measures, which are most obviously a concern in quantitative research". As such, in quantitative research reliability asks the question whether the results from a study can be repeated, and whether the measures formulated for a specific concept are consistent and stable. Further, validity has four main types: measurement, internal, external and ecological validity "and is concerned with the integrity of the conclusions that are generated from a piece of [quantitative] research" (Bryman, 2008, 32).[10]

Instead, Bryman (2008, p.377) cites the work of Guba and Lincoln (1994) who suggest that "trustworthiness", as a concept, is a way of "establishing an assessing the quality of qualitative research". That is, the aim of trustworthiness in qualitative research is to support the argument that the study's findings are "worth paying attention to" (Lincoln and Guba, 1985, cited in Lincoln, 1985, p.290). As such, this concept provides an alternative to the issue of reliability and validity. Four issues of trustworthiness in qualitative research are key and mirror those concerning validity: (1) Credibility: are the findings believable? (2) Transferability: can the findings be applied to other contexts? (3) Dependability: will the

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[10] Another limitation of the qualitative approach is that of generalisation: "It is often suggested that the scope of the findings of qualitative investigations is restricted" (Bryman, 2008, p.391). Denscombe (1998) warns that researchers analysing qualitative data may oversimplify the results in order to identify themes and develop generalisations. The researcher may feel pressured to minimise or disregard data that may not fit into the issues being discussed. Inconsistencies may be frustrating for a researcher when they impede a clear generalisation; however, they are a feature of the complexities of the social world. Bryman (2008) points out that even if generalisations can be sought from qualitative research, it may be difficult or even impossible to establish how far the findings from small-scale studies can be then generalised to other similar social settings. Denscombe (1998) further suggests that even though it may be possible to gauge how far the findings relate to other instances, such generalisability may be better achieved using a well conducted quantitative study. Nonetheless, according to Myers (2000, p.1) "qualitative studies are not generalizable in the traditional sense of the word, nor do they claim to be, that they have other redeeming features which makes them highly valuable".

findings apply at other times? (4) Confirmability: has the researcher ensured that his/ her personal values or theoretical inclinations do not influence the results? (Bryman, 2008). These criteria were applied to the current research. For example, the supervision team for the thesis frequently assessed the thematic analysis and interpretation to ensure that the findings were credible and that the analysis was objective and clear.

2.2 Methods of data collection

The current study collected data through semi-structured interviews. May (2001, p.120) argues that interviews can produce rich insights into people's "biographies, experiences, opinions, values, aspirations, attitudes and feelings". Interviews draw on the ability to conduct a conversation which is a skill the researcher already has (Denscombe, 1998). However, interviews are more than just a conversation; according to Robson (1993, p.228) the interview is "a conversation with a purpose". Interviews encourage individuals to talk for long periods and in-depth about the given topic. Further, research similar to the current study requires the use of interviews (as opposed to, say, quantitative questionnaires) because in-depth data and what Denscombe (1998, p.175) calls "privileged information" are required. Probation offender managers, DRR practitioners and those drug-using offenders interviewed in this study "[provided] information others could not" (Denscombe, 1998, p.175).

A list of topics and open-ended questions (see appendix A) were used in the interviews in order to enable a detailed discussion of the issues and as natural a conversation as possible (Bryman, 2008). The order and wording of some of the questions were changed (at the interviewer's discretion) depending on the direction of the interview (Gray, 2004). In addition, the type of interview allowed the author to probe for views, opinions and experiences from the interviewee and to explore "new paths which were not initially considered" (Gray, 2004, p.217).

2.3 Recruitment and sampling

In order to gain access to probation organisations, the author contacted the local agencies with a written proposal of the research (see appendix B). Probation agencies were contacted also for access to the DRR teams also. Following on from the agencies' responses, preliminary meetings were arranged with managers from both the probation service and

the DRR team in order that "some agreement could be obtained from all parties involved in the research" (Denscombe, 1998, p.175). For example, as the research included interviewing vulnerable adults, it was a requirement for the agencies involved to ensure the researcher had sufficient and up-todate criminal record checks. Further, an agreement was reached with regards to the start and end dates of the interviews, how long each interview would last, suitable rooms for the interviews to be held and the size of the participant sample. After the initial meetings, permission for the study was granted, however, this was dependent upon ethical approval from the National Offender Management Service (NOMS)). This process requires that every researcher completes a NOMS ethical approval form, (see appendix C, and available from the author if required) which is then approved, and sent for further approval to individual probation agencies for a decision. As the probation and drug treatment agencies had already informally agreed to the research, NOMS approval was expected and subsequently granted. Ethical approval was also granted from the University of Huddersfield

After final consent was granted, the study employed a purposive and opportunistic sampling technique in order to gain access to potential participants. Purposive sampling uses the "knowledge and attributes of the researcher to identify a sample" (Jupp, 2006, p.123). As such, the participants were handpicked in order to produce the most valuable data, as they hold particular qualities relevant to the current study (their direct work with drug-using offenders). This approach is a non-probability sampling technique which "does not allow the researcher to generalize to a population" (Bryman, 2008, p.415) but which allows for very specific participants to be sampled. The staff sub-sample included five probation workers (involved in the management of the offenders' court order) and five DRR workers (involved in the drug treatment of the offenders). Where it was required, the workers were also sampled opportunistically (which consists of taking the sample from people who are available at the time of the study) based on the purposive sampling criteria above. While it is recognised that opportunistic sampling may lead to potential biases in the sample, the study faced considerable constraints with regards to time and therefore opportunistic sampling was appropriate in this instance (Bryman, 2008). Indeed, combined with purposive sampling, it was felt to be a robust strategy.

The recruitment of service users also employed purposive (all of the participants were undergoing a DRR at the time of the interview and were subject to a probation order) and opportunistic sampling where the workers identified offenders from their caseloads who met those criteria. All of the workers were sent an information sheet explaining the purpose of the study and arrangements were made as to when and where the interview would take place. When the service users were selected, they were contacted by telephone or through their workers to arrange a time, date and suitable venue for the interview. The service users were also given an information sheets and all of the participants signed a consent form (see appendices).

In all, five members of probation staff, five members of DRR staff, and 10 of their clients, took part in the semi-structured interviews for the research.

2.4 Data and analysis

All of the interviews were recorded and transcribed verbatim (transcripts are available from the author if required). A thematic analysis approach was used to analyse the data which is argued to offer "an accessible and theoretically-flexible approach" when analysing qualitative data (Braun and Clarke, 2006, p.80). Thematic analysis is a combination of methods which are constructionist, realist or essentialist and, therefore, useful to the researcher in understanding the reality and experiences of the participants. This method enabled the organisation and identification of themes within the data, in rich detail. Braun and Clarke (2006, p.81) note that "a theme captures something important about the data in relation to the research question, and represents some level of patterned response or meaning within the data set". The researcher started by analysing and coding the data from the interview transcripts, and this was done as soon as possible after each interview.

The coding consisted of units of specific words and the occurrence of "ideas or events" (Denscombe, 1998, p.211) which reveal the meanings behind the data, what the data represents, relevant issues, and what the issues mean. This stage of coding is known as "open coding" and enables the researcher to discover "name and categorise phenomena" (Denscombe, 1998, p.211). After this initial stage, the researcher revisited the transcripts a number of times, and each time comments and reflections were added alongside the data. The process of coding allowed for the identification of "patterns and processes,

commonalities and differences" (Miles and Huberman, 1994, p.9). Consequently, themes emerged from the units and categories. A summary chart was then created for each individual interview which formed a number of sub-themes and four main themes; social bonds, identity transformation, motivation, and interventions. Each one of these themes was explored and the researcher aimed to discover how they relate to each other and the literature.

2.5 Ethical considerations

Ethical issues arise when conducting any sort of research. As such, the study followed the ethical guidelines proscribed by the British Society of Criminology (BSC) to ensure that the research was ethical. According to the BSC the "general principle is that researchers should ensure that research is undertaken to the highest possible methodological standard and the highest quality in order that maximum possible knowledge and benefits accrue to society" (BSC, 2006, p.1). The researcher equally understands there is a responsibility on his part for the physical, social and psychological well-being of the participant (BSC, 2006). The research plans were reviewed and confirmed by the School Research Ethics Panel (SREP) at the University of Huddersfield (see appendix C). This process also included a Risk Analysis and Management Form (see appendix D), in addition to the NOMS ethical approval mentioned above.

The researcher explained to all participants the purpose for conducting the research and what the study was about, its aims, and how any research findings were to be disseminated (BSC, 2006). The researcher informed participants that they may refuse to participate or withdraw at any time. The participants were informed that their confidentiality would be protected and that they would remain anonymous throughout, with no personal information shared. As part of the NOMS requirements, a separate confidentiality statement was required (see appendix E). The participants were offered the opportunity to view the final report and/or to meet to discuss the findings. The researcher also explained to the participants that the audio-recording would only be handled by the research team (researcher and supervisors) and after the research had completed, it would be destroyed (BSC, 2006). The protection of confidentially is in line with the Data Protection Act 1998 which sets out confidentiality in its legislation, of relevance here in relation to

interviews. In addition, the researcher offered the participants an informed consent form to sign, and a debrief form (see appendix F and G) thanking them, and offering contact details in case of any issues that may arise (BSC, 2006; Bryman, 2008).

The next section of the report discusses the findings from the interviews and relates them to the literature review in section 1.0.

3.0 Findings and Discussion

All of the service users in the study were considered problematic drug-users and over half (six out of ten) of the service users had been on a DRR previously. All of the service users reported that their offending behaviour had started a long time before their PDU. Eight of the service users reported that their offending started around the age of 13, while two reported that they started to offend towards the end of their teenage years. All of the service users were required to complete a nine-month DRR and a 12-month supervision order and had been on the current order for five months or less. The service users were all over the age of 25. In terms of gender, while not central to the current study, eight of the service users were male and two were female. Ten practitioners were also interviewed (eight female and two male). Nearly all had worked in drug rehabilitation and probation for between five and 12 years (one had worked in the field for only four months).

The findings from the 20 interviews in the study reveal that all of the participants (that is, the service users and the practitioners) are in agreement that interventions for drug misusing offenders are important. Further, the participants all stated that problematic drug-users involved in offending behaviour will undoubtedly use the proceeds from crime to support their drug-use or related addiction. Appropriate accommodation and the ability to afford to live and meet their basic needs were noted by all of the service users as being critical to starting the journey of desistance. The need to address the more basic needs of offenders, and the links between drug-use and crime, are well grounded in research (Gossop et al., 2000; 2005; Hammersley et al., 1989; Healy and O'Donnell, 2008; NcNeill, 2009; Parker et al., 2009), and are supported by the participants in this study. Therefore, it will not be the remit of this thesis to discuss these issues further. Rather, the remainder of this section will discuss the other (arguably, more complex) aspects of desistance which were cited in the research. They are: the importance of social bonds; identity change; motivation; the worker-client relationship; and the nature of interventions.

3.1 Social bonds

The literature points to the significance of attachments to pro-social sources of informal social control (social bonds) in desistance, for example, pro-social friends and partners,

employers, educational institutions, and other pro-social members of the community (Best et al., 2008; Farrall, 2002; Farrall et al., 2010; Frisher and Beckett, 2006; Laub and Sampson, 2001; Maruna, 2001). However, it is also known that those individuals immersed in PDU and offending are affected, in many ways, by the lifestyle associated with these behaviours (Sampson and Laub, 2003; Shroeder et al., 2007) As such, problematic drug-users will experience a host of complications which affect their desistance from crime. The data in the current study largely corroborate these issues in the literature.

The breakdown of pro-social bonds was a common theme among all of the service users, offender managers and drug treatment practitioners' data. For example, one worker remarked:

> Their drug-use or crimes may have led to broken family and peers ties […] they will have missed out on basic education and employment opportunities, basically their [behaviour] has detached them from their communities and society (Drug Treatment Practitioner Two).[11]

The statement above reflects the overall view from those working with the service users in this study. The breakdown of social bonds, such as the disengagement from family and other positive relationships, in addition substantial periods of unemployment was also noted by all the service users. One said: *"I had a great job, a nice car, nice girlfriend, I bought a house […] that broke down really quickly once I started on the gear* [heroin]*"* (DRR Client Ten). Another noted: *"I haven't had any employment […] because of my heroin habit and being in and out of prison"* (DRR Client Six).

Over half of the service users pointed out that due to being detached from forms of social bonds their routine activities differed to those of conforming individuals. For example, one client said: *"I'd be getting up at 7am in the morning […] grafting [offending and using drugs] everyday, all day long […] the same routine everyday"* (DRR Client One).

The service user views largely correspond with those of their workers, with the majority of the workers highlighting that the drug-using routine activities of their clients

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[11] It is noted here that while the workers in the sample have been identified as those who worked for probation and those who worked for the DRR, there were no intrinsic differences between their perspectives. Rather, they were identified as such in order to preserve the authenticity of the data.

"becomes habitual […] and that's problematic in its own sense" (Drug Treatment Practitioner Three). One of the ways in which the routine activities of the service users in this study become problematic is that of associating with other problematic drug-users. For example, one worker remarked that: *"They have to sort of associate with each other because they're not accepted into normal society"* (Probation Worker One). Another worker stressed that positive outcomes may indeed be related to the disengagement from their existing peer group:

> We see some results when they eventually realise that their so called mates, who they relied for everything, you know, their only support mechanisms as it is when you in that chaotic state, are no longer needed (Probation Worker Three).

The service users stated that contact with similar individuals offers support and a routine with one offender noting: *"When I used to go and score it gave me something to do and people to talk to […] it's lonely when you're sat in your flat all day"* (DRR Client Nine). Another pointed out: *"I associated with different mates […] the people I used to associate with I don't see anymore because of the drugs and [my offending]"* (DRR Client Four). Nevertheless, the majority of service users in the study were very aware of the impact of negative peers and had already made the decision to stay away, as much as possible, from this group. For example, one service user remarked: *I've got no friends […] in the drug-taking world they're just associates and I know they're no go for me so now I just stay on my own"* (DRR Client Eight). Another stated: *"It's just about keeping out the way of people who use drugs and things like that"* (DRR Client Nine).

In addition, just under half of the sample also stressed the significance of deviant partners and the problems that this may have for desisting from crime. For example, one service user said: "*We're both on drugs so it doesn't help […] you just entice each other constantly […] you're never both the same your heads all over the fucking shot* (DRR Client Eight). Another indicated that the only way to support and maintain these relationships was to offend:

We both use and spend all our money on drugs but I wanted to give her

some kind of decent life, so I felt like committing crime was the only way

to sustain it (DRR Client Ten).

Despite the breakdown of pro-social bonds, and the association with other drug-users, rebuilding social bonds was believed to be crucial for this group of service users in their very early stages of desistance. Both sets of participants all noted that forms of social bonding are essential, in terms of what they believe brings about desistance, with one practitioner noting: *"Over time things change or they have a family, you know, they get a job […] those natural things do impact on them"* (Probation Worker One).

Another worker indicated that helping their clients to build their social capital (and social bonds) is indeed important. The worker remarked:

It should be about helping them achieve their own social capital so they

can feel as if they're contributing within their own environment and in

society […] in an ideal world it would be employability, financial security

and secure relationships with their family (Drug Treatment Practitioner

Two).

These participants' views agree with previous literature in this area that suggests that an individual's ability to desist from crime or recover from PDU may be understood in terms of the resources they can draw upon (Laub et al., 1998; Sampson and Laub, 1993). As such, the social bonds mentioned by all the service users in this study appear to be critical for on-going desistance from crime and the cessation of PDU and are associated with the intention to change current behaviours. One service user indicated: *"I want to start going to college and show my family something positive for a change […] if I do things like that maybe they'll see a change in me"* (DRR Client One). Others remarked: *"I'd like a family again and I want to have kids […] and a job I'm getting older I want different things now, you know, work for your money"* (DRR Client Four) and *"I've got a lot of goals now which I've set myself […] it's about getting a job and a house and start to make contact with my kids"* (DRR Client Nine).

However, although just under half of the sample noted that they have had previous employment it was also reported that their employment, for most, terminated some time

ago owing to their drug-use and related offending. One service user noted: *"I haven't always worked; I've only done labouring in the past and things like that"* (DRR Client Seven). Another stated: *"I've not been in employment for four years […] I used to work on the doors at clubs"* (DRR Client Nine).

One service user suggested that they had been trying for a number of years to find appropriate employment, however, because of their educational attainment and previous low-skilled job roles they have found this difficult:

I left school at 13 or 14, you know, and when I left school I got a job in a shoe shop […] I tried for years at the job centre but, you know, because of school and things like that I always ended up working for Savers and places like that (DRR Client One).

The loss of family or other positive relationships due to PDU or offending was mentioned above. The importance of re-establishing these relationships was prevalent in the findings from the interviews with the service users, with the main focus being around that of repairing relationships with children. One service user noted:

I've been drug-free for 10 to 12 months now and not done a single graft because obviously I'm a father now so I've got a daughter to be thinking about. So now I need a house and a job so I can have contact and support her (DRR Client Six).

Building lost ties with parents was also noted by the majority of the service users as being paramount and a motivating factor towards the individual's desistance process. For example, another service user stated:

I've got no relationship with my family […] I haven't been in touch with them since my first prison sentence when I was 15 […] I've recently made contact with my brother but my mum is the main one I want to get back in contact with things are on off right now but we'll get there (DRR Client Eight).

Although a large majority of the service users noted that they wanted to repair bonds with their parents and other family members, for some this was difficult for various reasons. The main reason cited was due to a lack of trust, with one service user remarking:

My family are still at arm's length because they think it will all go pear shaped. I need to work on putting it back together but they've seen me do it once and cock it all up (DRR Client Ten).

In all, these data suggest that the service users and workers believed that attachments to social bonds (education and employment), positive relationships with pro-social peers and family, and starting parenthood or repairing bonds with families and children, are central to the process of desistance. The next part of this section explores the importance of identity change for desistance.

3.2 Identity change

The literature indicates that changing identity (for example, from that of an 'offender' to a 'non-offender') is central to the process of desistance (Giordano et al., 2002; Maruna, 2001; McNeill, 2009). The findings from the current study agree with previous literature. The service users in this study viewed their identities as being spoiled by their previous PDU and offending and this was highlighted in their perceptions of wanting a 'normal life' and the stigma attached with being a PDU (Goffman, 1968; Mcintosh and Mckeganey, 2001). The idea of spoiled identity, for the purpose of this study, relates not only to the experience of stigma, but also to the process of internalising the negatives labels. For example, one service user indicated: *"I had a reputation around my area as being known as a drug-user, so nobody would want to come near me or be friends with me"* (DRR Client Nine). Another remarked: *"People who don't use heroin look down on it, don't they? There's that stigma attached to it without a doubt and certainly a lot of people backed off"* (DRR Client Ten).

Generally, the service users were confident that their previous identities could be amended; however, the majority of them were also concerned about the perceptions of others and highlighted that these negative labels were internalised and had become part of the individuals' identities. For example, one service user said: *"I find it more difficult to hide […] I don't hide it anymore I just say, yes, I'm this person now, can I borrow some money"* (DRR Client Five). This was also expressed by the service users stating they want a 'normal

life', with one indicating: *"I Just want a life like before, a proper stable life, you know a normal one […] getting up every day and doing normal things like college or work"* (DRR Client Five).

The literature suggests that individuals who are not engaged in meaningful activities such as employment or education will lose their conventional role within society, will have a daily structure which differs to other members of society, and will therefore be deprived of any meaning in their lives (Liebling and Maruna, 2006). The service users' experiences in this study corroborate the literature. For example, one client remarked:

> I knew I was going to lose my job [because of PDU and offending] and when I did lose it I felt like things couldn't get any worse, I just felt like bollocks to it, I'll get off my head (DRR Client Ten).

The literature also indicates that there are two ways in which individuals whose identity has been spoiled come to realise this (McIntosh and McKeganey, 2001), and this is something the perceptions from the service users in this study corroborate. First, there are meaningful reasons to desist from crime and the majority of the service users cited that their reasons were those relating to attachments to forms of informal social controls and positive social bonds with their family and children. For example, one service user remarked:

> At the end of the day I do want to quit. I've been doing this for 17 years, in and out of jail, I've got things I want to do now […] I want to get back into work and my own home […] I want my kids at home too (DRR Client Eight).

Second, there were statements from both sets of participants which pointed to the recognition of a rock bottom experience. As such, when the feeling of hitting rock bottom emerges, the service users in this study realise they have no choice or resources left, therefore, terminating their offending and PDU is the only option. The service users' views in this study agree with the literature around this idea, with some indicating: *"I suppose I've been there and done it, I'm fed up of it, I lost absolutely everything right up to sleeping in sheds and that"* (DRR Client Seven).

[Because of the drugs and offending] I just didn't want to be here anymore […] I tried killing myself on numerous occasions […] I could see it was scaring [my mum] and it wasn't good for me […] and I thought I need to do something about this (DRR Client Nine).

This rock bottom experience was also noted by some of the workers, who stated: *"I think that they get to a point where they've had enough some hitting rock bottom and they're the ones who are ready to change* (Drug Treatment Practitioner Four). Another remarked:

The way I work is; why would you catch someone a couple of inches from rock bottom? If it takes rock bottom for someone to change why catch someone two inches above and keep them hovering" (Drug Treatment Practitioner Two).

Themes also emerged which corroborate the literature in this area relating to identity, and the concepts of giving something back, generativity and agency (Farrall et al., 2011; Healy and O'Donnell, 2008; Maruna, 2001). These cognitive changes in identity or attitude can be seen in the service users' data and are reflected in the offenders' motivations, greater concern for others, and the desire for a more positive future. For example, the majority of service users whose plans were to eventually return to employment wanted to do so by assisting others in the arena of the drug and alcohol treatment sector: *"I'm hoping to go to college, you know, do counselling or something like that […] I'm looking to do a big change, even if that means leaving my partner"* (DRR Client Eight). Another remarked: *"I want to do that peer mentoring course and then go from there […] with what I know I wouldn't mind been a drug worker"* (DRR Client One).

The data above – from both sets of participants – indicates that there appears to be a need for substance misuse workers and offender managers to address the issue of identity within traditional treatment modalities, alongside the forms of practical support such as providing opportunities for repairing family relationships, education and employment or addressing basic needs.

3.3 Motivation and change

A number of the respondents in the current sample emphasised the importance of the service users' own role in their change process whilst on the DRR. There is considerable research to suggest that an individual's own motivation to change and to avoid further offending is key to the desistance process (Farrall and Calverley, 2006; Maruna, 2010). Furthermore, the majority of service users in this study expressed a level of self-efficacy that enabled them to be confident in their ability to desist from crime, with themes emerging around the impact of family, employment status, and acknowledgment of what may be lost, will power (motivation to succeed) and faith in their own determination. One service user stated:

> I've put too much work in to go back there […] I'll take as much as the
> order throws at me so I can achieve my goals, it's that will power again and
> I'd lose everything this time [family] (DRR Client Four).

The quote above suggest that a motivating factor for continued desistance is the mindfulness of what has previously been lost, such as the breakdown of social bonds, as mentioned earlier, or what the desisting offenders could lose if they returned to PDU and crime (renewed social bonds).

Another service user agreed that social bonds are indeed a motivating factor towards his desistance process; however, he also indicated that the order itself may have also been a motivating factor to change his offending behaviour:

> Since getting this order I'm not offending […] it's like anything isn't it, if
> you don't believe in things then nothing's going to happen. If you want
> something then just go out and get it […] I just want kids, to have a house
> and a job again […] at the end of the day I'm determined to turn my life
> around (DRR Client Two).

The motivation to change at the start of the order was also expressed by other service users, and these statements corroborate the literature in this area which suggests that legal intervention may increase the readiness for change. For example, one service user

stated: *"I'm already focused; I know what I want to do [...] it's just about will power really and wanting it for yourself and your future"* (DRR Client Nine). Others indicated:

> I haven't been on the order that long but I think it can lead you up the
> right path; it's only you that stops it though and I'm ready [...] I'm hoping it
> can help me achieve those goals yeah (DRR Client One).

The literature suggests that offenders' ability to predict their own future and their level of optimism may impact on their successes (Burnett and Maruna, 2004; Healy and O'Donnell, 2008) and the data collected in the current study largely corroborate these findings. Some of the practitioners in this study noted that the kind of social bonds mentioned above are important as it gives individuals hope and confidence which then facilitates motivation and the change process offenders go through. For example one worker remarked:

> It should be about breaking down those fears [...] it's got to be what the
> [service user] wants; family, education, training and employment (ETE) all
> of that help people to, you know, be empowered and feel they've got
> some hope and confidence, and that's huge (Probation Worker Four).

Another worker indicated that while he agreed that social bonds will give offenders hope they needed to do more in terms of providing their service users with the opportunities to act upon.

> We've got to kind of make those links stronger [family and ETE], and also
> say to them as part of your journey it's not just the DRR, it's about training
> which could potentially lead to this job or potentially this certificate, again
> it's giving that hope isn't it (Probation Worker Three).

Arguably, providing offenders with a sense of hope, or the maintenance of hope, which the majority of the service users in this study already possess, will indeed help to sustain their motivation for change. Over half of the practitioners in the current study also emphasised the importance of the service users' own role in their change process whilst on the DRR, and note that internal motivation is paramount if any change is to occur: *"I think for those who aren't motivated [to change] we're going to struggle [...] some offenders have*

very little motivation and I don't think you're going to change them" (Probation Worker Three).

Others however indicated that not all of the service users who they come into contact with have the motivation to change, and that the interventions delivered as part of the order will be unsuccessful because of this. For example, one staff member suggested:

It all depends where the individual is […] I think all the work we're doing will be effective because of his motivation […] with my other client […] he's not in the right place now, no matter how much work we do as an organisation it's not going to be effective for him (Probation Worker Two).

In all, these findings indicate that generating or maintaining motivation for service users is vital in desistance. To this end, the next section examines the worker-client relationship and its importance in the process of desistance.

3.4 The worker-client relationship

The literature suggests that having a good relationship between the offender and his/ her practitioner may act as a catalyst for change, and that this may lead to positive outcomes especially when the offender is already motivated and has made the decision to terminate his or her offending (Healy, 2010; Rex, 1999; Shapland et al., 2012.) These issues were also identified in the current study. In addition, those workers who helped their clients around the more practical problems they faced (for example, securing accommodation) also helped to maintain their clients' motivation to change. The service users in the current study receiving this kind of practical support valued the intervention and input from their workers. For example, one service user noted: *"It's nice to have someone to talk to that's actually taking a bit of interest; trying to help you […] they try to give you advice and that but it's the stuff about my flat and getting into [ETE] that's helping"* (DRR Client Eight).

Other service users however remarked that they have too many workers and this may hinder their progress: *"what worker, I've got too many. I've got ones for different things; probation workers, drug workers and key workers it does your head in sometimes"* (DRR Client Seven). Another indicated that while they have different workers, having a consistent relationship will go some way to enable them to open up:

I've had different workers in the past, some now who I can't get on with. Mainly I just tell my [drug worker] what I've been doing and that's it, sometimes you don't even have those one-to-ones. I tell my probation worker everything because he's been there from the start (DRR Client Nine).

The consistency needed if successful outcomes are to be achieved, as suggested in the literature (Healy, 2010; McNeill, 2009; McSweeney et al., 2008), was also indicated in some of the practitioners' data, with one worker indicating that:

I think having a consistent [worker] helps, people like to see the same person and they'll build up a relationship with you if you just do the basics […] you can support and empower them to make their own decisions (Probation Worker Two).

Another remarked that having continuity between the worker and client does indeed achieve positive outcomes; however, sometimes this consistency is difficult to achieve:

I suppose it's having a specific worker who they see all the time but sometimes that doesn't happen […] having that continuity is good […] and the one-to-one stuff achieves positive outcomes […] it's an opportunity to build their self-esteem and make them realise they can achieve their goals (Drug Treatment Practitioner Five).

Overall, the data above suggest that desistance is more likely to be facilitated when a consistent working alliance between the offender and practitioner is achieved. This relationship is associated with motivation and the (re)establishment of social bonds. The final part of the findings section explores the nature of community interventions and how they facilitate (or indeed hinder) the process of desistance.

3.5 Drug treatment interventions

All of the participants indicated that opportunities to improve education and employment, in addition to the formation of social bonds, are fundamental motivating factors for change which could lead to desistance, consequently triggering the formation of a new pro-social identity. Nevertheless, the literature suggests that criminal justice interventions often

concentrate on other issues (Farrall, 2002; Farrall and Calverley, 2006; McSweeney et al., 2008; Weaver and McNeill, 2007). The data collected in this study largely corroborate the arguments from the literature and this can be seen in the frustrations by over half of the practitioners and their views on the type of one-size-fits-all approaches and the pre-designed interventions used within the remit of the DRR. For example, one worker remarked:

> You know for example, if we get a chap with a drug problem that can't read and write, I think he should get taught to read and write it should become part of that order. You know, it should be tailored to that individual. It's a massive frustration when somebody comes to me on an 18 month order but we're not addressing the fundamental problems. It's frustrating because where do you go with that person? You'll go through the order, but in terms of the issues that person faces, you haven't tackled them (Probation Worker Three).

The literature suggests that the use of opioid substitution treatment (OST), such as, methadone and buprenorphine helps to stabilise problematic drug-users, whilst reducing their cravings, in addition to reducing an individual's involvement in offending behaviour (Gossop et al., 2005; NTA, 2012c). These assertions, with regards to the use of OST, mirror the views of both set of participants in this study. For example, all of the practitioners noted that OST is an important intervention which is needed, and also benefits the service users in terms of enabling them to focus on other issues: *"You get somebody on [OST] you stabilise them, then you work on the other aspect of their behaviour"* (Probation Worker One).

> By the time [service users] come to us they're usually chaotic so they've embarked upon a lifestyle of problematic drug-use […] and once that drug-use has become problematic it generally leads to offending, that's where methadone comes in (Drug Treatment Practitioner Three).

Another practitioner indicated that problematic drug-users will indeed benefit from being coerced onto an order as this will provide a fast track method to being prescribed OST, in addition to stabilising them which will enable effective interventions:

That's where coerced treatment works. People will be trying to access a script and especially these days might have to wait a long time. Once we get them in and stable on a script, us as offender managers can identify with them the things which cause them to use drugs and offend (Probation Worker Two).

Equally, the offenders stated that: *"I'm not even doing gear every day now, I was, but now I've started on a script and settling on it"* (DRR Client Eight).

I mean being back on a script, that's probably the biggest aspect, the biggest life saver for me. Having [methadone] at the chemist everyday means that you can get through days without having use or go grafting (DRR Client Ten).

The use of group-work was a particularly strong theme which emerged in the practitioners' data. It was indicated by the practitioners, that alongside strong worker-client relationships, the group-work programs provide a motivating, supportive and challenging environment in which the service users learn new skills, in addition to changing their thinking styles. For example, one worker indicated that: *"In the group-work we try to cognitively change the way people think"* (Probation Worker Four). Another remarked: *"[In groups] you spend a lot of time motivating [offenders] and planting little seeds that are creating discrepancies in their thinking"* (Drug Treatment Practitioner Two).

However, and crucially, the service users in the study had different views about the effectiveness of group-work and its relevance to their desistance from crime. For example, one client indicated: *"I go to the groups, they're alright; they just open your eyes to things though, they don't really help me with the goals we set"* (DRR Client Three).

Another remarked that although group-work is available it may be better suited concentrating on building the human capital of this group of service users as they need to go to a different agency to achieve this:

[I don't attend all the group-work] I go to another agency for that, you know, to improve my computer literacy skills […] and to improve my CV.

That works better for me than the other things they do here (DRR Client

Nine).

The majority of the practitioners' data in the current study suggests that a variety of other interventions (aimed at addressing the internal mindsets of service users, and offer solutions for individual challenges) such as, Cognitive Behavioural Therapy (CBT), and the other forms of Psychosocial Interventions (PSI)[12] used in the substance misuse field are effective in increasing individual motivation. For example, one of the workers, when asked the question: "What do your current interventions aim to achieve?" remarked that: *"I'd hope the supervision sessions come across as in we're motivating people, you know, by using CBT and other techniques"* (Probation Worker Four). Another noted:

Everything we do aims to keep people motivated, it's about using CBT [and

other PSI techniques], being real with people and giving them facts

because a lot of people skirt around the truth (Drug Treatment Practitioner

Five).

Another practitioner indicated that these types of intervention are also effective at challenging ambivalence, something that the service users may face at the start of an order, and changing the way their clients think will be an effective way of doing so:

I suppose at the beginning if they're not motivated to change it's sort of

trying to look at different ways of maybe changing them, showing them

what the benefits would be for them if they did change. By using the [one-

to-one] PSI stuff and dipping in and out of CBT is a way of helping them to

change and become motivated (Drug Treatment Practitioner Five).

However, and again crucially, when the service users were asked questions around what interventions motivate them, and how these can assist in them stopping offending, the answers were quite different from those of the workers with one worker remarking

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[12] Psychosocial Interventions (PSI) are now a standard form of intervention in criminal justice drug treatment, and drug treatment as a whole. PSIs are argued to be effective and complement other approaches such as, substitute medications. PSIs, it is maintained, help the practitioner to engage and motivate individuals by identifying the complexity of their problems, in addition to identifying patterns related to their offending and PDU (NICE, 2007).

that: *"They just help to occupy your time, that's what I think anyway […] there's nothing they can tell you that affects the way you think"* (DRR Client Two).

The service users' perceptions above corroborate the literature which suggests that it is the individual who is the driver of his/ her own change. The service users also indicated that these types of intervention may be ineffective due to their basic needs not being addressed or the lack of family intervention and opportunities for employment:

> You're only going to take the help and listen if you want it. It's only you that can do it, no matter what any of these people say to you […] My problems go further than the stuff I do with [my worker], she's good don't get me wrong, but I've other things that need sorting [housing and benefits] before I can begin to think about moving on (DRR Client Three).

The literature suggests that Motivational Interviewing (MI) can be very successful with offenders and is an effective way of building alliances between practitioners and offenders, in addition to ensuring a degree of retention and positive outcomes. The practitioners' views in this study corroborate these findings. For example, one worker indicated that: *"We'd start with a bit of motivational work to try and get them here […] research does say the longer someone is in treatment it works"* (Drug Treatment Practitioner One). Another remarked: *"Our expectations are for them to attend my appointments […] I think maybe a bit more closer supervision would help […] using MI in one-to-one sessions"* (Probation Worker Two)*.*

On the other hand, some of the literature criticises the reliance of MI within a criminal justice setting and suggests that the excessive use of supervision and surveillance, mentioned above, could be a disadvantage for the individual's progress. A number of participants also indicated that there may indeed be a mitigating factor to want to change, with one worker suggesting:

> I think there is something to be said for the kind of coercion used, this is an order that's going to help you or we're going to send you to prison, and more often than not people are going to say 'oh I'll do the order'. It can

have a negative impact on their kind of willingness to change (Probation Worker Three).

Evidence suggests that the practitioner's competency and performance is the most important factor in achieving positive outcomes in any type of PSI (Brown et al., 2005). However, some practitioners in this study noted: *"I wouldn't say I'm an expert, I've not done any courses on them but a lot of the programme manuals are based on [PSI]"* (Probation Worker Two). Others indicated: *"We are not all trained [in MI] but we all know the principles"* (Probation Worker Four). *"We use MI and CBT techniques. We kind of all do that to a certain extent but we're not all trained in the [different] therapies"* (Drug Treatment Practitioner Five).

Above, then, views on the success of criminal justice interventions, in terms of desistance, suggest that some interventions are more effective than others and that the focus needs to be on working with offenders in terms of what they need for desistance. Indeed, the clients in the sample were much more critical than the practitioners of current interventions in terms of their usefulness in helping to stop offending. The next part of this section discusses all of the findings above in order to answer the research questions of the study and to examine the implications of the findings for literature and policy.

3.6 Discussion

The aim of the current study is to examine the process of rehabilitation and desistance from crime among drug-using offenders. The participants highlighted throughout their interviews that forming informal social bonds assists in the desistance process. In particular, the service users cited the importance of attachments to social bonds (education and employment), positive relationships with pro-social peers and family, starting parenthood, or the prospect of repairing bonds with children, and the attachment to other positive social networks. However, it was also found that problematic drug-users face other issues that may impede their desistance. That is, they may be disadvantaged owing to the breakdown of social bonds, their current situation (for example, accommodation and financial worries), and the loss of identity, or the notion of a spoiled identity, due to their drug-use and offending behaviours. Indeed, the vision of a new pro-social identity appears to be an important factor for the service users in this study, and encouraged by practitioners. As such, the participants

suggest that offenders go through a process of change and that an individual's motivation is an important factor leading to the cessation of both drug-use and crime. The structure of the DRR and the interventions used are arguably designed in a way to enable motivation and to give offenders the confidence to take control of their own lives. However, the extent to which the interventions bring about desistance is questionable, particularly according to the service users in the sample. Furthermore, the clients in this study already held sufficient levels of self-efficacy and most had regained a sense of personal agency, which would enable them to move forward, with the aid from appropriate interventions. Finally, the formation of informal social controls (social bonds) were important in motivating offenders, in addition to giving them hope and willingness for a better lifestyle. These findings will now be discussed in detail.

The literature review discussed Sampson and Laub's studies (1993; 2001; 2003) which stressed the significance of attachments to pro-social sources of informal social control. That is, forming pro-social bonds, such as acquiring a stable partner, family contact, employment, and moving away from criminal friends (Farrall et al., 2010; Shroeder et al., 2007), will all aid in the desistance process. However, Schroeder et al. (2007, p.191) note that "drug-use and its lifestyle concomitants bring together a host of distinctive social dynamics that compromise multiple life domains". As such, the links between drug-use and desistance are arguably more complicated. Indeed, Laub and Sampson (2001) reviewed an abundance of literature on the desistance process and highlighted that the developmental trajectories of drug-using offenders differ to that of other offenders.

The separation from family and other positive relationships due to PDU and crime was a common theme among the service users in the current study, in addition to substantial periods of unemployment and a lack of educational attainment. Therefore, these views corroborate the research from Sampson and Laub (2003) and Schroeder et al. (2007, p.194) who point out that PDU and offending "exerts unique and independent influences on social bonds". Further, PDU is unsuited to individuals wishing to conform to conventional social roles such as, acquiring a partner, entering employment or education, or parenthood. The findings in this study highlight that the drug culture and related offending does indeed have different impacts as stated by Schroeder et al. (2007), and that offenders will lose contact with their once pro-social peers.

Farrall's (2002) study found that one of the key obstacles that offenders in his sample faced, relating to offending and desistance, was concerned with their peer group involvement. However, the service users in this study all stated that they had disengaged from these homogenous groups, therefore suggesting that in the very early stages of reform, they were aware of the impact of negative peers, and had already made the decision to stay away from these individuals. Nevertheless, themes emerged in just under half of the service user sample which pointed to the significance of deviant partners and the problems this may have for desisting from crime (Lacy and Clayton, 1982; Schroeder et al., 2007; Simons et al., 2002). Giordano et al. (2002) considered this issue in their study and also employed the concept differential association, as Warr (1998) did, to challenge Sampson and Laub's explanation of the relationship between marriage and desistance. However, Giordano and colleagues make reference to Simmel's (1950) belief that, in fact, it is difference, not similarity, which may be key to understanding individual change. Giordano et al. (2002, p.1045) maintain that an individual's desistance efforts will be "greatly enhanced" when the behaviours of the partner "represents some level of contrast" to the individuals' "previous orientation and lifestyle".

For this group of service users, informal social controls and in particular (re)forming lost or missed social bonds with the family, entering education or employment appeared to be more important, and a contributing motivating factor towards their desistance from crime, than that of problems with negative peers groups. Therefore, this challenges the work of Schroeder et al. (2007, p.195) who contend that: "Our view is that [PDU] is pervasive in its influence on social network associations which in turn will have a stronger long-term impact on desistance efforts [than that of acquiring positive social bonds]".

Rather, the participants' views agree with Hirschi's (1969) social bond theory which contends that developing attachments to family, employment, education and social networks mark important life events that will ultimately aid in the process of change. These turning points or trigger events will reshape the offender's criminal trajectories and may lead to desistance from crime (Sampson and Laub, 2003). Sampson and Laub's theory of informal social control stresses that offenders must have a strong bond to society and that social bonds provide them with a stake in conformity, consequently giving them a reason to terminate their offending behaviours. As such, Laub et al. (1998, p.225) note that: "As the

investment in social bonds grows, the incentive for avoiding crime increases because more is at stake". Furthermore, the social capital which individuals acquire from positive social bonds and social relations may indeed represent the social and psychological resources that offenders may then draw upon as they progress through their desistance process (Farrall et al., 2011; Sampson and Laub, 2003; Maruna, 2010).

An individual's ability to desist from crime or recover from PDU may indeed be understood in terms of the resources they can draw upon. The types of social bonds mentioned by the service users in this study appear to be critical for on-going desistance from crime and the recovery from PDU, and are associated with the intention to change current behaviours. The views from the majority of participants in the current study corroborate the research findings of Farrall et al. (2010) who point out that those in their sample who wish to desist view education and employment as a way to legally consume material goods, rather than funding their lifestyle by the means of acquisitive crime, and that integration with family, friends and the community is also a necessary objective of doing so.

Nevertheless, the service users in this study and many offenders as a whole face numerous barriers to gaining legitimate employment, for example, due to the lack of qualifications and experience, low self-esteem and problems with their criminal records (Effective Interventions Unit, 2001; Platt, 1995). As such, although over half of the offenders in this study indicated that they had previous employment, they often worked in unskilled roles that provided minimal transferable skills, and their employment, for most, terminated some time ago owing to their drug-use and related offending. Therefore, this study is in agreement with others that highlight the need for joint working between the probation service, drug treatment services, commissioners, employers and employment services which will ultimately help offenders to find work. Moreover, interventions aimed at delivering vocational training and addressing the basic skills of offenders (for example, basic literacy and numeracy), alongside other treatment modalities, has proved to be effective at moving offenders forward and giving them the desired skills employers look for in employees (Appel et al., 2000; Maruna and Farrall, 2004; McIntosh et al., 2008; McNeill, 2009; Platt, 1995). Indeed, the time and support afforded to offenders around both employment and

education should be equal to that offered to others in mainstream society and interventions should be organised to cater for this.

Desistance research (Burnett, 2004; Farrall, 2002, 2006; Farrall et al., 2011; Giordano et al. 2002, 2003; Maruna, 2001), and the emerging literature on identity and PDU (Anderson, 1998; McIntosh and McKeganey, 2001), all highlight several policy implications, suggesting the need for substance misuse workers and offender managers to address the issue of identity within traditional treatment modalities, alongside the forms of practical support (for example, providing opportunities for repairing family relationships, education and employment or addressing basic needs), necessary if individuals are to see change as achievable (Farrall, 2002; Farrall and Calverely, 2006; Farrall et al., 2011; McIntosh and McKeganey, 2001; NcNeill, 2009; Weaver and McNeill, 2010). The breakdown of social bonds experienced by the service users in the current study arguably lead to a loss of identity[13] or as McIntosh and McKeganey, (2001, p.51) suggest a "spoiled identity"[14], which Goffman (1963, p.14) argues is related to the stigma of being a PDU or offender and "the process by which the reaction of others, spoils normal identity". The idea of spoiled identity, for the purpose of this study, relates not only to the experience of stigma but also the process of internalising the negatives labels, which is prevalent in the service users' findings, and which complicates their desistance process. As such, Goffman (1963) describes the stigma expressed by the service users in this study as the experience of moving through life, as a PDU or offender, with an attribute that is deeply discrediting, and that this attribute divides individuals into those who are normal and those who are not, therefore, making those who are not less worthy of their place in society.

For the individuals in this study, living with an identity that has been labelled deviant (though offending and PDU), led them to starting to believe in it themselves, views which corroborate with Liebling and Maruna (2006). It was the case that the breakdown of pro-social bonds, and the move towards homogenous deviant groups and subsequent lifestyle concomitants related to PDU and offending, led to the concept of a spoiled identity (McIntosh and McKeganey, 2001; Schroeder et al., 2007; Weinreich and Saunderson, 2003).

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[13] According to Plumridge and Chetwynd (1999, p.330) identity is difficult to define, however, they suggested that it should be understood as "a reflexive enterprise, in part as a narrative project of the self".

[14] McIntosh and McKeganey (2001, p.51) define a spoiled identity as "the realisation by an individual that he or she exhibits characteristics that are unacceptable to both themselves and to significant others".

Furthermore, the experience of unemployment, as stated by the majority of the service users, arguably strips them of their previous "work identities", therefore, they are unable to locate themselves "within the social world" (Liebling and Maruna, 2006, p.369). Consequently, those lacking these conventional roles will lose sight of a clear time structure which will ultimately deprive them of any meaning in their lives, and a "sense of purpose [or the] feeling of being in control is diminished" (Liebling and Maruna, 2006, p.369, p.370).

The findings from the service users' data in this study also correspond with the literature which suggests that offending, PDU and the effects of a spoiled identity, clouds previous experience and disrupt an individual's emotion which reduces the person's ability to have self-understanding and self-worth. Further, owing to a spoiled identity there is personal emptiness in the individual's life (DrugScope, 2008; Liebling and Maruna, 2006; McIntosh and McKeganey, 2001). When this emptiness comes to be too much, PDU and offending behaviours are turned to, which the individual assumes will overcome the emptiness, consequently this behaviour has now become the most obvious component of their identity.

Many studies in this area come from a symbolic interactionist[15] perspective (Anderson, 1998; Maruna, 2001, McIntosh and McKeganey, 2001). McIntosh and Mckeganey (2001) focused on the role of a spoiled identity in relation to the recovery from PDU, and the significance of focussing on the perspectives of drug-users. These authors conclude that there are two ways in which these individuals view their identity as being spoiled by their drug-use and subsequent offending. Firstly, problematic drug-users wishing to desist will come to the conclusion that there are now meaningful reasons for terminating their PDU and offending. The service users' findings in this study largely agree with this and the reasons most cited were those relating to attachments to forms of informal social controls and positive social bonds with their family and children. The second way, in which offenders come to the recognition of a spoiled identity, as suggested by McIntosh and Mckeganey (2001), is that of a 'rock bottom' experience. As such, when the feeling of hitting

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[15] Jupp (2006, p.221) defines symbolic interactionism as "a theoretical approach which focuses on interactions between individuals as symbolic and linguistic exchanges and as a means of creative action. It views the social world as the product of such interactions".

rock bottom emerges, the individual realises they have no choice or resources left, therefore, terminating their offending and PDU is the only option.

The service users' goals, desires and aspirations in the current study indeed show the development of a pro-social identity. Equally, the clients' views in the current study correspond with Liebling and Maruna's (2006, p.369) assertion that many individuals will have previously had a "normal respectable [life] prior to [their offending]" and will, as such, aspire to previous characteristics, values and beliefs through "a process of idealistic-identification" (Weinreich and Saunderson 2003, p.54). Maruna's (2001, p.87) concept of a "redemption script", and the motivation to "give something back to society" is also evident in some of the service users' data. This suggests that, with the aid of someone who believes in them (for example, their family, worker or employer), offenders can move forward with their lives and aspire towards these generative goals. The 'language of agency' expressed by the service users in this study suggests that, in these very early stages of reform, they are in control of their lives and believe they can "make good" (Maruna, 2001, p.125) because they are equipped with the tools, and skills to steer the next generation from making the same mistakes as they did. This contrasts with the work of Healy and O'Donnell (2008) who found little evidence of agency in their sample. Notwithstanding, those in the current study who did not express an interest in wanting to help others were already engaged in some other kind of employment or were pursing employment in very different fields. The service users here were of a younger age to the others (between 25 and 27 years old), therefore, potentially, agreeing with Healy and O'Donnell's (2008) assertion those generative pursuits, or the concept of giving something back, may occur at an older age. However, generative concerns relating to child rearing or that of being a good parent is evident in the entire participants' data.

Assisting offenders with this emerging identity and hope of volunteering (Maruna, 2001) or working in the treatment field may provide a route into employment, and one which may certainly enable offenders to avoid the barriers in place for other types of employment (Duffy and Baldwin, 2013; Effective Interventions Unit, 2001; Platt, 1995). However, as a long term policy direction this may be unsuccessful and could potentially affect an individual's attitude and motivation. That is, the numbers of employment opportunities in the treatment field are limited so competition is high. Further, the recent

cuts to treatment and criminal justice services means there are now a smaller number of jobs; therefore, this trend could lead to "self-defeating" behaviours (Duffy and Baldwin, 2013, p.9). Consequently, an individual's goals and desire to give something back or care for others should be put to good use in other arenas and further work is needed to distinguish between the lack of ambition of those wanting to work outside the treatment field, and whether it is due to a lack of confidence in working in other fields or any doubts offenders may have to acquire new skills (Duffy and Baldwin, 2013).

There is considerable research to suggest that an individual's own motivation to avoid further offending is key to the desistance process, and those offenders who are sufficiently motivated to change and are optimistic about their future will manage to desist from crime. As such, "those offenders who clearly say they want to stop offending are the most likely to desist" (Maruna, 2010, p.2). This, therefore, highlights the importance of cognitive processes which Farrall et al. (2010) argue are linked to the agency of the offender. Motivation theories emphasise the need for self-efficacy or as Burnett (2004, cited in Maruna and Immarigeon, 2004, p.175) states "a sense of being the cause of things and being self-determined as a motivating drive". As such, high levels of self-efficacy can affect the motivation to complete tasks and overcome obstacles offenders may face in their lives, and those who possess high levels of self-efficacy will persist in their efforts than those with lower levels. Nevertheless, in some cases, crime may be chosen as a way of being in control and the success from such crime can be a motivating factor for persistent offenders to continue as it "provides a sense of personal and occupational competence" (Burnett, 2004, cited in Maruna and Immarigeon, 2004, p.175).

However, Maruna (2001) in his study found that offenders wishing to desist from crime will need to experience some personal achievement or success away from offending (for example, the formation of social bonds or the cessation from PDU) before there is a realisation that these successes outweigh the need to offend. In general, the majority of service users in this study expressed a level of motivation and self-efficacy that enabled them to be confident in their ability to desist from crime, with themes emerging around the impact of social bonds such as, family, employment status, consciousness of what may be lost, and positive thinking processes. These findings agree with Giordano et al. (2002) who state that it is the individual who is the driver of his/her own change and if any change is to

occur s/he needs to be motivated to attend opportunities available to them. If acted upon, then the motivation and these new opportunities may trigger the formation of a new pro-social identity mentioned above.

The majority of practitioners in this study also emphasised the importance of the offenders' own role in their change process whilst on the DRR, and note that internal motivation is paramount if any change is to occur. It was also suggested that the interventions delivered would be unsuccessful in their aim if the service users were *not* motivated to change. The perception from these participants regarding motivation corresponds with the literature and is acknowledged by virtually all the authors writing about desistance. Maguire and Raynor (2006, p.25) for example, point out that "generating and sustaining motivation is vital to the maintenance of processes of change". However, Burnett and Maruna (2004) stress that an individuals' motivation to change will undoubtedly be affected by their social settings as they progress through their individual journey towards change. That is, lapse or re-relapse to PDU consequently leading to old offending behaviours, a breakdown of social bonds, financial and accommodation issues, in addition to associating with negative peers.

A further issue is around individual's ability to predict his/ her own future and the level of optimism which may impact on his/ her successes (Burnett and Maruna, 2004; Healy and O'Donnell, 2008; Maruna, 2001). The views from the practitioners in this study indicate that social bonds and attachments to the informal social controls cited above are important as it gives individuals hope and confidence which then facilitates motivation and a process of change. Maruna (2001) and the research findings from the Liverpool Desistance Study found that all of his offenders expressed a high degree of optimism and control over their lives, Maruna (2001, p.88) suggested this attitude to be a "useful illusion". The role of hope or the "perception of successful agency" (Burnett and Maruna, 2004, p.395) in an individual's desistance process is mentioned in an array of studies and the formation of social bonds or the perceived availability of successful pathways to obtain such bonds is also linked to the motivation of offenders. As such, providing the service users in the current study with a sense of hope, or the maintenance of hope they already possess, will indeed help to sustain their motivation for change.

The statements from the service users in this study challenge McMurran's (2002) assertion, however, that only a minority of offenders are motivated for change at the start of an intervention. They also contrast with the criticisms around the use of coercive treatment (Sutton, 2001; Davidson, 2002) and that it is 'doomed' to fail because the offenders will not possess this internal motivation. Therefore, this study is in agreement with others (Seddon, 2007; Stevens et al., 2006) which suggest legal intervention may indeed increase motivation and the readiness for change. Furthermore, the service users' data in the current study suggest that they already possess an element of hope at the start of their desistance journey and that they already envisage a better lifestyle (Giordano et al., 2002; Healy and O'Donnell, 2008).

Research suggests that having a good relationship between the offender and their practitioner may act as a catalyst for change, and this may indeed lead to positive outcomes when the offender is already motivated and made the decision to terminate their offending (Healy, 2010). Rex (1999) discovered that some of the offenders in her study found criminal justice interventions to be a deterrent; however, for the majority of her sample, receiving help by practitioners to solve those practical problems was more important. Shapland et al. (2012) in their research discovered that offenders' motivation to change was sustained by getting help with those practical problems such as reuniting with family members, opportunities for ETE and housing issues, and the offenders receiving this kind of support valued the intervention and input from their practitioners. The views from the current service users suggest that practitioners who are empathic, show respect, have flexibility in their working practises and listen to the offenders concerns are characteristics of an effective working relationship and one that may indeed trigger or maintain change (McIvor and Barry, 1998; 2000; McNeill, 2009). In addition, research also suggests that offenders who have the same worker, if that worker is present throughout the order, have a higher chance of successful outcomes (Folkard et al., 1966; McSweeney et al., 2008; McNeill, 2009). However, it was indicated by both set of participants in the current study that it is difficult in practice to ensure that clients have the same worker throughout their order.

One of the central arguments in the desistance debate is that criminal justice treatment providers need to move away from "providers of correctional treatment" (that belongs to professional experts)" and be more concerned with being "supporters of

desistance processes (that belong to desisters)" (McNeill, 2009, p.17). An understanding of these processes will enable suitable intervention in which to best support this client group which would, arguably, be more appropriate than offenders adhering to "pre-designed interventions that professionals prescribe for 'types' of offenders" (McNeill, 2009, p.17).

Both sets of participants in this study indicated that OST is an important intervention which is needed, and also benefits the service users in terms of enabling them to focus on other issues. It was also remarked that the service users in the current study will benefit from being coerced onto an order as this will provide a fast track method to being prescribed OST and, hopefully, recovery. These perceptions correspond with the literature which suggests that OST significantly reduces an individual's involvement in offending behaviour (Gossop et al., 2005; Lind et al., 2005; NTA, 2012c), and the growing trend over the years for the use of OST is associated with reduced acquisitive crime in the community (Moffatt et al., 2005). After the initial stage of engagement and stabilisation, offenders will then be able to move through treatment, with forethoughts of gradually reducing from OST, when interventions "designed to build [offenders] motivation should be utilised" (NTA, 2012c, p.15).

The practitioners in the current study all stated that group-work plays an important role in the interventions delivered by the DRR, views which corroborate the literature. That is, working collaboratively with a practitioner, the programs aim to provide a motivating, supportive and challenging environment in which offenders learn new skills (Ministry of Justice, 2011; NTA, 2012b). Group-work, as well as one-to-one supervision, focuses upon providing insights into the nature of drug abuse, addiction and crime, raising awareness about the impact of drugs and crime, recognising and managing the triggers that lead to drug-use, developing alternative skills and strategies, and developing support networks, daily routines and a life structure to reduce the risk of relapse (Kirby et al., 2011; McSweeney et al., 2008; Ministry of Justice, 2011; NTA, 2012b).

However, the service users in the study challenge the views from their practitioners, and it became apparent from the findings that the type of group-work delivered had little relevance to their desistance from crime. The service users' perceptions around group-work agree with those from other studies in this area, identified in the literature review (Farrall,

2002; Hollingworth, 2008; McSweeney et al., 2008; Ministry of Justice; 2011). Rather, the service users cited the need address other issues for desistance, for example, the individual's wider social and environment factors (Burnett et al., 2007). Indeed, as already mentioned, evidence suggests (Healy, 2010; McNeill, 2009; Rex, 1999) that the relationship between worker and client is an integral part of a person's desistance and recovery process, and those workers who are willing to assist, caring and go the extra mile are valued more than the generic programmes available, and provide a relationship which cannot be achieved through group-work (Healy, 2010; McNeill, 2009; Weaver and McNeill, 2011).

Nevertheless, there is strong evidence that modern CJS interventions are effective in reducing drug related offending, in particular, those which subscribe to a cognitive-behavioural approach (Giordano et al., 2002; Maguire, 2008; Maguire and Raynor, 2006; McNeill, 2009; National Treatment Agency (NTA), 2010), and the other forms of PSI used in the substance misuse field (NTA, 2010). As such, programmes which focus on addressing individual deficits (Mcsweeney et al., 2008), and psychosocial dysfunction, which the NTA (2010) note, is the lack of development of the psychosocial self, that often occur alongside other dysfunctions (such as, those cognitive in nature) are viewed to assist desistance by facilitating the internal mindsets of offenders, and offer solutions for individual challenges in interacting with an element of the social environment.

CBT, an intervention which falls under the CBA, aims to help offenders to see a more positive future associated with a life free from offending behaviours, whilst increasing individual motivation, and addressing their thinking skills to achieve this (Maguire and Raynor, 2006). Consequently, helping offenders to "acquire new capacities for thinking about and solving their problems, particularly in the interpersonal domain" (McGuire 2008, p.2589). The majority of practitioners' views in this study correspond with the literature and they indicated that they often use CBT, and that as an intervention it is effective with regards to motivating offenders and challenging ambivalence. The findings from the practitioners' data also suggested that other forms of PSI for example, MI, is effective in facilitating and the maintenance of motivation throughout the DRR.

Ashton (2005b) considered if MI (Prochaska and DiClemente, 1986; Miller and Rollnick, 1991) could indeed be used in programmes such as the DRR and if the techniques

used may promote engagement, motivation and be continually used throughout the programme and beyond to facilitate the desistance process. Ashton (2005b, p.29) notes that, within the literature, MI can indeed be effective. However, it is the techniques (the principles of MI) that appear to work the best and not those based on "rigid agendas and manuals". Research suggests (Harper and Hardy, 2000; McMurran, 2004) that as an intervention MI can be very successful with offenders and is an effective way of building alliances between practitioners and offenders, in addition to ensuring a degree of retention and positive outcomes.

On the other hand, when the service users in the current study were asked questions around what interventions motivate them, and how these can assist in them stopping offending, the answers were again somewhat different from those of the practitioners. The service users' perceptions corroborate the literature which suggests that it is the individual who is the driver of their own change, and the importance of focusing on the service user's own role in their change process. Additionally, the participants indicated that these types of intervention may be ineffective due to their basic needs not being addressed, or the lack of family intervention and opportunities for employment. Ashton (2005a) points out that within a criminal justice setting there is an excessive use of supervision and surveillance, which he feels could be a disadvantage for offender's progress. That is, although the use of MI and arguably other forms of PSI in the early stages of treatment, coupled with the pressure of legal coercion (Seddon, 2007), may indeed increase motivation, treatment entry and short term retention (Turnbull et al., 2000; Harrison, 2001), it has little impact on long term outcomes. As such, offenders' motivation for treatment "because of a perception that engaging with it will serve as a mitigating factor in sentencing" (Kirby et al., 2011, p.29; Stevens et al., 2006) is different to their motivation for change (McNeill, 2009; McSweeney and Hough, 2005; Seddon, 2007).

Rollnick and Miller (1995, p.325) distinguish between the approach of MI; "the spirit of motivational interviewing" and certain techniques which have been recommended to "manifest that spirit". As such, these authors argue that practitioners may become too focused on certain techniques to deliver this approach, as with those based on manuals (Ashton, 2005b), and consequently may neglect the spirit and style which are "central to the approach" Rollnick and Miller (1995, p.326). Furthermore, direct persuasion is not an

effective tool for resolving ambivalence, a common trait of drug-using offenders subjected to a DRR (Hough, 2002; McSweeney et al., 2008; NTA, 2010). Arguably, those facilitating this kind of intervention sometimes fall into the trap of being too helpful, by persuading offenders of the urgency of their problems, and the benefits of change (Miller et al., 1993; Miller and Rollnick, 1991), something which the findings in the current study corroborate.

Conclusions

The aim of the current study was to examine the process of desistance among drug-using offenders, and the apparent disjuncture between rehabilitation programmes (specifically, the DRR) and what is known about desistance from crime. Managing and treating drug-using offenders within a criminal justice setting takes place in order to punish offenders, to help them to re-build their lives, and to protect the public from the potential, future harms caused by these individuals. Although there is some evidence to suggest that the current system works in reducing some crime, the evidence also indicates that there are failings in the existing approach. The findings in the current study offer some further evidence on desistance from crime and the relationship between drugs rehabilitation and desistance.

The factors related to desistance from crime for drug-using offenders remain complex. They are concerned with individual, social, and environmental change that is related to informal social control, agentic growth, identity change, and the motivation to change and desist. These factors, and the change required for desistance, are complicated by the previous, negative experiences of offenders in terms of the breakdown of social bonds, the loss of conventional social roles, spoiled identities (relating to drug-use and offending), and a frequent lack of opportunity to "make good". These opportunities are around employment, education and "giving something back" to the community. Nonetheless, the offenders in the study were hopeful about their rehabilitation and their capacity to desist and, in particular, about the possibility of amending and repairing previous and unwanted identities. In this regard, they illustrated high levels of personal agency and motivation.

The extent to which rehabilitative programmes help drug-using offenders to desist is also complex. The findings from this study corroborate the literature regarding the utility of certain interventions – particularly where the worker-client relationship is key – and the value of coerced drugs treatment (if only to stabilise offenders and to bring about a speedier recovery) as part of broader rehabilitative work with drug-using offenders. That work, the participants agreed, should be around forming or re-forming pro-social bonds (for example, with the family, peers, and employers), and facilitating motivation, personal agency, and

identity change. Importantly, the practitioners in the current study were more positive about the effectiveness of some interventions (for example, group-work) than the service users. Indeed, the service users indicated that they are very much drivers of their own change and that those interventions which do not take account of that factor are less useful to them. This issue is undoubtedly linked to the building of social bonds, and the maintenance of motivation and agency.

In all, then, there remains a disconnect between drugs rehabilitation and intervention and what is known about, and needed for, desistance from crime. Where the focus of rehabilitation is on the key factors related to desistance, it is likely to be more successful. However, the evidence indicates that, while there is some focus in drugs rehabilitation on improving education and employment opportunities, in addition to trying to repair social bonds, the interventions used in drugs programmes are still focused on other issues (such as, psychological or correctional rehabilitation) and a "one-size-fits-all" approach. According to some of the participants in the current study, some of these interventions neglect entirely the importance of social bonds, identity transformation, and increasing motivation and agency, focusing instead on the more generic approach of group-work.

This study has added to knowledge on the factors involved in desistance from crime, and has further challenged the links between theory and practice. Specifically, the current project has highlighted some of the ways in which interventions with drug-using offenders can or may encourage desistance from crime. In theoretical terms, however, it is clear that more needs to be known about what brings about desistance from crime as those issues remain complex. That said, in policy terms, it seems to be the case that drugs interventions in criminal justice should be more mindful of what is known from desistance research and the increasingly convincing body of knowledge on the factors related to a cessation of crime.

Limitations of the study and further research

This project is limited by the sample size. In qualitative research, sample sizes are typically small. However, owing to time and resource constraints, a smaller sample was more appropriate for the current study. It could be argued that the amount of data collected

cannot adequately support valid conclusions as, according to Landridge and Hagger-Johnson, "the larger the sample size, the greater the precision of the sample in representing the population from which it was drawn" (2009, p.57). However, as discussed in the methodology section, qualitative research is conducted to gain an in-depth understanding of an issue and not to generalise to a population. Nonetheless, in future research, access to other relevant criminal justice organisations, or additional people within the two organisations in this study, should be sought. Moreover, the recruitment of service users depended on the selection of their workers, and this could be argued to provide biased results, in that the workers could select those clients who would best represent good practice (though it is noted that there is no evidence to suggest that that was the case in the current study). Therefore, any future research would benefit from the researcher adopting a random sampling approach.

In addition, although a substantial amount of data was collected, further research through a longitudinal study may be beneficial. Conducting this research on the same participants after a period of time may see changes in views and perceptions and the development of ideas. For example, probation and DRR workers could be interviewed with a group of particular offenders undergoing rehabilitative work, wherein the progress of this group could be followed by re-interviewing the participants a number of times. Langdridge and Happer-Johnson (2009, p.81) suggest this would avoid only gaining a series of "snapshots of the setting". Research would also benefit from a longitudinal study which examines the process that allows for both the cessation of drugs and crime in the same individuals (which has not been explicitly examined in criminological research), in addition to examining desistance processes among the ever increasing numbers of *non*-problematic drug-users involved in offending and who are required to undergo criminal justice interventions. Relatedly, this study did not attempt to capture any measure of desistance from crime (or rates of reoffending) and focused rather on perspectives on, and experiences of, desistance. As such, a longitudinal study could attempt to examine the correlates of a reduction in criminal activity over a period of time.

Finally, with this cohort of service users, little attention was paid to the representation of gender or ethnicity. Although there were representations from female and minority ethnic offenders in the data collection, their sub-sample was small and issues

of diversity were not explored. As such, this study neglected the issue of gender and ethnicity "as it does in the field of desistance research [as a whole]" (Farrall et al., 2011, p.220). Evidence suggests (Farrall et al., 2011, and others) that the factors which support desistance among female offenders are different to those of their male counterparts. Therefore, further research could benefit from examining gender differences in desistance among drug-using offenders. As such, an equal sample of female and male offenders would allow for a "detailed examination of gender differences" in relation to any "structural impediments", and differences in motivation, "self-identity and agency" (Farrall et al., p.221). The same examination could apply to offenders from different ethnicities.

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Appendices

Appendix A: Interview schedules

Appendix B: Written proposal and cover letter

Appendix C: Ethical approval forms

Appendix D: Risk management statement

Appendix E: Confidentiality statement

Appendix F: Participant consent form

Appendix G: Participant de-brief form

Appendix A: Interview schedule

Interview schedule: Workers

The introduction section of this form will include me (the researcher) explaining the details of the information sheet to all the participants. Also, I will be explaining the reasons for the consent form and making sure this is signed by all.

Introductions and the purpose of project: including brief discussion of desistance from crime.

<u>Warm up and rapport setting:</u>

What is the overall aim and purpose of your organisation?

What is your role within the organisation?

What approaches do you use when working with offenders?

What are your expectations of your clients whilst on the order?

<u>Interview questions:</u>

Do you think there are links between drug-use and offending?

Have you recently witnessed changes in patterns of drug use (for example, legal highs, mephedrone)?

If so, how are these ingested?

Do you believe patterns of offending differ according to drug use, and the type of drug used?

What other factors do you believe are involved in offending behaviour?

The literature on desistance from crime suggests that offenders go through some sort of process of change.

Do you believe this is the case?

What sort of change occurs?

From your experience, what factors contribute to changes in behaviour?

How does probation and drug rehabilitation fit into changing behaviours?

To what extent do you think your interventions can contribute to any change?

Do you think offenders can go through the same process of change regardless of their drug of choice?

(If not), what are the differences?

What barriers, if any, do your clients face in their community?

(For example; housing, education, employment, peer networks, stigma, labelling.)

And how do these affect their desistance process?

What help, if any, do they receive to overcome these problems?

<u>Aims and perceived outcomes of current interventions:</u>

Do you think because offenders subjected to a DRR are coerced, this has a reduced impact on their outcome, compared to those who enter treatment of their own free will?

What do your current interventions aim to achieve? (such as, group work or one-to-one)

Do you think current criminal justice system interventions with drug using offenders are effective, and achieve their aims?

(If not), why not?

Do you think interventions can or should be tailored to facilitate the process of desistance more effectively?

(If so), what kind of interventions would better suit your clients?

Within some localities concerns have arisen around the shifting patterns of drug use (for example, the shift from heroin and crack cocaine towards the use of mephedrone) among problematic drug users, Is this something you have witnessed?

And if so do you believe your interventions can address this shift?

Do you see positive outcomes (in terms of reduced offending) among your clients?

When positive results occur, in your experience, how have these outcomes been achieved?

What are the barriers of achieving positive outcomes, for both your organisation, and the offender?

(If any), why? And how do you believe this can be overcome?

When your clients achieve positive results how are they acknowledged?

How do you view the introduction of Payment by Results?

And do you think this may have negative effects on an individual's desistance process? (for example, cherry picking clients to achieve targets, leaving some clients behind)

Involvement and relationship:

How much are your clients involved in the design and development of their individual care plans?

Do you think the relationship you have with your clients has a positive effect on their success?

(If so), why might this be the case?

Drug testing, whilst on the order, is obviously an important element of the DRR. Are these results used consistently to develop motivation, or hold your clients to account for their drug-using behaviour, and the same with further crime whilst on the order?

Motivation scale:

Would you describe your client as wanting to move away from crime?

Do you feel your client is able to move away from crime?

How likely is it your client might go back to crime in the future, and why?

What factors do you believe generate motivation among drug using offender?

Interviews cool off questions:

Some of the literature around desistance states that the factors associated with giving up drugs is more than likely related to those associated with giving up crime; do you believe this is this case?

In all, how would you say that your organisation facilitates the desistance process?

In a "perfect world", what do you think desistance interventions should look like?

Interview schedule: Service users.

The introduction section of this form will include me (the researcher) explaining the details of the information sheet to all the participants. Also, I will be explaining the reasons for the consent form and making sure this is signed by all.

Introductions and the purpose of project: including brief discussion of desistance from crime.

Warm up and rapport setting:

Could you tell me how old you are please?

Could you tell me what a typical day and week was like for you previous to starting this order?

If you can remember, how old were you when you committed your first offence?

Are you in employment at the moment?

What is your employment history like?

Have your friendship groups changed at all, over time?

Who do you associate with now?

Are you in an intimate relationship?

How has this relationship changed over time?

What is your family relationship like?

Do you know why you have been given this order?

Can you tell me why you were given this particular order?

How long did you get?

What are your expectations whilst on the order?

Have these expectations been met so far, or is it too early to say?

Patterns of drug use and offending:

Could you tell me about your drug use before starting this order?

What do you believe caused you to start using drugs?

What where/are your drug of choice?

Have you recently used any legal highs (for example, mephedrone)?

How are these ingested?

Did your patterns of offending differ according to your drug use?

(If yes), how did it differ?

Do you think there are direct links between drug use and offending?

(If yes), why might this be the case?

Interview questions:

Could you tell me about your offending previous to starting this order?

What causes or caused you to offend?

How do you view your previous offending behaviour?

Do you think there are any other factors other than drug use that cause or caused you to offend?

Are there any circumstances which would cause you to continue with offending, after the order has finished?

Have you been on a DRR before?

And what is different this time that may lead to you stop offending, or your drug use?

What changes do you feel you need to make in order to stop offending?

And do you feel these changes can be made whilst on this order?

Goals and future plans:

Could you tell me about any plans you had previous to your offending or drug use?

Have you any goals/aspirations for your short term future (6, months) and long term future (one year, plus)?

How do you believe these can be achieved?

How much do you think this order can help you achieve your goals?

Do you attend all the group work available?

(If not), why not?

Which groups do you enjoy, and why?

What do you think you can learn to avoid further offending, whilst on this order?

What interventions do you get the most out of (for example, certain group work or one to one)?

Why do you think this is the case?

Involvement and relationship:

How much do you think you have an input into your individual care plan?

When you test negative, how does this make you feel?

And what response do you receive from your worker, and court reviews?

If you have faced a positive test or breach for further offending, how would or has this made you feel?

Are your achievements praised here? (For example, reduction or stopping of drug use/offending, ETE, changing of relationships etc.)

What is the relationship like between you and your worker?

How does this make you feel?

How important do you regard this relationship?

Other perceived barriers:

What problems, if any, do you face in your community? (For example; housing, education, employment, peer networks, stigma, labelling.)

And what problems do you face in your personal life?

 And how do these affect you stopping offending or drug use?

Motivation scale:

Would you describe yourself as wanting to move away from crime?

Do you feel you are able to move away from crime?

How likely is it you might go back to crime in the future, and why?

What if an opportunity to do a graft came your way, where the graft looked certain to be successful, with few risks?

Interviews cool off questions:

Could you tell me what you think that you need to do in order to stop offending?

And the same with drug use?

In all, how would you say that this organisation can help you to stop offending?

In a "perfect world", what do you think rehabilitation and criminal justice interventions should look like?

Appendix B: Written proposal and cover letter

<u>Research proposal - Drug treatment and desistance from crime</u>

The proposed research project will aim to explore the process of rehabilitation and desistance from crime among drug-using offenders. Research has identified that desistance from crime is the long-term movement away from offending behaviour to a non-offending lifestyle (Maruna, 2001). The proposed research will focus on the interventions used by the criminal justice system to attempt to rehabilitate drug-using offenders, and will consider these interventions alongside the findings from desistance research. One of the main criticisms of rehabilitative programmes is that they are not sufficiently informed by desistance research (Farrall, 2002; Farrall and Maruna, 2004; Farrall and Calverley, 2006; McNeill and Weaver, 2010). For example, data from several evaluations of criminal justice work suggest that offenders who undergo rehabilitative programmes continue to offend and do not follow the desistance process identified in desistance studies (Burnett, 2000; 2004; Farrall, 2002; Hollingworth, 2008; Maguire and Raynor, 2006; Ministry of Justice, 2010; Raynor and Robinson, 2009; Rex, 1999). The literature indicates that the process of desistance involves certain changes within the individual offender, arguably brought about by increased maturity and attachments to informal social controls (social bonds), which in turn facilitate motivation which appears to be essential to achieving desistance (Gadd and Farrall, 2004; Giordano, et al., 2002; Laub et al., 1998; Maruna, 1999; 2000; 2001; Weaver and McNeill, 2007). The facilitation of these changes is, however, rarely the focus of rehabilitative programmes. This is particularly problematic for drug-using offenders who experience considerable problems in stopping offending, despite rehabilitative efforts, and for whom these changes are more difficult to attain (Frisher and Beckett, 2006; Gunter et al., 2012; McIvor et al., 2000; Packer et al., 2009; Schroeder et al., 2007). As such, by studying rehabilitative work that is done with drug-using offenders, this research will aim to further examine the apparent disjuncture between rehabilitative programmes and what is known about the desistance process.

The main research questions of the study are:

(1) What are the factors related to desistance from crime for drug-using offenders?

(2) To what extent do rehabilitative programmes help drug-using offenders desist from crime?

(3) Is there a disjuncture between theories of desistance and rehabilitative work with drug-using offenders?

The study will explore the views of those involved with the management and rehabilitation of drug-using offenders, and drug-using offenders themselves. The study will use a qualitative methodology, and the data collection will consist of semi-structured interviews and focus groups. A qualitative methodology will allow for the focus of the data collection to

be on the participants' experiences of rehabilitative programmes, and their understandings of the process of desistance (Bryman, 2008). It is intended to sample approximately ten members of staff who are involved with drug-using offenders, and ten drug-using offenders. The sample will be derived from the agencies with which the author collected data for his undergraduate dissertation (staff from the probation service and drug treatment services) and the offenders with whom these staff work.

The study will have theoretical and practical merit: it is intended that the findings from the study will be used to further the academic debate on the links (or disconnectedness) between rehabilitative practice and knowledge about desistance, and may influence public policy in terms of rehabilitation in the criminal justice system.

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Room HHRG01, Research Building

School of Human and Health Sciences

University of Huddersfield

Huddersfield

HD1 3DH

Dear Sir/Madam

Re: Postgraduate research project.

I am a Masters by research student in the Department of Human and Health Sciences at the University of Huddersfield. As part of my studies I am carrying out a research project on the rehabilitation of drug using offenders and their desistance from crime.

I would like to ask your permission to participate in the research because your experiences are central to my project. With your permission I would like to conduct a short interview with you, which will consist of a set of questions around drug use, rehabilitation and desistance. I understand that participating in interviews can be time-consuming so I would like to assure you now that the interview should not take any longer than one hour.

The interview will be subject to the ethical guidelines stipulated by the British Society of Criminology, and the University of Huddersfield. The interviews will be held in confidence, the research participants will remain anonymous throughout the study, and any information they provide will be available upon request and will be destroyed after the research is completed. In addition, participants will have the right to withdraw from the interview at any point, to have their data removed from the study at any time, and to refuse to answer any interview question with which they feel uncomfortable.

I have enclosed an information sheet which provides further detail about the study, and consent form for you to complete if you feel able to participate. However, if you feel you would like to wait until the interview, in order to go through the information and consent form face-to-face, that will be fine. If you have any queries please do not hesitate to contact me or my research supervisors.

Research supervisor: Dr Grainne McMahon, 01484 472455, g.mcmahon@hud.ac.uk
Research supervisor: Dr Rachel Armitage, r.a.armitage@hud.ac.uk
My contact details: u0964638@hud.ac.uk

Yours sincerely,
Garreth Robinson.

Appendix C: Ethical approval forms

THE UNIVERSITY OF HUDDERSFIELD
School of Human and Health Sciences – School Research Ethics Panel

OUTLINE OF PROPOSAL

Name of applicant: Garreth Robinson

Title of study: Drug treatment and desistance from crime

Department: Human and Health Sciences   Date sent:

Issue	Please provide sufficient detail for SREP to assess strategies used to address ethical issues in the research proposal
Researcher(s) details	Garreth Robinson (U0964638); MRes student
Supervisor details	Grainne McMahon; Rachel Armitage
Aim / objectives	This study will explore the process of rehabilitation and desistance from crime among drug-using offenders. The focus of the research will be on criminal justice interventions that attempt to rehabilitate drug-using offenders, and will consider these interventions alongside the findings from desistance research. One of the main criticisms of rehabilitative programmes is that they are not sufficiently informed by desistance research. The literature indicates that the process of desistance involves certain changes within the individual offender, arguably brought about by increased maturity and attachments to informal social controls (social bonds). These changes in turn facilitate motivation, and increase agency which appears to be essential to achieving desistance. The facilitation of these changes is, however, rarely the focus of rehabilitative programmes. This is particularly problematic for drug-using offenders who experience considerable problems in stopping offending, despite rehabilitative efforts, and for whom these changes are more difficult to attain. Further, patterns in drug-use are shifting (for example, mephedrone and other 'legal highs' are increasing in popularity), while criminal justice interventions for drug-using offenders remain traditionally intended for the rehabilitation of heroin and crack cocaine users. As such, there is an apprehension among those working within the field that current interventions are not readily equipped to cater for this shift in order to encourage desistance from crime.

By studying rehabilitative work that is conducted with drug-using offenders, this research aims to further examine the apparent disjuncture between rehabilitative programmes and what is known about the desistance process.
The main research questions of the study are:
(1) To what extent do rehabilitative programmes help drug-using offenders desist from crime?
(2) Is there a disjuncture between theories of desistance and rehabilitative work with drug-using offenders? |
| Brief overview of research methodology | The study will explore the views of those involved with the management and rehabilitation of drug-using offenders, and drug-using offenders themselves. The study will use a qualitative methodology, and the data collection will consist of semi-structured interviews. A qualitative methodology will allow for the focus of the data collection to be on the participants' experiences of rehabilitative programmes, and their understandings of the process of desistance. It is intended to sample approximately ten members of staff who are involved with drug-using offenders, and ten drug-using offenders (In all, then, five probation officers and five of their clients, and five drug treatment practitioners and five of their clients.) The sample will be derived from the agencies with which the researcher collected data for his undergraduate dissertation (staff from the probation service and drug treatment services), and the offenders with whom these staff work. In addition five further mephedrone-using offenders will be interviewed. This sample will be accessed in a specific location where the problem has been identified. |
| Study Start & End Date | Start Date: 15th October 2012   End Date: 30th September 2013 |
| Permissions for study | I have made preliminary contact with those organisations with which data were collected for my undergraduate dissertation (managers from both the probation service and the drug treatment service). Preliminary permission for the study has been granted by these organisations.
Ethical approval is also being sought from NOMS (National Offender Management Service): this process requires that every researcher completes a NOMS ethical approval form which is then sent by NOMS to individual probation trusts for a decision. As the probation trust has already agreed to the research – and oversees both the probation service and the drug treatment service – NOMS approval is expected. |

Access to participants	When ethical approval has been granted by the university and NOMS, I will arrange further meetings with the organisations above to discuss access to the participants (staff and offenders). The recruitment of staff will be based upon their availability (opportunistic sampling), and the recruitment of offenders will be based upon a set of criteria (age, gender, ethnicity, time on the rehabilitative order, and seriousness of offence). When access has been agreed, and participants have been selected, I will send the letter, information sheet, consent form, and interview schedule to the organisation for distribution to participants.
Confidentiality	I will explain to all participants the purpose for conducting the study and what the research is about, its aims, and how any findings will be disseminated. I will inform the participants that their confidentially will be protected, that they will remain anonymous throughout the study, and that no personal information shared. I will use audio-recording with permission of the participants and this will be stored on a password protected PC. This equipment will only be handled and accessed by the research team (researcher and supervisors). Further, after the research is completed all data will be destroyed. The researcher is aware that when conducting a study of this kind the protection of confidentially must be in line with the Data Protection Act 1998 which sets out confidentially in its legislation, in relation to interviews. All of this will be explained to the participants.
Anonymity	I will maintain anonymity by: keeping participants anonymous through the use of pseudonyms or numbers. This will allow the protection of identities to any readers of the write-up. Further, by maintaining anonymity, the participants will be unable to identify any of their colleagues or clients. In addition, the organisations will also be anonymised in the same way. Further, I will explain to the participants that they have the right to withdraw their data from the project (to the point where the write-up of the study has begun) and both my details and my supervisor's details will be provided in order to do so.
Psychological support for participants	I understand that there is a responsibility on my part for the physical, social and psychological well-being of all participants, as set out in the British Society of Criminology Ethical Guidelines 2006. The research does not intend to collect any data which may negatively affect the participants in this way. However, if any psychological support is needed the participants will be directed to their keyworkers or line manages, and this will be discussed with the managers from the organisations prior to the data collection.
Researcher safety / support (attach complete University Risk Analysis and Management form)	Attached. I understand that I will be interviewing potentially high-risk participants. I have taken certain safety precautions to project both myself, and the participants: Interviews will be held within the organisations premises, and supervisors will be made aware of specific location and the times/dates of each interview.
Identify any potential conflicts of interest	N/A
Please supply copies of all relevant supporting documentation electronically. If this is not available electronically, please provide explanation and supply hard copy	
Information sheet	Attached
Consent form	Attached
Letters	Attached
Questionnaire	N/A
Interview guide	Indicative schedule attached
Dissemination of results	The results from the study will be presented in the MRes thesis. Further, part of the research will also aim to inform local policy, in terms of specific interventions for the use of psychoactive drugs, and will be presented within an annual needs assessment for the Barnsley Drug and Alcohol Action Team. In addition, it is intended that the findings from the study will be used to further the academic debate on the links (or disjuncture) between rehabilitative practice and knowledge about desistance, and may influence public policy in terms of rehabilitation in the criminal justice system.
Other issues	N/A
Where application is to be made to NHS Research Ethics Committee / External Agencies	N/A
All documentation has been read by supervisor (where applicable)	Please confirm. This proposal will not be considered unless the supervisor has submitted a report confirming that (s)he has read all documents and supports their submission to SREP

All documentation must be submitted to the SREP administrator. All proposals will be reviewed by two members of SREP. If you have any queries relating to the completion of this form or any other queries relating to SREP's consideration of this proposal, please contact the SREP administrator (Kirsty Thomson) in the first instance – hhs_srep@hud.ac.uk

Appendix D: Risk management form

ACTIVITY: Data collection for MRes				Name: Garreth Robinson	
LOCATION: Leeds, Mabgate Mills; Barnsley, Drug Services.				Date: 18/10/12	Review Date:

Hazard(s) Identified	Details of Risk(s)	People at Risk	Risk management measures	Other comments
Interviewing substances misusing offenders as a lone worker	Personal safety	Researcher	Log times, dates and location of interviews with services providers and supervisors.

Email supervisors when interviews have finished and phone call to the Human and Health administration on leaving organization's premises | Specific interview location will be identified with supervisors before the start of interview. |
| Psychological well-being | Interviewee safety | Interviewees | To ensure the relevant support is readily available if any issues arise | Keyworkers and line managers will be made aware of interview date and time |
| Loss/ theft of personal data | Security of data and personal belongings | Interviewees/ researcher | All electronic data to be stored with password protected computer

All personal equipment and belongings to be stored in a designated locked office, within the university's facilities | Electronic data devises will be locked away when not in use

Only specific items needed for the interviews will be taken into the designated interview room |
| Display screen equipment | Poor posture when working for prolonged periods, which may result in musculosketal problems, visual/physical fatigue | Interviewer | All workstations will be subject to DSE assessment process | |

Appendix E: Confidentiality statement

Confidentiality Statement

Name of researcher: Garreth Robinson

Title of study: Drug treatment and desistance from crime

Confidentially: I will explain to all participants the purpose for conducting the study and what the research is about, its aims, and how any findings will be disseminated. I will inform the participants that their confidentially will be protected, that they will remain anonymous throughout the study, and that no personal information shared. I will use audio-recording with permission of the participants and this will be stored on a password protected PC. This equipment will only be handled and accessed by the research team (researcher and supervisors). Further, after the research is completed all data will be destroyed. The researcher is aware that when conducting a study of this kind the protection of confidentially must be in line with the Data Protection Act 1998 which sets out confidentially in its legislation, in relation to interviews. All of this will be explained to the participants.

Anonymity: I will maintain anonymity by: keeping participants anonymous through the use of pseudonyms or numbers. This will allow the protection of identities to any readers of the write-up. Further, by maintaining anonymity, the participants will be unable to identify any of their colleagues or clients. In addition, the organisations will also be anonymised in the same way. Further, I will explain to the participants that they have the right to withdraw their data from the project (to the point where the write-up of the study has begun) and both my details and my supervisor's details will be provided in order to do so.

Psychological support for participants: I understand that there is a responsibility on my part for the physical, social and psychological well-being of all participants, as set out in the British Society of Criminology Ethical Guidelines 2006. The research does not intend to collect any data which may negatively affect the participants in this way. However, if any psychological support is needed the participants will be directed to their keyworkers or line manages, and this will be discussed with the managers from the organisations prior to the data collection.

Disclosure: Everything you say will remain confidential, unless you disclose something that indicates potential danger to yourself or presents a potential risk of harm to others, or you disclose a new offence which I will have to tell your probation officer. I will let you know during the interview if I am going to do this.

Dissemination of results: The results from the study will be presented in the MRes thesis. Further, part of the research will also aim to inform local policy, in terms of specific

interventions for the use of psychoactive drugs. In addition, it is intended that the findings from the study will be used to further the academic debate on the links (or disjuncture) between rehabilitative practice and knowledge about desistance, and may influence public policy in terms of rehabilitation in the criminal justice system.

<u>Contact details:</u>

<u>Research supervisors:</u>

Dr Grainne McMahon, 01484 472455, <u>g.mcmahon@hud.ac.uk</u>

Dr Rachel Armitage, <u>r.a.armitage@hud.ac.uk</u>

My contact details:

Garreth Robinson, <u>u0964638@hud.ac.uk</u>

Appendix F: Participant consent form

University of
HUDDERSFIELD
Inspiring tomorrow's professionals

CONSENT FORM

Title of Research Project: Drug treatment and desistance from crime.

It is important that you read, understand and sign the consent form. Your contribution to this research is entirely voluntary and you are not obliged in any way to participate, if you require any further details please contact your researcher.

If you are satisfied that you understand the information and are happy to take part in this project please put a tick in the box aligned to each sentence and print and sign below.

I have been fully informed of the nature and aims of this research. ☐

I consent to taking part in it. ☐

I understand that I have the right to withdraw from the research at any time ☐
without giving any reason.

I give permission for the interview to be recorded (using audio-recording equipment) ☐

I give permission for my words to be quoted (by use of pseudonym). ☐

I understand that the information collected will be kept in secure conditions ☐
for a period of five years at the University of Huddersfield.

I understand that no person other than the researcher/s and facilitator/s will ☐
have access to the information provided.

I understand that my identity will be protected by the use of pseudonym in the ☐
report and that no written information that could lead to my being identified will be included in any report.

If you are satisfied that you understand the information and are happy to take part in this project please put a tick in the box aligned to each sentence and print and sign below.

Signature of Participant:	Signature of Researcher:
Print:	Print:
Date:	Date:

(One copy to be retained by Participant / one copy to be retained by Researcher)

Appendix G: Participant de-brief form

<u>Debrief form</u>

Researcher name: Garreth Robinson

Researcher contact details: <u>u0964638@unimail.hud.ac.uk</u>

Research supervisors:

Dr Grainne McMahon (01484 472455, <u>g.mcmahon@hud.ac.uk</u>)

Dr Rachel Armitage (01484 473854), <u>r.a.armitage@hud.ac.uk</u>

Dear sir/madam

Thank you for participating in an interview for my research project. If you have any concerns or questions regarding your interview please do not hesitate to contact either myself or my research supervisors.

Please be assured that you may withdraw your data from the research study. In order to do so, please contact me or my supervisors via email. Data can be removed from the project at any point after the interview until the write-up of the project begins. Further, if you would like to view my finished project before it is submitted to the university, I will be happy to make appropriate arrangements. In addition, if any psychological support is needed or you are upset and feel you need to talk to someone, please contact your keyworkers or line manages, and this will be discussed with the managers from the organisations prior to the data collection. Alternatively, if it is not possible to contact your keyworker/line manager, the contacts numbers below may be of some help.

Samaritans: 08457 90 90 90 (24hrs)

Victim support: 0845 30 30 900

Thank you,

Garreth Robinson