Rehabilitation

What does ‘good’ look like?

A DISCUSSION PAPER

Published: November 2013
1. Introduction
This Clinks discussion paper aims to stimulate fresh debate of key issues affecting the Voluntary, Community and Social Enterprise (VCSE) Sector, and service users themselves, as implementation of the coalition Government’s Transforming Rehabilitation reforms moves forward.¹

The paper explores the need for a clearer vision of what ‘good’ looks like in the rehabilitation of offenders, whether in prison or in the community. Such a vision is needed to underpin not only innovative, evidenced-based service development but also quality-based commissioning and the procurement of packages of rehabilitation services most likely to support desistance.² Individual desistance is increasingly understood to depend not only on personal rehabilitation, but also on wider social, judicial and moral rehabilitation.³ ⁴ From this perspective ‘good’ rehabilitation is a social process as much as a personal one, requiring much broader social, community-level and political commitment to the re-integration of ex-offenders than can be achieved through prison and probation systems alone.⁵

Clinks would like to invite you to participate in this debate. As a VCSE organisation (or indeed any other agency) working with offenders, what do you think ‘good’ looks like in rehabilitation, and what is the distinctive role that VCSE organisations can play in articulating and delivering that vision? See the end of this paper for further details on how to contribute your ideas.

2. The policy context
Through its Transforming Rehabilitation strategy and Offender Rehabilitation Bill, the Government is currently driving through radical changes to the commissioning, delivery and payment of rehabilitation services in prisons and in the community. The planned transfer of responsibility for the supervision of low and medium risk offenders from 35 Probation Trusts to contracted providers running 21 Community Rehabilitation Companies (CRCs), combined with new provision for the supervision of short sentence prisoners and the introduction of Payment by Results (PbR), is now progressing at speed against a backdrop of significantly reduced budgets.

¹ Information about the reforms and their implementation may be found on the Ministry of Justice website at: http://www.justice.gov.uk/transforming-rehabilitation and on Clinks’ website at: http://www.clinks.org/criminal-justice/transforming-rehabilitation [last accessed 23.10.13].
In a recent vote which sought to slow the passage of the Bill, the House of Lords raised concerns not only about the timetable for reform but also about its impact on the reducing reoffending and economic outcomes the government is seeking to achieve. The risk identified by the Lords’ debate is that the current drive for efficiencies of scale and reductions in cost could become a contractual ‘race to the bottom’. Deeper understandings of offenders’ needs and of the desistance process itself could then be lost in a ‘one size fits all’ approach to offender supervision. No matter how welcome the government’s new proposal to supervise and rehabilitate short sentence prisoners, if the only way of achieving that is to dilute the quality of work done with the whole offender population, the final outcomes may be less than positive.

To counteract these concerns and reinforce the importance of quality as well as cost, Justice Secretary Chris Grayling has provided more recent assurances that new rehabilitation contracts should go to a ‘broad range of suppliers’ and not just the lowest bidders. The recently published ‘Target Operating Model’ for the reform programme has also emphasised that the quality of rehabilitation support provided will be critical to reducing reoffending.

This is not fundamentally an argument about which sector should come out on top in the Contract Package Area competitions to run the new CRCs. It is and should be about what ‘good’ rehabilitation looks like across the offender journey, and how that understanding can be embedded in the reforms, in contract specifications, in supply chains, in wider partnership working and in individually tailored service delivery, irrespective of which agency is the lead provider.

3. The challenge for rehabilitation services

In a speech to Civitas in June 2013 the Justice Secretary set out the challenge for rehabilitation services very clearly. Many – if not most - offenders subject to prison and community sentences are affected by a highly complex and daunting set of disadvantages, often dating back to their early childhood experiences, while others experience direct and indirect discrimination on the basis of their race, gender or disability.

The statistics quoted in the speech from the latest Ministry of Justice (MoJ) Offender Management Community Cohort Study and from the known profile of adult prisoners and young offenders in custody are shocking, although probably not surprising to VCSE organisations that work with offenders.

---

7 Justice Secretary’s speech at Centre for Social Justice event on 23rd July 2013. Online: http://www.youtube.com/watch?v=cDWZVonOlfo [last accessed 23.10.13].
These are just a few of the headlines, both from the speech and from the Community Cohort Study that it cited:

- Sixty-five to seventy percent of young people in youth custody have experienced a traumatic brain injury; 51% have come from unsuitable accommodation; 43-57% have dyslexia; 44% of young women and 30% of young men have been in care at some point; 34% are from a Black, Asian or minority ethnic (BAME) group; 23-32% have a learning disability.

- Fifty-five percent of adult prisoners have a serious drug problem and nearly two thirds were using drugs in the month before entering prison; 41% have witnessed domestic violence in childhood and almost a third have themselves been abused; 37% will need help finding accommodation on release and 15% describe themselves as homeless; 24% were in care as a child.

- Fifty-one percent of the Community Cohort study sample of adults supervised in the community had a long term medical condition or disability; 46% of women and 40% of all those aged 40+ had a mental health condition, which affected 29% overall.

- Only 65% of the Community Cohort sample had had their criminogenic (offending-related) needs assessed using the OASys risk assessment tool, mainly those at higher risk of reoffending or posing serious risk of harm. Of these, 61% had relationship needs; 59% had employment and training needs; 38% had accommodation needs; 32% had needs related to drug misuse.

- Among the 35% who were not formally assessed using OASys, the study identified considerable levels of need; for instance, one-tenth were using crack or heroin and half were out of work and had no qualifications.

Most of these statistics reflect systemic failures in our health, education and welfare systems, negatively affecting the individuals concerned long before they come to the attention of the Criminal Justice System (CJS). At the point that somebody is convicted and acquires a new identity as ‘an offender’, however, criminal justice agencies quite rightly focus considerable attention on providing programmes and interventions that aim to address these ‘criminogenic needs’, which if not attended to are likely to heighten the risk of reoffending. NOMS’ Commissioning Intentions for 2013-14 thus identify a range of reoffending risk factors, together with evidence of effective or promising approaches that are considered important components of a rehabilitation framework.  

---

11 OASys is the IT based Offender Assessment System developed jointly by the Prison and Probation Services. It has been used since 2002 to measure the risks of reconviction and harm posed by individual offenders, to identify their criminogenic (offending-related) needs, and to inform sentence and supervision planning. For further information, see page 10 of NOMS Commissioning Intentions for 2013-14 below.

12 NOMS. 2012. NOMS Commissioning Intentions for 2013-14: Negotiation Document. Online:
They include:

- Drug misuse
- Alcohol misuse
- Impulsivity / low self-control
- Attitudes that support crime
- Social network also engaged in crime
- Poor or absent family / marital relationships
- Lack of qualifications, work skills, employment
- Lack of positive recreation / leisure opportunities
- Homelessness

**Key question**

- Does the provision of interventions addressing specific criminogenic factors add up to the provision of ‘good’ rehabilitation?

---

**4. ‘Good’ rehabilitation: what does it mean?**

In seeking some answers to this question, the paper first considers what ‘good’ rehabilitation means, and identifies some of the key messages from desistance research that impinge on commissioning and service delivery.

Increasingly, rehabilitation is understood to be a complex process which can support or hamper, but not command or compel, desistance - the individual offender’s own efforts to cease and refrain from offending.\(^{13}\) This notion of supporting offenders in their own efforts at desistance is reflected in the stated purpose of the National Offender Management Service (NOMS), which is to ‘protect the public and reduce reoffending by delivering the punishment and orders of the courts and supporting rehabilitation by helping offenders to reform their lives’.\(^{14}\)

As NOMS’ objectives suggest, rehabilitation is often seen as something that runs alongside, and is different from, the delivery of justice, public protection and punishment. In reality, of course, the individual offender experiences all these different aspects of the CJS simultaneously, and all of them interact with his or her own individual history and circumstances to influence the desistance outcome for good or ill.\(^{15}\)

A more integrated view of rehabilitation is therefore now emerging from desistance theorists, in which the interdependencies between four different forms of rehabilitation are recognised as having an integral part to play in the ‘natural rehabilitation’ process of individual desistance:\(^{16}^{17}\)

---


\(^{14}\) See footnote 12: NOMS 2012.


\(^{17}\) See footnote 4: McNeill 2012.
• Personal rehabilitation: re-development of the self; capacity building to support individual change and development of potential.
• Social rehabilitation: re-development of social identity / social acceptance; informal re-integration into the community.
• Judicial rehabilitation: formal end of punishment; removal of the ‘criminal’ label; requalification as a citizen.
• Moral rehabilitation: reparation / redress involving the offender, victim, community and state; restoration of good character, good community and good government.

From this perspective, ‘constructive punishment’ should work to deliver both justice and rehabilitation, and pay attention to all four rehabilitation strands in order to support the full reintegration of the reformed offender into society.

This view was echoed in the Owers review (2011) of the Northern Ireland Prison Service, which explored the role that prisons can play in building a safer society. The review understood desistance to be a social process as much as a personal one, requiring broader social, community-level and political commitment to the re-integration of ex-offenders than can be achieved through the prison system alone. It called for families, communities, the institutions of civil society (media, church, business, etc.), and the state itself, to be actively engaged in the process of supporting change.\(^\text{18}\)

These propositions suggest that in the longer term a much more ambitious vision is needed in England and Wales of what ‘good’ looks like in the rehabilitation of offenders, through serious political and public debate of what full reintegration means and what it requires on the part of the offender, family, community, civil society and state.

Such aspirations are clearly beyond the scope of this paper, however, which explores what a more immediate vision of ‘good’ might look like in terms of quality-based commissioning and the procurement of packages of personal and social rehabilitation services most likely to support desistance.

5. Key messages from desistance and other research

As more fully described in Clinks’ ‘Introducing Desistance’ guide, desistance theory emphasises the need for a holistic, flexible and person-centred approach to supporting people who have offended and who wish to stop.\(^\text{19}\) It recognises desistance as a highly individualised process that is quite likely to involve relapses and repeated attempts to break with old patterns of thinking and behaviour, as the individual seeks to develop a changed identity and new strategies for living a crime free life. Researchers are increasingly

---

\(^{18}\) See footnote 5: Owers et al. 2011.
\(^{19}\) See footnote 2: Clinks 2013.
interested in the distinction between primary desistance (any lull or gap in offending) and secondary desistance (the complete cessation of offending, accompanied by the development of an altered identity as a non-offender, and the person’s full reintegration into the family, community and society).  

There is an emergent view that both commissioners and rehabilitation providers should be taking a longer-term perspective and doing more to encourage and support secondary desistance. This is clearly recognised within NOMS’ Commissioning Intentions for 2013-14, which emphasises that an individual achieves secondary desistance ‘not through just one activity but through a combination of activities, services and social circumstances’.

The Government’s Transforming Rehabilitation strategy has gone some way to recognising the unevenness of offenders’ journeys to desistance by indicating that its Payment by Results mechanism will reward providers for reduced frequency of reoffending as well an overall reduction in the number of reconvictions. However, the short timescales involved in measuring the ‘success’ of the new, contracted providers (over just one year) and the emphasis on the binary reconviction measure are likely to focus providers’ attention on securing more limited primary desistance (the absence of recorded offending behaviour over a relatively short period of time), rather than supporting secondary desistance (the settled, long-term change in the identity and self-perception of the reformed offender, and their full re-integration into the wider community and civil society).

Following implementation of the Transforming Rehabilitation reforms, if short term gains in offenders’ journeys to desistance are to be sustained, new rehabilitation providers will therefore need to be quality assessed on measures known to support secondary, as well as primary, desistance.

Some of the key factors that research has identified as critical to supporting and achieving secondary desistance include:

- Maturation, which in this context may be as much about supporting the individual’s emotional and social maturation as it is about their chronological age;
- Forming or renewing positive, supportive relationships;
- Developing a prosocial identity, sense of purpose and self-determination;
- Individualised interventions which respond to issues of identity and diversity;
- The development and maintenance of hope and motivation;
- Approaches that develop and support strengths and resources, both in the

---

21 See footnote 12: NOMS 2012.
individual (personal capital) and in their social networks (social capital);
- Recognition and celebration of positive change.

Thus, while practical support with issues such as finding accommodation, steady employment and addressing substance misuse issues are all acknowledged as very important, research suggests that secondary desistance is best served by an individually tailored approach, which recognises the offender’s own needs and aspirations and preserves their personal sense of agency, with the establishment / organisation / worker / volunteer acting as ‘guide’ or supporter.

The paper next explores the different stages of the offender journey, in order to consider what ‘good’ might look like in a range of rehabilitation contexts.

6. ‘Good’ assessment and sentence planning
In considering what range of individual needs should be addressed through prison rehabilitation and resettlement, or a community order, the use of the OASys risk assessment tool currently provides a starting point for sentence planning, but is usually only used in higher risk of harm cases. Yet ‘good’ rehabilitation surely begins with a ‘good’ assessment of needs as well as risks, and such assessments are as important for low and medium as high risk of harm offenders, given the pervasiveness of complex multiple needs across the offender population and the fact that persistent, low risk of harm offenders are just as likely to have deeply entrenched problems that require skilled assessment and intensive support if they are to achieve desistance; they are also often at very high risk of reoffending. Furthermore, a comprehensive assessment that seeks to identify needs in relation to all four forms of rehabilitation should include consideration of the individual’s social, moral and judicial position, and not just their personal rehabilitation needs.

This implies that, in addition to the use of OASys for higher risk offenders, it is important for the responsible or supervising officer of any offender to be a skilled practitioner who has knowledge of the pre-disposing personal factors and wider structural factors underlying offending

Key questions
- What is the distinctive role that VSCE organisations play in supporting secondary desistance?
- What quality measures should commissioners use to assess how well providers can support secondary, as well as primary desistance, through their supply chains?
behaviour, and skills in building empathy and in working with the service user to reach a deeper understanding of their background, strengths and vulnerabilities. This requires good understanding of the impact that damaging early experiences can have, for example among the disproportionate number of both young and adult offenders who have been in the looked after system. Care leavers may have experienced early parental rejection, neglect or abuse, a succession of insecure temporary homes, disrupted education, and repeated losses of carers and workers. They may therefore have considerable difficulty surviving outside institutions or forming or maintaining secure attachments or relationships, not least with paid staff who profess to want to ‘help’ them. There is also a wider range of risks that the responsible or supervising officer needs to be skilled in identifying and responding to, in addition to the risk of more serious reoffending, such as risks of self-harm, risks to the health and safety of children and other adults in the household, and risks of domestic violence.

Such understandings of complex multiple needs and risks should result in a ‘good’, high quality assessment of the issues that both the offender and supervisor can agree to work on together throughout the community or prison sentence, and the coordination of a wider, holistic set of activities and community supports to address identified needs across all four aspects of rehabilitation.

Although the ‘Target Operating Model’ for the reformed system expects the new National Probation Service (NPS) to retain OASys as the main planning tool for its own work with high risk offenders, it will introduce a new, simplified tool for NPS to use when the court has passed sentence, to assess the offender’s risk of serious reoffending within twelve months. This will determine the allocation of offenders who pose low and medium risk of serious reoffending to the CRC, and of high risk offenders to the NPS. Criminogenic factors will only be considered at this stage where they are identified by the NPS in the pre-sentence report, in a post-sentence interview, or in a pre-existing OASys assessment.

A high proportion of low and medium risk offenders will therefore be referred on to the CRCs, in prison or in the community, without any significant needs assessment having been undertaken. The CRCs will then be entirely responsible for determining their own approach to needs assessment, sentence planning, and ongoing risk assessment. OASys will be made available to them, but they will not be obliged to use it. The assessment of any increased risk of serious reoffending will therefore largely be a matter of the responsible or supervising officer’s own professional judgement, since the risk assessment tool used at the time of sentencing will be based on factors that tend to remain

---


25 See footnote 8: Ministry of Justice 2013.
static over time, whereas changes in levels of risk tend to be dynamic and situational. Furthermore, although CRC staff will be expected to have ‘appropriate levels of training and competence’, the use of the existing Probation Qualifying Framework (PQF) will be optional, and it is not yet clear what quality standards will emerge from the promised Institute of Probation to guide the teaching and learning of consistent, evidence-based, effective practice.

Initially, of course, it is likely that almost all the CRCs’ responsible and supervising officers will be trained probation staff transferred as part of the restructuring of probation services. Over time, however, this role may increasingly be allocated to providers in the supply chain from other backgrounds and from any sector. These practitioners will undoubtedly bring their own strengths and abilities to engage positively with service users in new and potentially very productive ways, but there are nonetheless important quality issues for commissioners to consider in monitoring and evaluating the capability of the work force to deliver ‘good’ needs assessment, sentence planning, and the ongoing management of risk.

### Key questions

- How can commissioners ensure that that all responsible / supervising officers of low to medium risk offenders have sufficient knowledge, skill and experience to assess and respond effectively to criminogenic and other needs related to all four forms of rehabilitation?
- How should commissioners measure providers’ ability to assess ongoing risks of serious reoffending and other pertinent risks?
- What should this mean for the provision and accreditation of staff training and development within CRC supply chains?

### 7. Relationships and rehabilitation activities

Research highlights the importance of the relationship between an offender and their responsible or supervising officer in supporting the desistance process. The learning from NOMS’ Offender Engagement Programme gives some examples of staff behaviour that can help to support and facilitate this process, including demonstrating care about the offender and their future, engaging the offender in setting their own goals, actively listening to their views, and

---

providing advocacy on behalf of the offender tailored to meet their needs. To enable supportive relationships to develop, it is also important that the offender is able to engage consistently with one worker.

Key questions

- How can learning about what works best in this important supervisory relationship continue under the new arrangements, in the community and in prisons?
- Will the Transforming Rehabilitation reforms enable a consistent and positive relationship to develop between a worker and an offender?

As the ‘Target Operating Model’ emphasises however, the supervisory relationship is only one aspect of providing ‘good’ rehabilitation that supports both primary and secondary desistance. Whether through the specified Rehabilitation Activities requirement of a community order, voluntary agreement with the offender, or as part of a prison licence or post-sentence supervision order, ‘good’ rehabilitation should enable each offender to engage with a wider set of local interventions or activities that will respond to their assessed needs in relation to all four forms of rehabilitation. Although CRCs are likely to prioritise activities that address the main criminogenic needs identified by NOMS (employment; substance misuse; housing etc.), it is important also for secondary desistance to be supported through a much wider range of activities that will enable service users to live healthy, fulfilled lives and achieve personal, social, moral and judicial rehabilitation, for example through sport, arts and community activities, participation in restorative justice, and volunteering.

The desistance process is also supported by relationships between the offender and those who matter to them, such as their family or peer group. Labelling theory suggests that an individual’s perception of themselves and their identity can be heavily influenced by how others in society treat them, especially those they have a relationship with, and what positive or negative labels are applied to them. It is therefore important that all these relationships promote a positive self-identity for the person who has offended, to enable them to move away from the ‘offender’ label and forge a new, non-criminal identity. The role of volunteers and peer mentors may be especially helpful in this context, especially where service users have few stable family or personal relationships to call on.

All of these aspects of ‘good’ rehabilitation can only be achieved if the CRC’s supply chain and its own commissioning activity can identify and harness local interventions and activities that will respond effectively to these needs and issues. It is probably in this area that local VCSE organisations have the most distinctive contribution to make in delivering ‘good’

---

rehabilitation and supporting secondary desistance, but only if they can achieve full cost recovery to deliver a quality service.

Responsible or supervising officers will also need to be knowledgeable about the menu of providers in the CRC supply chain they can call on in sentence planning, and adept at identifying other resources within local communities that can support secondary desistance, especially at key points of transition such as release from prison, crises triggered by any further court appearances, and in preparation for the ending of the order or licence.

Key questions

- How can commissioners and CRCs themselves ensure they achieve a diverse supply chain and can offer a ‘good’ menu of high quality local activities and interventions that enable and support all four forms of rehabilitation?
- How can local VCSE organisations be enabled to participate in supply chains in ways that maximise their distinctive contribution to ‘good’ rehabilitation, while enabling them to remain sustainable?
- How should the work of CRCs and responsible or supervising officers be inspected, to ensure they are making best use of wider rehabilitation activities and community resources?
- How can positive and strong relationships between an offender and the people they most value be supported to promote the desistance process?
- What is the role of the wider community and society, and does this raise questions about how people who have offended are labelled and can be de-labelled?
8. Longer-serving prisoners

Under the Transforming Rehabilitation reforms, 71 adult male prisons have been designated as resettlement prisons, where short term prisoners will serve their full sentences and longer term prisoners will serve the last 3 months of their sentence. The remaining male prison estate will house longer sentenced prisoners. All prisoners will be assessed on induction by prison staff, using a basic custody screening tool, and this will be passed to the relevant CRC, who will then complete an initial resettlement plan. (At the time of writing, the future configuration of the women’s prison estate is still under review and therefore not yet known.)

Resettlement services will only be delivered by CRCs within the resettlement prisons and will therefore only be available to long term prisoners at the very end of their sentence. Existing provision and funding of mainstream and co-commissioned services, including those addressing health and education needs, substance misuse and offending behaviour, will however remain in place within the non-resettlement prisons.

The recent Owers review of the Northern Ireland Prison Service (2011) asserts that simply ‘containing’ prisoners will not enable them to desist from crime; prisons need to provide opportunities to enable individuals to achieve desistance. The review suggests that this needs to include ‘positive work to provide prisoners with skills, [and] tackle the underlying causes of offending’ and notes that this relies on well-trained and motivated staff. Prisons can also support desistance through focusing on prisoners’ motivation and achievement, supporting the development of a non-criminal identity and through fair and reasonable treatment.

---

Key questions

- What, does ‘good’ rehabilitation mean for longer-serving prisoners?
- Can resettlement services offered solely at the beginning and end of a long sentence really ensure the full rehabilitation needs of this group are properly supported?
- What will this work look like in practice?
- How can NOMS ensure they are delivering ‘positive work’ that supports the desistance process for longer term prisoners in the non-resettlement prisons?
- What wider set of activities will need to be in place focused on prisoners’ motivation and achievement, to support the development of a non-criminal identity?

---

29 See footnote 8: Ministry of Justice 2013.
30 See footnote 5: Owers et al. 2011.
9. **Short-sentenced prisoners**

Under the Transforming Rehabilitation agenda, supervision will be extended to support those serving prison sentences of less than 12 months. According to the ‘Target Operating Model’, offenders sentenced after the commencement of the Offender Rehabilitation Bill (subject to Parliamentary approval) will be supervised in the community for at least a year after release if they are given a custodial sentence for longer than one day.

**Key questions**

- What will ‘good’ resettlement planning mean for short-sentenced prisoners who will now be supervised in the community on release?
- Should it involve having early and continuing contact with the person who will be co-ordinating their resettlement and supervising them post-release?

This extra resettlement support is potentially very welcome; however, at times, the government has used the terms ‘supervision’ and ‘peer mentoring’ almost interchangeably when it is important to note that these are very different approaches. Latterly the ‘Target Operating Model’ has made it clear that peer mentoring ‘through the gate’ should be viewed as an additional intervention that CRCs may choose to include in their supply chain, and not as the key supervisory relationship for this group.

Peer mentoring is an example of peer support, which occurs ‘when people with the same shared experience provide knowledge, experience, or emotional, social or practical help to each other.’ Peer mentoring can be very beneficial for both the mentor and mentee, inspiring and motivating service users on their desistance journey and enabling them to gain skills and develop self-belief. To ensure peer mentoring programmes are successful, however, it is important that the mentor receives full training and support, especially if the role is a voluntary one.

Supervision on the other hand is not something an offender can choose to engage with, and under the new arrangements it will be a compulsory requirement on release. As referenced above, for supervision to support the desistance process, research suggests that it needs to facilitate the development of a positive relationship between the worker and service user that focuses on the service user’s strengths rather than the offence they have committed.
10. ‘Good’ rehabilitation for offenders with protected characteristics

Even a brief appraisal of the statistical profile of CJS service users reveals that an overwhelming proportion have protected characteristics. The challenges faced are therefore, in a sense, ‘mainstream’ to providing ‘good’ rehabilitation for the offender population, but they require tailored and specialised responses from providers in the supply chain with a lot of experience of supporting people in these groups.

a) Women

As comprehensively expressed in the Corston Report, women at risk of offending are known to have a distinct set of needs and risk factors that differ from those of men. In summer 2013, the Justice Committee concluded an inquiry into women and the CJS, evaluating progress made since the Corston recommendations in 2007. The inquiry revealed ‘a picture of large gaps in service provision’ for women, particularly in relation to specific groups, such as those with learning disabilities, BAME backgrounds and those with personality disorders, as well as a scarcity of suitable accommodation and high levels of unmet mental health need.

While high levels of need and vulnerability persist, knowledge of what ‘good’ rehabilitation for women looks like has been anything but static. Both research and innovative local practice demonstrate the efficacy of gender-specific, holistic and tailored support. Accordingly, the recent Justice Committee recommendations have stressed the need for a ‘whole system approach’ to women. This type of approach promotes joined up approaches to prevention and rehabilitation for girls and women that include services outside the core Criminal Justice System; for example, women-focused delivery of mental health services, health care, debt advice, housing support, family and child care services, training and employment.

---


b) Black, Asian and minority ethnic groups

The disproportionate representation of particular BAME groups at every stage of the Criminal Justice System demonstrates the need both to pro-actively address institutional racism and to ensure that culturally appropriate rehabilitative services are available to all. ‘Double Trouble’, a study commissioned by Clinks in 2010, demonstrated the need to ensure the relevance and accessibility of services to BAME offenders through the prison gate.33

The researchers recommended that resettlement services must:

...recognise and address the impact of perceptions of discrimination and stereotyping within the criminal justice system and wider system – particularly the impact on BAME offenders’ willingness and motivation to engage with services... [and] must display an understanding of, and sensitivity towards, cultural differences in expectations and experiences of resettlement.

The relationship between desistance and ethnicity is a developing area of research. In one of the few academic studies on the subject, Calverley has suggested the existence of distinct ‘cultures of desistance’.34 As the research base grows, it will be important that commissioners are open to tailored, community-level approaches, and that these recognise different minority groups. For example, the barriers faced by black people and Gypsy, Roma and Travellers both in the system and in the community are likely to be very different.

Key questions

- What specialist services need to be in place locally for BAME offenders, and how should they vary between areas with higher or lower BAME populations?
- How can such services be funded and supported?
- And how can community ownership be ensured?


prison population, and the number of older prisoners has trebled in the last 20 years. The specific needs of older prisoners include mobility issues (affecting their ability to get around the prison and participate in programmes that are a prerequisite for parole), limited contact with other family members who are also likely to be older and can find it challenging to travel long distances, and feeling intimidated by younger prisoners, which can lead them to withdraw and lose their confidence and self-esteem. Older prisoners also experience high levels of depression, chronic health problems, and accelerated ageing, and as part of their ongoing rehabilitation and resettlement may therefore require very specific health and social care interventions. To date, rehabilitation regimes have been slow to respond to the ageing profile of the prison population, and little progress has been made in the past ten years.

Key question

- In what ways can the rehabilitation needs of older prisoners be addressed within prisons, which are primarily designed for a younger age cohort?

Older prisoners released from prison are likely to have served long sentences, often for serious sex offences, making it more likely that they have become institutionalised and lost contact with their family or social networks. This means they may need additional and different support compared with younger offenders, to enable them to resettle successfully into their communities.

Key question

- What should this more intensive resettlement support for older offenders look like, especially in terms of the Transforming Rehabilitation reforms?

d) Disabled offenders

Improving outcomes for people with disabilities requires an understanding of the barriers that they confront, whether physical, sensory, or communication-based. These can exacerbate their exclusion from opportunities that are available to others (for example, programmes or activities important to parole decisions), and their access to rehabilitation, training and employment, and health and social care services.

For all of the equalities groups, a cross-cutting theme in any strategy to improve rehabilitation should be a willingness to address the wider structural and external factors that impact upon a service user’s engagement with the Criminal Justice System. For example, evidence that some

---


service users may be escalated in the system more quickly than others with a similar offending profile or receive less appropriate rehabilitative and resettlement support.

Key question

- What mechanisms should be in place to scrutinise the treatment and rehabilitative opportunities of offenders with protected characteristics throughout the Criminal Justice System - especially under the Transforming Rehabilitation reforms?

11. ‘Good’ partnership working

There have been a number of models developed in recent years that have sought to utilise ‘good’ partnership working to develop support for rehabilitation (among other outcomes), based on a recognition that involving local partners at an early stage is important not only in terms of achieving primary desistance but to support an offender’s longer-term reintegration into the community.

Integrated Offender Management (IOM) is an overarching framework that brings local partners and agencies together to provide a multi-agency approach to the management of repeat offenders whose crimes cause the most harm locally. The model involves all partners working intensively together with the identified cohort of offenders (both criminal justice and non-criminal justice agencies, including the VCSE Sector), and delivering a local response to local problems.37 This approach has built on and made better use of past programmes and structures such as the Drug Interventions Programme and the Prolific and Priority Offenders Programme.38

Making Every Adult Matter (MEAM) pilots were set up to improve coordination of services for people with complex, overlapping needs who experience multiple problems such as homelessness, substance misuse, mental health problems and offending. Their multiple needs mean that they have ineffective contact with services and that they live chaotic lives at the margins of our communities. Each pilot employed a coordinator to engage with service users, build trust and ensure the best possible route through existing services. Coordinators were supported by an Operational Group and Board of local services, which helped to ensure strategic engagement and enable all agencies to provide flexible responses.39

Similarly the Transition to Adulthood (T2A) pilots gave prominence and priority to services for


'young adults’ in the Criminal Justice System, recognising that this is a stage when the adjustments and passages in the life course are at their most challenging and when those already involved in offending are at risk of becoming the most prolific adult offenders. They aimed to achieve a more joined-up approach across the age divide separating services, and across the different sectors. Each pilot operated slightly differently but they typically developed a local inter-agency system for guiding young adults into better lives, through the provision of a T2A worker to build trusting relationships with service users, and through meetings between agencies to support joint decision making processes.

These partnership approaches, while slightly different in focus and objectives, have all shared common features which have supported the rehabilitation of their service users. Each has used a ‘key worker’ model whereby one identified individual has provided one-to-one support to each service user. This has enabled continuity of support focused on the specific needs of the individual rather than the provision of a generic service.

In the IOM approach an allocated ‘lead professional’ is identified for each offender from the range of agencies involved. Within the MEAM and T2A pilots each pilot area had a coordinator who provided one-to-one support to services users to ensure they were able to access the range of existing statutory and other services they needed. The T2A evaluation describes this as acting as a bridge or glue between services so that vulnerable individuals do not fall between the gaps.

Another key element of the provision of such an individually focussed service is flexibility. The T2A pilots provided an approach that was person centred and driven by the service user to supporting individuals in whatever way they required. In each MEAM pilot area Boards and Operations Groups were set up with representatives from relevant statutory and voluntary partners. These ensured senior strategic engagement, provided a forum for case management and enabled local agencies to move beyond standard provision and deliver fast and flexible responses. Similarly, the IOM model is based around a continuum of support to resettle, and interventions to rehabilitate. In addition the intensity of engagement within IOM relates directly to the risk of reoffending, irrespective of position within the Criminal Justice System or whether service users are currently subject to statutory supervision or licence, ensuring that individuals are appropriately supported and managed.

Finally, the common feature shared by each of these models is the individually-centred approach to good rehabilitation that is demanded by desistance theory.

---


41 See reference 40: R. Burnett & G.H Santos. 2010. p76

As highlighted earlier within this paper, a high proportion of offenders serving community sentences have complex and multiple needs.\textsuperscript{43} This is also true for the offender population as a whole and means that no single worker, agency or organisation can have the knowledge or capacity to meet all the needs of the offenders likely to be on their caseload.

### Key questions

- What is the future of ‘good’ local partnership working under Transforming Rehabilitation?
- How can models like these be sustained and expanded into other parts of the CJS?

### 12. Service user involvement

Clinks would qualify all of the foregoing with the principle that any work to commission and review what ‘good’ rehabilitation looks like should be underpinned by rigorous and meaningful user involvement. According to the World Health Organisation, service user involvement refers to processes whereby people are able to become actively and genuinely involved in defining the issues of concern to them; in making decisions about factors that affect their lives; in formulating and implementing policies; in planning, developing and delivering services, and in taking action to achieve change\textsuperscript{.44} In the current context, user involvement is interested in offenders or those who offended in the past becoming involved in the planning, development and delivery of criminal justice services to make them more effective.

User involvement also links to desistance theory, which supports the view that playing an active role in one’s community and taking on a measure of responsibility can support rehabilitation. User involvement can thus serve a dual purpose: firstly, it allows the service provider to hear from ‘the experts’ - those with direct experience of criminal justice interventions – within a constructive context; secondly, it can offer a vehicle that inspires service users to feel invested, hopeful and motivated about the service that they are receiving, and a sense that they have something to give even in the most confined circumstances. Furthermore, Clinks’ research on the extent and operation of user involvement in prisons and probation trusts in England and Wales revealed perceptions from staff that its benefits extend to hard outcomes such as improved compliance and reductions in reoffending.\textsuperscript{45}

43 Please see Section 3: ‘The challenge for rehabilitation services’.


How to contribute to this debate

In publishing this discussion paper, Clinks is inviting not only VCSE organisations but also stakeholders from other sectors to participate in a new debate focused on issues of quality – what ‘good’ looks like in rehabilitation - as implementation of the coalition Government’s Transforming Rehabilitation reforms moves forward.

Please contribute your thoughts and reactions to the questions raised in the paper, by emailing Lesley Frazer, Strategic Development Manager (lesley.frazer@clinks.org)

Authors

Lesley Frazer, Strategic Development Manager
Nicola Drinkwater, Policy Assistant
Clare Hayes, Senior Policy Officer
Jess Mullen, National Project Coordinator
Katie O’Donoghue, former Policy Officer
Ellie Cumbo, Policy Manager

Written

25th October 2013

About Clinks

Clinks supports the Voluntary, Community and Social Enterprise Sector working with offenders in England and Wales.

Clinks aims to ensure the Sector and all those with whom it works, are informed and engaged in order to transform the lives of offenders. It does this through:

- Providing representation and voice
- Promoting the Sector
- Influencing policy and campaigning
- Providing information and publications
- Running training and events
- Providing services and support
- Undertaking research and development.

It is a membership charity with a network of over 9,500 people working to support the rehabilitation of offenders.