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# Swansea Community Chaplaincy Project

Evaluation of the Swansea Community  
Chaplaincy Project at HMP Swansea  
October 2006 - March 2008

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## *Executive Summary*

Research has indicated that repeat offending costs the UK a minimum of £11 billion each year. In addition, national proven re-offending rates of adults released in 2004 and followed up over a two year period were reported at 56% (Home Office, 2007). The issue of re-offending is currently being addressed by the Government in their new Crime Strategy (Home Office, 2007). In addition, the current gap in service provision for offenders serving sentences of 12 months or less can be understood as contributing towards these high rates of re-offending.

The (2002) Social Exclusion report identifies seven pathways as major contributors to re-offending which should be addressed at both policy and individual level. The National Offender Management Unit (NOMS) recognises the need to work in partnership with key government agencies, prison and probation services and local agencies to implement intervention addressing the seven pathways. NOMS also recognises the importance of utilizing links with faith and voluntary groups to work more closely with offenders at individual level.

The Community Chaplaincy Project with HMP Swansea provides support to offenders during the bridging process between custody and reintegration into the community using the established skills and expertise of the faith and voluntary sector.

The current evaluation examines the efficacy of the Community Chaplaincy Project by examining both the impact and the process, identifying areas of effective working practice and areas that could be improved. This was achieved through examining programme administration, offender demographics, improvements in offender lifestyle variables alongside holistic improvements over time, rates of offenders returning to HMP Swansea, as well as undertaking examination of qualitative data and procedural processes.

There was an impressive retention rate of 68% coupled with very high satisfaction rates. Data analysis revealed significant improvements over time in all lifestyle variables and in overall holistic change. Levels of engagement were very promising, with those engaging more receiving the biggest improvements. Return to HMP Swansea rates for Beneficiaries were approximately half that of the National average re-offending rates (27.27% compared to 56%) although there are issues surrounding the validity of our measure which must be considered when interpreting these results. The report identifies the high level of effective inter and intra organisational communication as well as efficient and thorough data recording. An examination of procedural processes reveals a unique and fluid approach to support provision based on the building of trusting relationships and the continuity of care.

Areas for improvement in regard to intervention, assessment and procedural processes are also highlighted, and recommendations are suggested. These include factors such as record keeping issues, lack of objective measures of progress and motivation, the adaptation of the SPIDER to



match the seven NOMS pathways more closely, matching OASys risk classifications with appropriate hours of contact, increasing contact hours and extending post release support timeframe to maximize beneficiary engagement and service outcomes. A significant difference in the number of previous sentences was found between those Beneficiaries who completed the programme and those who withdrew, suggesting that those offenders with more previous sentences (prolific) need closer monitoring and more contact over longer time frames in order to improve engagement within the programme. It is expected that implementing the recommendations would allow the service to work closer to potential, resulting in the improvement of programme efficacy.

Overall, it is clear that the Community Chaplaincy's unique approach provided by the building of trusting relationships, fluidity of the support provision, and the continuity of care provides a service well suited to fill the gaps of existing service provision. This would suggest that sustained funding can only be beneficial to the project, the Beneficiaries, and that it is likely to play a significant role in reducing re-offending within HMP Swansea.

## 1. *Introduction*

### The Issue of Repeat Offending

The Government has identified public protection and the wider effects of crime as a main priority. Recognition has been made to the problem of repeat offending, which costs the UK a minimum of £11 billion each year (Home Office, 2004). Additionally, it is estimated that 10% of the offender population is responsible for half of all crime committed, recognition of which is reflected in the new Crime Strategy, where increasing focus again is given to the issue of re-offending (Home Office, 2007). In addition, national proven re-offending rates of adults released in 2004 and followed up over a two year period were reported at 56% (Home Office, 2007).

Another important factor to consider is that the majority of adults released from prison every year are those serving sentences of twelve months or less (Home Office, 2003). The problem here could be that those serving short term sentences are not provided with the same level of statutory intervention/support as those who serve longer sentences, and neither are they subject to statutory supervision on release. The lack of statutory support/intervention for this group could be understood as a contributing factor to reoffending for this group (Lewis et al, 2003). Clearly the issue of repeat offending, and the gap in service provision for short term offenders is an important issue to tackle as the prison population continues to rise, currently standing in excess of 82,000 (NOMS, 2008).

This emphasis on re-offending can be linked to a report published by the Social Exclusion Unit (2002) which identified that ex offenders are drawn from the most socially excluded members of society. The report identified seven interrelated 'pathways' as major contributors to re-offending which should be addressed at both policy and individual level if this major issue is to be addressed effectively (Home Office, 2004). These pathways include accommodation, education training and employment, health, drugs and alcohol, finance, benefit and debt, children and families, and attitudes thinking and behaviour.

The National Offender Management Unit (NOMS) was set up with the main aim of reducing reoffending, and has recognised the need to work in partnership with key government agencies to implement intervention addressing the seven pathways. Regionally, service level agreements are implemented between prisons and probation services, and links are formed between local agencies such as the Learning and Skills Council, Jobcentre Plus, Supporting People partnerships, Drug Action Teams and Primary Care Trusts. Further links have been developed with the

corporate sector, civic society and with faith groups and the voluntary sector. The aim of these links is to provide a joined up 'end to end' intervention to address the needs of the individual offender with the aim of reducing reoffending.

What works to reduce reoffending for the individual?

The 'what works' initiative outlined by the Home Office (1999) identifies an evidence base of literature that examines the efficacy of interventions aimed at reducing reoffending. This body of research aims to identify the type of intervention most likely to be effective, and consequently recommends those that should be provided. This evidence base has largely been created by results provided within meta-analytic studies. Using this method, research evidence for particular types of interventions are grouped together and compared across intervention types in order to provide an overall picture of which is more likely to be effective. However, criticism has been made that the varying methodology across studies, and the fact that most studies have been conducted in the US and Canada, rather than in the UK, may confound this type of research evidence, and therefore recommendations may not always be valid (Home Office Research Study, 2005).

An addition to the 'what works' evidence base has been provided by bringing the focus to principles of effective intervention to reduce reoffending. Fundamentally, this view contends that it is the needs of the offender and the method in which intervention is delivered that can dictate its efficacy. In line with this view, Andrews & Bonta (1994) outline three principles to which effective intervention must adhere; these include risk, need and responsivity.

The risk principle refers to the ability to predict criminal behaviour on the basis of assessing both static risk factors (such as offending history) and dynamic risk factors (such as alcohol/substance misuse) for each offender. The application of the risk principle in relation to effective intervention proposes that high-risk offenders benefit most from intensive interventions, while low risk offenders benefit most from low intensity intervention.

The need principle identifies two types of needs: criminogenic and non criminogenic. Criminogenic needs are those that when changed are associated with changes in recidivism, whereas non-criminogenic needs are not directly associated with new offence behaviour. An example of criminogenic needs can be identified as those highlighted in the SEU report; accommodation, education and employment, financial problems, relationships, drug and alcohol misuse, and attitudes thinking and behaviour. These needs are likely to vary across individuals, highlighting a requirement for individual assessment and targeting of intervention/support. This

view then suggests that Intervention/support must address these criminogenic needs and therefore tackle a range of problems directly associated with the offender in order to be effective.

The responsivity principle concerns the ability and learning style of the offender. This view contends that outcomes of intervention/support can be influenced by interaction between offender and service characteristics. Offender characteristics have been identified as factors such as cognitive ability, maturity, gender and race. Service provider characteristics include ability and interest, the structure of the intervention, as well as its location. This suggests that service providers need to recognise these characteristics in order for implementation of any intervention/support to be effective.

Andrews, Zinger et al (1990) conducted a meta-analysis examining the success rates of different types of treatment for offenders. Interventions which were classified as appropriate (those which follow the principles of risk, need and responsivity) were compared to those which were classified as inappropriate (and therefore don't follow these principles) and with criminal sanctions (e.g. prison or probation). Appropriate interventions were associated with reduced recidivism, the reduction was on average around 50% compared to inappropriate interventions and criminal sanctions. Therefore further suggesting that any resettlement intervention should adhere to these principles.

In addition, and in support these findings, there is also research to suggest that interventions that focus on purely punitive measures are much less effective than those that provide rehabilitation and treatment options (Freeman et al, 2005). Here, motivation and self-efficacy have been evidenced as predictors of future intention to re-offend. While punitive measures in isolation may not address these issues, intervention programmes and support can offer this potential, and as such may also benefit those who are resistant to change, and subsequently reduce rates of reoffending.

### Resettlement Support

It can be understood from the information presented, that it is a fundamental aim to break the cycle of repeat offending, and that in order to tackle this problem, effective methods of intervention must be implemented not only by way of providing more effective support at government level, but also at individual level.

The work of NOMS and the implementation of proposals included in the National Reducing Re-offending Delivery Plan (2004), and the new Crime Strategy (2007) can be understood as contributing towards the problem at government level. To be most effective though, intervention/support requires a coordinated and multi-agency response both inside prison, during transition from prison to community, and for this support to continue within the community to enable a more productive and adaptive resettlement process (Social Exclusion Unit, 2002). This highlights the importance of individual support throughout this process, where motivation and engagement by the individual can predict the success of resettlement. The prison environment provides a starting point opportunity to work with offenders with the aim of breaking the cycle of reoffending.

Research has suggested that in addition to addressing opportunity deficits (access to appropriate resources) intervention/support that also addresses offender responsibility (choices and responses to circumstance) can be more successful (Clancy et al., 2006). This fits well with the 'attitudes thinking and behaviour' pathway identified within the National Reducing Reoffending Action Plan (2004). The importance of cognition in the process of behaviour change has also been reflected in an evaluation of pathfinder programmes aimed at short term offenders (Lewis et al, 2003). This report identified that offenders taking part in programmes providing motivational and cognitive behavioural approaches were more likely to continue post release contact, and to show positive changes in attitude and self reported problems than those who took part in other types of programme. As well as improved thinking skills, it was also identified that 70% of all offenders that took part in any of these pathfinder programmes reported a benefit from increased self confidence, having someone to talk to, and help with practical problems (Home Office, 2003).

Given the identified need and the comparative efficacy provided by research evidence of these types of interventions, it can be viewed as essential for offenders to be provided with, and to participate in this type of support. However, not all offenders may want support that matches their identified need. The problem then becomes one of engagement, motivation and retention. Taking this into account the following points have been suggested to aid an effective response in regard to resettlement support;

- Planning & preparation for release
- Establishing a relationship with the prisoner prior to release
- Continuity of pre and post release intervention/support
- An individually tailored response
- Intervention should be 'prisoner led'
- Empathetic support to maintain motivation

- Welfare support must not outweigh offender responsibility
- Assessed needs must be dealt with in a holistic manner not in isolation

(Maguire & Raynor, 2006, p.25)

Clearly from this suggestion, a need is highlighted to establish trusting relationships that begin in prison, are maintained during the transition period into the community, and that continues as needed after release. This type of support encourages further interpersonal interaction, the growth of interpersonal relationships, and increases the potential of social capital and social inclusion (Bazemore & Bell, 2004). In addition to recognising the importance of addressing problematic attitudes, thinking and behaviour, this view contends that the development growth and maintenance of interpersonal relationships also play a vital role in the process of engagement and resettlement.

#### Faith Based Intervention/support, Community Chaplaincy and Swansea Prison

The positive effect of faith based organisations have been recognised as bringing additional skills, knowledge and expertise, and to offer advantages in dealing with the multiple disadvantages faced by offenders (Home Office, 2005). Strengths have been identified as;

- providing a unique client centred approach
- the provision of advocacy
- developing trusting relationships
- providing positive links to local communities
- encouraging offender involvement
- allowing offenders to specify their own needs for required services and interventions
- providing continuity of support for offenders returning to their community
- adopting a flexible and swift approach to individual need
- innovative and fresh thinking

(NOMS, 2007)

Statutory requirements are such that all prisoners have the opportunity and resources available to participate in religious activities and receive pastoral care (Prison Order 4550, 2002). Chaplaincy teams within prisons visit all new arrivals to ensure all prisoners are aware of services offered within each prison. Access is available on a daily basis, and services provided include; counselling, access to all ministers of recognised religions, availability on request within 24 hours, and provision of effective systems to inform prisoners of family bereavement. Chaplains will

also be informed of offenders who are seriously ill or suicidal in order to offer services if required.

The scope of Chaplain's work differs across prisons dependent on need. Previous research has identified Chaplain's additional involvement with prison staff support, delivery/contribution to rehabilitation programmes, forming greater partnerships and inter-agency working, contributions to race relations, care, diversity training, anti-bullying programmes, suicide prevention, and with providing support for offenders on release and during the resettlement process. (Portwood, 2003). Clearly the contribution of the Chaplains within the prison environment provides an invaluable and broad-ranging service. However, for the purpose of the current evaluation the focus is with the work of the Community Chaplaincy and its effects on the resettlement process.

Community Chaplaincy was initially developed in Canada in response to identifying a lack of support for prisoners on release into the community. Since its inception in the 1980's it has continued to grow, and has provided an effective and cost effective intervention for reducing re-offending in Canada. Their model attributes its success to the combined efforts of the Chaplains, the board members, volunteers and resources within the community (Correctional Services of Canada, 2001). Following its success in Canada, Community Chaplaincy was implemented in the UK, and more specifically for the purpose of the current evaluation was initiated within Swansea Prison in June 2001.

Swansea prison is a category B local prison with a capacity of 428 adult males. The prison build was completed in 1861. Prisoners are employed in the prisons workshops, kitchen and horticulture departments, and education is provided. Accredited Offending Behaviour programmes, ETS, and Drug Rehabilitation programmes are also available along with CARAT interventions, resettlement groups and job points (HM Prison Service, 2004). The Community Chaplaincy project at Swansea currently has the benefit of three Chaplains from Salvation Army, Baptist and Evangelical backgrounds, as well as a full time Administrator. Initially, one Chaplain was provided full time, the remaining two contributing on a voluntary basis. Owing to the success of the project, all three Chaplains are now employed full time. Their collective contribution to the project ranges from practical and academic development of the programme including forging policy outcomes, to implementing assessments and key working Beneficiaries (offenders). Essentially, each Chaplain utilises their own skill base to provide the most benefit to the project and to the Beneficiaries.

The primary aim of the project is to support offenders during the bridging process between custody and reintegration into the community using the established skills and expertise of the

faith and voluntary sector. This is accomplished by identifying individual needs during prison confinement, addressing these needs through various support services and networks, and by providing continued support throughout the bridging process. This includes support for the individual, their families where necessary, and within the community with the aim of assisting offenders to become contributors to their society and helping to prevent re-offending. The Community Chaplaincy Project does not aim to replace existing interventions or support, but aims to co-ordinate resources during the resettlement process dependent on individual need. This allows individual tailoring of support for each beneficiary, and provides one point of contact, the building of trusting relationships both inside and outside of prison, and the continuity of care.

### The SPIDER Assessment

The project within Swansea prison employs an innovative method of assessment termed the 'SPIDER' assessment. This tool enables measurement of offenders' perception of needs, and illustrates changes in these needs over time during the resettlement process. The SPIDER assessment initially allows each individual offender to identify areas of need including: accommodation, education, training and employment, health, drug & alcohol problems, relationships (social networks), attitudes thinking and behaviour, and use of time. The eighth factor included in the assessment represents the Community Chaplaincy intervention, and the extent to which each offender engages with the Chaplaincy support offered. Each of the eight factors (or 'legs') then represents a specific resettlement pathway, identified and acted upon with the implementation of the Community Chaplaincy support.

In addition to measuring and recording needs, each offender is asked to prioritise their needs. This highlights the difference between the needs and wants of each offender as far as support/intervention is concerned. In line with previous research, taking into account personal priorities for support would be expected to provide an offender led focus, and as such increase motivation to engage in the project, and so aid effective intervention (Maguire & Raynor, 2006).

The eight factors measured by the SPIDER assessment are adapted from the seven pathways proposed within the National Reducing Re-offending Action Plan (Home Office, 2004), with the addition of the 'Community Chaplaincy' factor previously described. Whereas five of the seven factors (discounting the Chaplaincy factor) can be seen as identical, a comparison with the NOMS pathways shows that two of the seven are divergent. These divergent factors are those



labelled 'Relationships' and 'use of time', and could be understood as replacing the NOMS pathway labels of 'children and families' and 'finance, benefit and debt'. However, this is not necessarily the case. The label of 'relationships' allows a more accurate description of the type of problems and support that is evident with the population under consideration. Addressing issues associated with all close personal relationships (rather than solely children and families) allows a more accurate description of support that is available extending beyond immediate family. Additionally, the 'use of time' factor has been considered as a vital need to be addressed with the current population, and provides focus on the need to increase motivation in order to engage effectively with the support offered (Maguire & Raynor, 2006). This does not mean that the 'finance benefit and debt' support is excluded within the work of the Community Chaplaincy, rather that this type of support has not been measured as a separate need during the Chaplaincy intervention.

#### Previous Community Chaplaincy Evaluation (2003)

The SPIDER method of assessment was implemented in November 2006, partly in response to previous evaluation recommendations (Portwood, 2003). In line with these recommendations, this assessment has provided improvements in the following areas by assisting with:

- identifying the level of demand for type of support/services required
- the creation of new links, and maintenance of existing links with other agencies
- highlighting where support/intervention needs to be re-focused dependent on changes in offender need over time. This also involves the offender in the development of service provision.
- Improving data collection techniques by making full use of ICT in order to facilitate monitoring of offender progress, and to facilitate evaluation processes.

This earlier evaluation also suggested several further recommendations which have been acted on in order to improve the efficacy of the intervention and to provide a more effective service.

These improvements include;

- the continued education and training of the Chaplains,
- developing further channels of communication (both inside HMP Swansea and with the community)
- the establishment of new links (provided by production and circulation of an annual report, and through public speaking, which has initiated new interest in the project from outside agencies)

- the establishment of weekly team meetings in order to sustain motivation and enthusiasm
- playing a more integral role in the provision of housing/accommodation and employment opportunities

#### Aims of the Community Chaplaincy Project

The key aims of the project are:

- to provide holistic support to offenders during the bridging process from custody to community
- to fill in the gaps of existing service provision
- to assist in community reintegration of offenders thus contributing to greater public safety
- to create and maintain partnerships between the prison and community agencies

Key outcome measure are:

- continuity of offenders with the programme
- the offenders' perception of holistic change in the bridging process and satisfaction of service delivery
- the offenders willingness to accept assistance
- return to HMP Swansea rates (re-conviction)

## *2. Methodology*

The present evaluation aimed to address both the impact and the process of the Community Chaplaincy Project provided at HMP Swansea. The impact evaluation identified what effect the service had on its client group, and the process evaluation examined the efficacy of the service delivery from the Community Chaplaincy Project.

The extent to which these processes were successful or unsuccessful in achieving the aims of offender resettlement and a reduction in offending behaviour within the scope of the current research was outlined. Within the impact evaluation, the aim of examining programme administration was to provide a general picture of activity levels of the programme in order to give orientation and scope to the evaluation. Additionally, an examination and comparison of offender demographics, sentencing information, and inter-agency involvement aimed to highlight any associations between particular variables. For example, it was expected that those with particular types of offending patterns might demonstrate better success rates (in regards to completion) than others. This relates to the responsivity principle, concerned with the ability and learning style of the offender. An examination of outcomes of intervention and offender characteristics is conducted with the intention of highlighting any offender characteristic related to withdrawal from the programme, in turn suggesting possible discrepancies between offender and service characteristics. Similarly, assessment of risk and intensity relates to the risk principle of effective intervention, an examination of the relationship between number of sessions/hours attended and level of risk is considered. In line with evidence outlined, it should be that those with higher risk levels should have more contact hours than those with lower risk levels. Information regarding beneficiary demographics and sentencing was provided by the Community Chaplaincy Project.

Additionally, an examination of outcome monitoring variables was conducted. This was to provide an overall picture of the efficacy of the programme. Outcome monitoring fell into three parts; improvements in lifestyle variables, reconviction rates, and beneficiary satisfaction.

### *Lifestyle Variables*

Within the period of this evaluation, a new method of recording outcomes was introduced whereby the beneficiary is measured along 8 axes, each relating to different aspects affecting quality of life and propensity to re-offend. These are:

- Accommodation
- Education, Training and Employment

- Relationships
- Health
- Substance Use
- Use of Time
- Attitudes, Thinking and Behaviour
- Engagement (as measured by that specifically with Community Chaplaincy)

This method of assessment was designed to measure the changes in each domain, and holistically, at three specific points over time. These time periods include six weeks prior to release, on release and six weeks after release. Each of the eight domains (or 'legs') are given a score from one to eight (see appendix 2), scores increase with improvement, or decreases if the offender is not progressing well within each domain. Low scores indicate more chaotic or problematic issues within that domain. These scores are self-reported by the beneficiary during a discussion with the assessment Community Chaplain, and not their assigned Community Chaplain, in an attempt to prevent, or at least reduce, any pressure to respond in a biased manner. At each time-point, the relevant points on the 8 axes can be joined up to make an overall shape. The smaller the area, the lower the score and therefore the more problematic the person's life. This collective score provides a measurement of holistic improvement by incorporating scores across all eight domains. This data is recorded using Microsoft Excel, and analysis of scores provides a pictorial representation that is easy to interpret illustrating the changes made over time both holistically and for each individual domain (see appendices 1, 2 and 3 for examples). This diagram is easy to interpret, and allows problem areas and changes in support to be identified and implemented quickly, dependent on the outcome of the assessment diagram, thus acting as a simplified care-plan. It also allows an examination of the changes of perception and priority of need over time. Additionally it allows offenders to access information about their own progress in a straightforward, unpretentious way without the use of complicated language, statistics or intimidating reports.

In addition to measuring and recording needs, each offender is asked to prioritise their needs. At each time-point Beneficiaries were required to prioritise all 8 domains. This highlights the difference between the needs and wants of each offender as far as support/intervention is concerned. In line with previous research, taking into account personal priorities for support would be expected to provide an offender led focus, and as such increase motivation to engage in the project, and so aid effective intervention (Maguire & Raynor, 2006).

Finally, Beneficiaries are also asked to attribute changes in scores for each domain to the level of Community Chaplaincy intervention given. For example; if a beneficiary feels that their

Accommodation status changed between the pre release and the on release time frame, they are asked to decide how much intervention they felt was provided by the Community Chaplaincy during this time. Amount of intervention is scored from levels 1 -5. There are no specifications as to what these levels relate to, although it is suggested that an example of level one assistance may be 'Community Chaplain discussed responses/options' and level five assistance may be 'Community Chaplain assisted to obtain, instruct or deliver something'. Beneficiaries were also able to state that they felt they had no issue in this area and therefore that no support was required, or that they felt that interventions provided had a negative effect. The emphasis on scoring levels of intervention is Beneficiaries' perceptions of support. This allows insight into the levels of perceived intervention provided by the Community Chaplaincy in each domain, and brings focus to particular areas where the programme is working effectively, and is not working as well as it should. It should be noted that a significant amount of work may be carried out by the Community Chaplaincy team which the beneficiary is not aware of, especially related to increasing levels of motivation and self-esteem and acting as gatekeepers to other services.

#### *Return to HMP Swansea Rates*

The Community Chaplaincy does not have access to information which allows them to monitor information regarding re-conviction rates (returns to ANY establishment) over time. It is only possible to monitor the number of offenders who return to HMP Swansea. This information is collected daily, where lists of all new offenders are accessed via the Local Inmate Database System (LIDS) and checked against the Community Chaplaincy's intervention record to assess whether or not they have previously been interviewed by the Community Chaplaincy. This information is then recorded within the intervention record for both Beneficiaries (those offenders who took up offers of support by the Chaplaincy) and decliners (those offenders who declined offers of support). Whether the return to custody occurred either within three months after release, between three and six months after release, between six and nine months after release, between nine and twelve months after release or over 12 months after release, is also recorded.

#### *Satisfaction survey*

Beneficiaries were asked to rate their satisfaction with the Community Chaplaincy Project at all three timeframes. Beneficiaries were required to rate their satisfaction on a scale 1 – 5 (1 being very dissatisfied, 2 being slightly dissatisfied, 3 being satisfied, 4 being very satisfied and 5 being extremely satisfied). These scores are self-reported by the beneficiary during a discussion with the

assessment Community Chaplain, and not their assigned Community Chaplain in an attempt to prevent, or at least reduce, any pressure to respond in a biased manner.

### *Narrative Interviews*

Interviews were conducted with Community Chaplains, Beneficiaries from pre and post release time frames, and with representatives from other services within the prison and from external agencies.

Conducting interviews with Community Chaplains provided an insight into how well the organisations are communicating, how well they are working together, offers personal opinion of the programme from those directly involved at ground level, and promotes ideas as to how to improve the programme, its organisation and its delivery. Offender interviews give insight into personal opinion of the programme and its effects on behaviour change, levels of motivation and interaction with Chaplains. Interviews with representatives gave insight into how well the project was integrated within the prison as a whole and with other agencies, levels and quality of interagency communication, and external, possibly more objective impressions regarding the efficacy, quality and necessity of the project.

### *Data Sources*

A range of primary and secondary data collection techniques were used for the current evaluation. Quarterly logs and the intervention record provided by the Community Chaplaincy detailed offenders who have been identified and interviewed prior to release; relevant information was extracted from these records (referred to as Screening Record for the purpose of the evaluation). These provided measures of both Beneficiaries' (those who accepted offers of support) and decliners' (those who declined offers of support) demographics, return rates, screening information regarding employment, accommodation and substance use, support available, in addition to other information not utilized within the current evaluation. These logs are recorded in Microsoft Excel. In addition to intervention records, more detailed information is recorded for Beneficiaries only. Firstly, hours of contact broken down by quarter. Both the number of contacts had between each of the three Chaplains and each Beneficiary and the length of each contact is recorded. Secondly, the Master Record of all Beneficiaries is kept. This includes all relevant information about each beneficiary (except hours of contact) such as demographics, offending/sentencing information, OASys scores, assessment dates, assigned Chaplain, lifestyle variables (pre, on and post release scores and priorities for each of the 8 domains, and levels of Chaplaincy intervention pre-on release and on-post release for each domain), satisfaction,

engagement (measuring whether or not the offender completed the programme or withdrew, including when they withdrew and any relevant circumstances for withdrawing). All lifestyle outcomes were collected during pre-release, on release and post-release interviews with Beneficiaries by the assessment Community Chaplain, and not the Beneficiaries' assigned Community Chaplain, in an attempt to prevent, or at least reduce, any pressure to respond in a biased manner. All lifestyle domain scores, domain priorities, levels of Community Chaplaincy Intervention scores and satisfaction scores were self-reported during these interviews.

Interviews were also carried out under informed consent between May 2007 and December 2007. These included three interviews with the Community Chaplains and one with the Prison Chaplain, eight with various representatives, and eight with Beneficiaries. The representatives included three from outside agencies (one DIP worker, and two resettlement workers) and five within the prison (one probation officer specifically responsible for public protection issues, one senior probation manager, one drug intervention worker, one counsellor, and the prison Governor.) Beneficiary interviews included six interviews with Beneficiaries pre release, and two interviews post release. Excerpts were extracted from these interviews within the process evaluation in order to provide an understanding of the how the project operates, and to provide opinion and observation of project delivery from various viewpoints.

### *Methodological Limitations*

There were few limitations, which meant that most of the intended programme of work could be carried out. However, the following points should be considered

All SPIDER assessments are completed by offenders, providing a subjective assessment of needs and wants over time. No objective measures of progress are implemented at any time frame. Although the current offender-led method of assessment provides insight into the offender's perception of their progress, it does not necessarily provide an adequate monitoring basis for those not involved with the offenders at ground-level (e.g. NOMS or probation). This is currently not completed due to financial and time constraints.

Reconviction rates were only measured via returns to HMP Swansea, and therefore is not an accurate measure of re-conviction. Therefore, offenders who have been reconvicted and detained at another prison will count as non-returners within the current evaluation. Returns data was also only available during the assessment period, resulting in a very short-term follow up period (average of approximately 40 weeks, although this varied greatly amongst Beneficiaries). Without

long-term follow up data (two years or more) from those completing the programme, it is difficult to say whether the programme is successful in reducing re-offending over time. It must be noted that the voluntary sector may be committed to primary objectives and a value base not necessarily aligned to NOMS target of reducing re-offending (Clinks, Unpublished).

Information regarding comparable offender resettlement programmes within the area was not available. Therefore re-offending rates could not be examined in this way. As a result, within this evaluation the programme cannot be deemed more or less effective than other similar resettlement programmes within the Swansea area.

Interviews carried out with offenders could only be conducted with those who were currently taking part in the Community Chaplaincy Programme, or with those who had completed the programme. It was not possible to interview offenders who had withdrawn from the programme. This means that the offender interview data may have been biased towards reporting more favourable outcomes, as no offenders for whom the intervention was not successful were interviewed.

The process evaluation was limited due to several factors. Firstly, it was not possible to directly observe the intervention provided by the Community Chaplaincy, or the assessment process, due to reasons of confidentiality. Secondly, observations of inter and intra organisational meetings were not possible due to time restrictions, confidentiality and funding restraints. Therefore, the process evaluation relied upon an examination of data recording, narrative interviews with Chaplains, Beneficiaries and Representatives and data regarding the frequency of inter and intra organisational meetings.



### 3. Programme Administration

The current sample includes those offenders taking part in the Community Chaplaincy Programme at HMP Swansea (Beneficiaries) within the evaluation period. The duration of the current evaluation period was from October 2006 to the end of March 2008. Total figures for Beneficiaries during this timeframe include 7 offenders who have been assessed pre-release only, 40 offenders who have been assessed pre and on release and 96 offenders assessed pre, on and post-release, with a total of 143 Beneficiaries. There was a fairly even distribution of cases between the two Chaplains responsible for key working (one taking 52.4% of cases and the other 46.2% of cases). The Chaplain responsible for assessment also took responsibility for the remaining cases (1.4%).

#### 3.1. Uptake of support

725 offenders were identified for interviewing prior to release. Of these offenders, 143 took up offers of some form of assistance, meaning that 19.7% of offenders offered support accepted it. Detailed information regarding reasons for declining support is available for 292 offenders who declined support, and can be found in table 1.

Table 1. Reasons for Declining Support

	Frequency	%
Has Family Support	191	65.4
Self Reliant	54	18.5
Another Sentence	5	1.7
Community Agency Giving Help	27	9.2
Probation Supporting	15	5.1
Total	292	100.0

#### 3.2. Hours of Contact

Hours of contact are available for 132 of the Beneficiaries. This is because the recording of this information only began in February 2007 at the request of this evaluation, and was therefore only available for the last 60 weeks of the evaluation period. This has several implications, firstly data is missing entirely for 11 Beneficiaries, and secondly it means that the hours of contact recorded may be less than was received by Beneficiaries involved in the project in the initial part of the evaluation period (October 2006 – February 2007). Due to this fact, when examining the breakdown of hours, Beneficiaries who received no contact at the different timeframes were excluded from the analysis as it cannot be assumed that they actually received no contact. It must also be remembered that the Beneficiaries about whom data was collected had been receiving

Community Chaplaincy support for a varied amount of time, and were at various stages of their resettlement between custody and community, therefore some of the variation in the amount of contact data may reflect this rather than the definitive amount of contact from screening to post release.

As illustrated in Table 2 Beneficiaries received on average a total of 16.08 contacts (lasting a total of 25.5 hours) from the Community Chaplaincy. The table below shows the total mean number of contacts and mean number of hours spent with Beneficiaries, along with the standard deviations of these means, the number of people in each group and the minimum and maximum values (the range).

Table 2. Mean Number of Total Contacts and Hours of Contacts

	N	Minimum	Maximum	Mean	Standard Deviation
Number of Contacts	132	1	105	16.08	14.67
Number of Hours Spent	132	0.5	201.5	25.50	30.91

It can be seen from the table below that Beneficiaries received more hours post release compared to pre-release (13.44 hours and 14.81 hours respectfully). This is positive as it shows Beneficiaries received increased support once they transitioned from custody to the community, where they arguably would have needed extra support to put their resettlement plans in place. Table 3 shows the average number of contacts and hours spent with Beneficiaries, pre release, post release and (if the beneficiary returned to custody) on return.

Table 3. Mean Number of Contacts and Hours of Contacts Broken down by Timeframe

	N	Minimum	Maximum	Mean	Standard Deviation
Number of Pre-Release Contacts	116	1	35	10.41	6.25
Hours Spent Pre-Release	116	1	53	13.44	8.43
Number of Post-Release Contacts	119	1	82	7.34	11.88
Hours Spent Post Release	119	0.5	173.5	14.81	28.58
Number of Return Contacts	20	1	5	2.05	1.19
Hours Spent Return	20	1	6	2.2	1.36

### *3.3. Completion and Attrition Rates*

Table 4 shows the frequencies and percentages of all Beneficiaries who completed the programme (completers) and for those who did not complete the programme (non-completers). These figures reveal a 67.6% retention rate (completers), and a 32.4% attrition rate (non-

completers). An examination of those that did not complete the programme reveals that only 2.1% withdrew pre-release meaning that the remaining non-completers (24.6%) who withdrew post release still received support for the 6 weeks prior to their release. A total of 2.1% (N = 3) offenders did not complete the programme due to being either transferred prior to release or being deported. This means that potentially, these offenders may have completed the programme, and may have addressed their offending behaviour given the opportunity to continue the programme. Finally, unfortunately two Beneficiaries (1.4%) died during the evaluation period.

Table 4. Completion and Attrition Rates

	F	%
Completed Programme	96	67.6
Withdrew pre-release	3	2.1
Withdrew post-release	35	24.6
Transferred pre-release	2	1.4
Lost contact due to ECL	3	2.1
Deported	1	0.7
Deceased	2	1.4
Total	142	100.0

### *3.4. Supporting Agencies*

As can be seen in Table 5, the majority of Beneficiaries had no supporting agencies (in relation to substance misuse issues) other than Community Chaplaincy (47.2%), although those being supported by Community Chaplaincy were significantly more likely to have other agencies involved than those who declined support, of whom 63.1% were recorded as having no supporting agencies, ( $\chi^2 = 11.141$ ,  $df = 1$ ,  $p = .001$ ). The table below shows the frequencies and percentages of Beneficiaries and decliners who were supported by other agencies.

Table 5. Supporting Agencies for Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
CARAT	64	45.1	170	31.3
Rehab	6	4.2	5	0.9
Outside Agency	5	3.5	26	4.8
None	67	47.2	343	63.1
Total	142	100.0	544	100.0

Beneficiaries were, however, less likely to have informal support structures in place than those who did not request support from Community Chaplaincy, as shown in the table 6. 60.1% of decliners had the support of their family, compared to only 0.7% of Beneficiaries. The table below shows the frequencies and percentages of Beneficiaries and decliners by support available.

Table 6. Support Available for Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
Chaplaincy	140	98.6	39	7.2
Probation	0	0.0	24	4.4
Family Support	1	0.7	327	60.1
Self-Reliant	0	0.0	99	18.2
Other Support	1	0.7	55	10.1
Total	142	100.0	544	100.0

## 4. Baseline Characteristics

### 4.1. Demographics

#### *Age*

There was a relatively high proportion of younger offenders within the project, the mean age of Beneficiaries on their estimated date of release was 29.32 years old (S.D. = 7.04), with the majority of Beneficiaries falling into the 26 - 35 age category (42%) and 79.8% being under 35. The table below shows the mean age of Beneficiaries, the standard deviation of the mean, the number of people included and the minimum and maximum values (the range).

Table 7. Mean Age of Beneficiaries

	N	Minimum	Maximum	Mean	Standard Deviation
Age	143	21	51	29.32	7.04

The table below shows the frequencies and percentages of Beneficiaries falling into different age categories.

Table 8. Age Categories of Beneficiaries

	Frequency	Percent
18 – 25	54	37.8
26 – 35	60	42
36 – 45	24	16.8
46 – 55	5	3.5
Total	143	100

Comparing the Beneficiaries to offenders who were approached prior to release but declined any support from the Community Chaplaincy, it appears that the Beneficiaries (mean age = 29.32) are slightly younger than the decliners (mean age = 31.37, SD = 8.51).

#### *Ethnicity*

The vast majority of Beneficiaries were White British (95.8%), which generally reflects the overall population at HMP Swansea where a snap shot<sup>1</sup> revealed that 90.67% of offenders are White British, although does suggest that minority ethnic groups are slightly under represented within the Project. Comparing the Beneficiaries to offenders who were approached prior to release but

<sup>1</sup> Snap-shot at HMP Swansea of offenders' demographics and sentences taken at 10.08am on 15<sup>th</sup> May 2008

declined any support from the Community Chaplaincy, it again appears that minority ethnic groups may be slightly under represented, 93.5% of decliners being White British compared to 95.8% of Beneficiaries. The table below shows the frequencies and percentages of Beneficiaries from different ethnic backgrounds.

Table 9. Ethnicity of Beneficiaries

	F	%
White British	137	95.8
White Other	1	0.7
Mixed White & Black Caribbean	1	0.7
Mixed Other	1	0.7
Asian Bangladeshi	1	0.7
Black African	1	0.7
Chinese	1	0.7
Total	143	100.0

#### *Religion*

The majority of the sample had no religion (72.7%), with another 24.48% being Christian. A snapshot of HMP Swansea population showed that 71.05% of offenders stated they had no religion and 20.57% were Christian. Again, the Beneficiaries' religion statistics almost mirror those of the prison population, perhaps with Christianity being slightly over-represented. The table below shows the frequencies and percentages of Beneficiaries from different religions.

Table 10. Religion of Beneficiaries

	F	%
Agnostic	2	1.4
Baptist	1	0.7
Buddhist	1	0.7
Church of England	18	12.6
Church in Wales	2	1.4
Church of Scotland	1	0.7
Muslim	1	0.7
No Religion	104	72.7
Other Christian Religion	1	0.7
Pentecostal	1	0.7
Protestant	1	0.7
Roman Catholic	10	7
Total	143	100.0

*Disability*

7% of Beneficiaries stated they were registered disabled.

*4.2. Offending History*

In the absence of accessible rich data, the offending history of the Beneficiaries is surmised from the recorded index offences, length of sentence and number of previous sentences.

Table 11 shows the index offences broken down into categories. It must be remembered that index offences are not necessarily the only charge that has resulted in the prison sentence, and that some of these offences do not fit neatly into the categories. For example, possession of an offensive weapon has been included in the violent category along with more obvious crimes such as assault and wounding. Although the category includes reckless driving and arson, the majority of the offences categorised as miscellaneous are of non-compliance, such as breaching sentences, failure to surrender to an officer, breaking restraining orders and Section 40 (returning to custody within the period of time a prison sentence is still being served in the community i.e. what would be the probation period for an offender convicted of more than a 12 month sentence). Recorded offences in this category offer little insight into the type of crime actually perpetrated.

*Index Offence*

Table 11. Index Offences of Beneficiaries

	F	%
Violent	42	29.4
Acquisitive	47	32.9
Substance Related	11	7.7
Miscellaneous	43	30.1
Total	143	100.0

The table above shows the frequencies and percentages of Beneficiaries serving sentences for different index offences. It was not possible to compare the distribution of index offences directly with the HMP Swansea prison population as a whole.

*Length of Current Sentence*

The table below shows the frequencies and percentages of Beneficiaries serving different lengths of sentence.

Table 12. Length of Current Sentence

	F	%
Less than 6 Months	51	35.7
6 Months less than 12 Months	32	22.4
12 Months less than 2 Years	33	23.1
2 Years less than 3 Years	12	8.4
3 Years less than 4 Years	9	6.3
4 Years less than 10 Years	6	4.2
10 Years less than life	0	0.0
Life	0	0.0
Total	143	100.0

Table 13. Mean Length of Current Sentence

	N	Mean	Standard Deviation
Length of Current Sentence in Months	143	14.19	15.55

The table above shows the mean length of current sentence being served by Beneficiaries, along with the standard deviation. Although the mean sentence length was 14.19 months, 58.1% of the sample were serving less than 12 months. Comparisons to a snap shot of offenders at HMP Swansea indicates that the Beneficiaries are not-representative of the prison as a whole in regards to their sentence lengths, the majority of Beneficiaries were serving sentences of less than 12 months (58.1%), while only 25.9% of offenders at HMP Swansea were serving sentences this short, with the majority serving between 12 months less than 3 years (36.6%) and 13.1% serving over 10 years or life. This may well be due to the fact that offenders serving short sentences are not provided with the same level of statutory involvement or subject to statutory supervision on release, compared with offenders serving longer sentences. Therefore, short sentence offenders rely upon non-statutory services to support them through transitions between custody and community, suggesting that the Community Chaplaincy Project is filling the current gap in service provision for short term offenders.



*Number of previous sentences over the age of 21*Table 14. Number of Previous Sentences over the age of 21

<u>Number of Previous Sentences</u>	<u>F</u>	<u>%</u>
0	35	24.5
1	24	16.8
2	16	11.2
3	16	11.2
4	10	7.0
5	8	5.6
6	6	4.2
7	6	4.2
8	1	0.7
9	2	1.4
11	2	1.4
13	2	1.4
14	1	0.7
17	1	0.7
Unknown	13	9.1
<b>Total</b>	<b>143</b>	<b>100.0</b>

The table above shows the frequencies and percentages of Beneficiaries with different numbers of previous sentences. The average number of previous sentences was 2.82, with 24.5% of Beneficiaries having no previous convictions, 51.8% having between 1 and 5 previous convictions, and 23.7% having 6 or more. The table below shows the mean number of previous sentences had by Beneficiaries, along with the standard deviation.

Table 15. Mean Number of Previous Sentences over the age of 21

	<u>N</u>	<u>Mean</u>	<u>Standard Deviation</u>
<u>Number of Previous Sentences over the age of 21</u>	130	2.82	3.243

*OASys Scores and Risk Assessments*Table 16. OASys Scores for Beneficiaries

	<u>N</u>	<u>Minimum</u>	<u>Maximum</u>	<u>Mean</u>	<u>Standard Deviation</u>
<u>OASys Score</u>	119	9	168	103.59	33.85

The table above shows the mean OASys score of Beneficiaries, the standard deviation of the mean, the number of people included and the minimum and maximum values (the range). The OASys scores for the Beneficiaries varied widely, as can be seen from the table 16. OASys risk assessments were completed by Probation for 83.22% of Beneficiaries, and classified 63% of them as high risk. The table below shows the frequencies and percentages of Beneficiaries classified as being high, medium or low risk.

Table 17. OASys Risk Assessment Scores for Beneficiaries

	F	%
Low Risk	8	6.7
Medium Risk	36	30.3
High Risk	75	63.0
Total	119	100.0

The application of the risk principle in relation to effective intervention proposes that high-risk offenders benefit most from intensive interventions, while low risk offenders benefit most from low intensity intervention. However, in the current sample a correlation revealed that there was no relationship between OASys risk assessment classification and total number of hours ( $r = 0.29$ ,  $n = 111$ ,  $p = .766$ ) or total number of contacts ( $r = 0.101$ ,  $n = 111$ ,  $p = .293$ ). This means that the risk principle has not been met.

#### *4.3. Differences between Completers and Non-Completers*

It was considered that the demographic and offence history information for Beneficiaries may have an effect on the completion rate (and therefore in part the success rate) of the programme, and that there may be a specific type of offender withdrawing from the programme which in turn may have further implications for working practise. Therefore a comparison has been conducted to examine any differences (in regards to demographics and offending histories) between Beneficiaries who completed the programme (completers) and those who withdrew (non-completers).

#### *Age*

Table 18. Mean age of Completers and Non-Completers

	N	Minimum	Maximum	Mean	Standard Deviation
Completers	96	21	51	29.4	7.21
Non-Completers	38	21	48	29.4	7.21

The table above shows the mean age of completers and non-completers, the standard deviation of the mean, the number of people in each group and the minimum and maximum values (the range). From this table it is clear that the likelihood of completing the programme is not dependant on age, since the average age of both groups was identical (29.4). Given that younger offenders are historically more difficult to engage in intervention programmes, and do require more support in addressing issues of resistance, this finding represents a success of the Community Chaplaincy.

### *Ethnicity*

Table 19. Ethnicity of Completers and Non-Completers

	Non-Completers		Completers	
	F	%	F	%
White British	38	100	137	95.8
White Other	0	0	1	0.7
Mixed White & Black Caribbean	0	0	1	0.7
Mixed Other	0	0	1	0.7
Asian Bangladeshi	0	0	1	0.7
Black African	0	0	1	0.7
Chinese	0	0	1	0.7
Total	38	100	143	100

The table above shows the frequencies and percentages of completers and non-completers from different ethnic backgrounds. Again, it does not appear that completers and non-completers differ in regards to ethnicity, suggesting that the Community Chaplaincy is successfully engaging with all ethnic groups.

### *Religion*

Table 20. Religion of Completers and Non-Completers

	Non-Completers		Completers	
	F	%	F	%
No Religion	29	76.3	68	70.8
Christian	8	21.1	27	28.1
Buddhist	0	0.0	1	1
Muslim	1	2.6	0	0
Total	38	100	96	100

The table above shows the frequencies and percentages of completers and non-completers from different religions. Again, it does not appear that completers and non-completers differ hugely in regards to religion, with slightly more Beneficiaries who are non-religious withdrawing from the

programme and slightly more Beneficiaries who are Christian completing the programme. It is difficult to compare differences between other religions in regards to programme completion due to such small frequencies.

### *Disability*

Table 21. Numbers of Completers and Non-Completers Registered as Disabled

	Non-Completers		Completers	
	F	%	F	%
Yes	4	10.5	6	6.3
No	34	89.5	90	93.8
Total	38	100.0	96	100.0

The table above shows the frequencies and percentages of completers and non-completers who are registered disabled. As can be seen from this table, there does not appear to be a huge difference between the groups, with slightly more Beneficiaries registered as disabled not completing the programme (10.5%) compared to those who did complete the programme (6.3%). Because there are so few Beneficiaries registered disabled, it is difficult to make significant comparisons.

### *Offending History*

#### *Index Offence*

Table 22. Index Offence of Completers and Non-Completers

	Non-Completers		Completers	
	F	%	F	%
Violent	11	28.9	29	30.2
Acquisitive	17	44.7	53	55.2
Substance Related	1	2.6	7	7.3
Miscellaneous	9	23.7	7	7.3
Total	38	100	96	100

The table above shows the frequencies and percentages of completers and non-completers who are serving sentences for different index offences. There does appear to be differences between the two groups in regards to index offence, with more completers serving sentences for violent crimes (completers =30.2%; non-completers = 28.9%), acquisitive crimes (completers =55.2%; non-completers =44.7%) and substance related crimes (completers =7.3%; non-completers =2.6%) compared to non-completers and more non-completers serving sentences for miscellaneous crimes (completers = 7.3%; non-completers = 23.7%) compared to completers. A test of significance could not be carried out do to the small numbers of Beneficiaries in certain categories. However, it does appear that people who are serving sentences for miscellaneous

crimes, such as those of non-compliance, are more likely to withdraw from the programme. This suggests that the Community Chaplaincy may not be being responsive to the differing levels of motivation, types of need, ability and learning style of offenders who are serving sentences for crimes classified as miscellaneous for the purpose of this evaluation.

*Length of Current Sentence*

Table 23. Mean Length of Sentence for Completers and Non-Completers

	N	Minimum	Maximum	Mean	Standard Deviation
Completers	96	1	84	14.73	15.3
Non-Completers	38	3	96	13.24	16.86

The table above shows the mean length of current sentence for completers and non-completers, the standard deviations of the means, the number of people included in each group and the minimum and maximum values (the range). Beneficiaries who completed the programme appear to be serving slightly longer sentences (mean = 14.73) in comparison to Beneficiaries who don't complete the programme (mean = 13.24), however, this difference is not significant ( $t = -0.494$ ,  $df = 132$ ,  $p = .622$ )

*Number of previous sentences*

Table 24. Mean Number of Previous Sentences for Completers and Non-Completers

	N	Minimum	Maximum	Mean	Standard Deviation
Completers	88	0	14	2.43	2.96
Non-Completers	34	0	17	4.24	3.81

The table above shows the mean number of previous sentences for completers and non-completers, the standard deviations of the means, the number of people included in each group and the minimum and maximum values (the range). Beneficiaries who completed the programme appear to have less previous convictions (mean = 2.43) compared to those who did not complete the programme (mean = 4.24). An independent t-test found this difference to be significant ( $t = 2.779$ ,  $df = 120$ ,  $p = 0.006$ ). It therefore appears that non-completers may represent a more prolific offending group compared to completers. It could be assumed that reasons associated with their withdrawal from the programme may include factors such as motivation, increased ingrained criminal and obstructive attitudes and behaviours and more extreme criminogenic needs. This, coupled with the growing body of evidence about the impact of criminogenic needs, such as lack of employment, unstable accommodation and substance misuse, on reoffending

(Home Office, 2005), highlights the need for an intensive response to this priority group of offenders. Therefore, it is essential that extra time and resources are directed at engaging these prolific offenders. This may include further training from staff to increase competencies at engaging with more difficult and criminally entrenched offenders to maximise treatment effects, alongside providing more time to build up trusting relationships with these offenders and providing longer timeframes in which to tackle the offenders' needs.

#### *Risk*

Table 25. OASys Risk Classifications for Completers and Non-Completers

	Non-Completers		Completers	
	F	%	F	%
Low	0	0.0	7	8.5
Medium	10	32.3	23	28.0
High	21	67.7	52	63.4
Total	31	100.0	82	100.0

The table above shows the frequencies and percentages of completers and non-completers with different OASys risk classifications. It appears that non-completers have higher risk classifications compared to completers, with no non-completers being classified as low risk compared to 8.5% of completers and 67.7% of non-completers being classified as high risk compared to 63.4% of completers.

#### *4.4. Screening Statistics*

At screening, Beneficiaries were asked to provide information about their accommodation, employment and substance misuse status. The tables below detail the frequencies and percentages of Beneficiaries with different statuses in these three areas.

Table 26. Accommodation Status of Beneficiaries at Screening

	F	%
Has Accommodation	84	59.2
Does not have Accommodation	1	0.7
Applying	45	31.7
Homeless	12	8.5
Total	142	100

Table 27. Employment Status of Beneficiaries at Screening

	F	%
Employed	19	13.4
No Job	1	0.7
Job Seekers	73	51.4
Incapacity Benefit	49	34.5
Total	142	100.0

Table 28. Substance Misuse Status of Beneficiaries at Screening

	F	%
No Substance Misuse	35	24.8
Issue with Drugs	62	44.0
Issue with Alcohol	23	16.3
Issue with Drugs and Alcohol	21	14.9
Total	141	100.0

It is apparent from these tables that Beneficiaries are most likely to have accommodation (59.2%), have no employment (86.6%) and have substance misuse issues (75.2%).

## *5. Beneficiary Outcomes*

As well as assessing re-offending rates (via returns to HMP Swansea), this report also analyses outcomes in other relevant areas of offenders' lives.

### *5.1. Individual Outcome Monitoring Output*

This section presents the changes in 8 domains (Accommodation, Education training and employment, Health, Substance Use, Relationships, Use of Time, Attitudes thinking and behaviour and Engagement) of the Beneficiaries' lives. For the following comparisons, it must be noted that not all those in the sample had data for all time-points. Sample numbers (N) are as follows: pre-release N=143, on release N=136, post release N=96, except for post release engagement with Chaplaincy data, where N=95. Pre-release and post-release means are statistically compared, as the farthest time difference and therefore hopefully the more lasting effect than changes apparent on-release.

Although it could be expected that scores might be higher on-release than post release, as the offender is still in a controlled environment and has not had to put his new lifestyle to the test, it was found that the means for all scores increased at each assessment, which reflects positively on Community Chaplaincy as both maintaining and increasing its positive input in the more challenging post-release environment. It must be remembered when looking at these improvements, that no comparisons have been made with prisoners who have not been a beneficiary of Swansea Community Chaplaincy. Furthermore, this report does not take into account involvement with other agencies that are also working towards goals measured by Chaplaincy Outcome Monitoring, and may therefore be responsible for positive changes. However, the evidence as shown in section 5.1.8. (Engagement) demonstrates that Beneficiaries are engaging deeply with the Community Chaplaincy service, and this arguably justifies an assumption that the programme is playing a major part in these life changes.



### 5.1.1. Accommodation

Table 29. Accommodation across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
NFA with no local connection	7	4.9	5	3.7	0	0.0
NFA with local connection	51	35.7	11	8.1	2	2.1
Temporary accommodation	15	10.5	42	30.9	16	16.7
Unstable accommodation in wrong area	3	2.1	2	1.5	0	0.0
Stable accommodation in wrong area	4	2.8	7	5.1	3	3.1
Return to family home	38	26.6	45	33.1	39	40.6
Stable short term accommodation	5	3.5	3	2.2	15	15.6
Stable long term accommodation	20	14.0	21	15.4	21	21.9
Total	143	100.0	136	100.0	96	100.0

As illustrated in Table 29 and Figure 1 the most common accommodation status pre-release was having ‘no fixed abode with a local connection to returning area’ (35.7%) whilst the most common on and post release accommodation status was ‘returning to the family home’ (33.1% and 40.6% respectively). Thus indicating a general improvement in accommodation status during engagement in the Community Chaplaincy Project.

Figure 1. Accommodation across Time

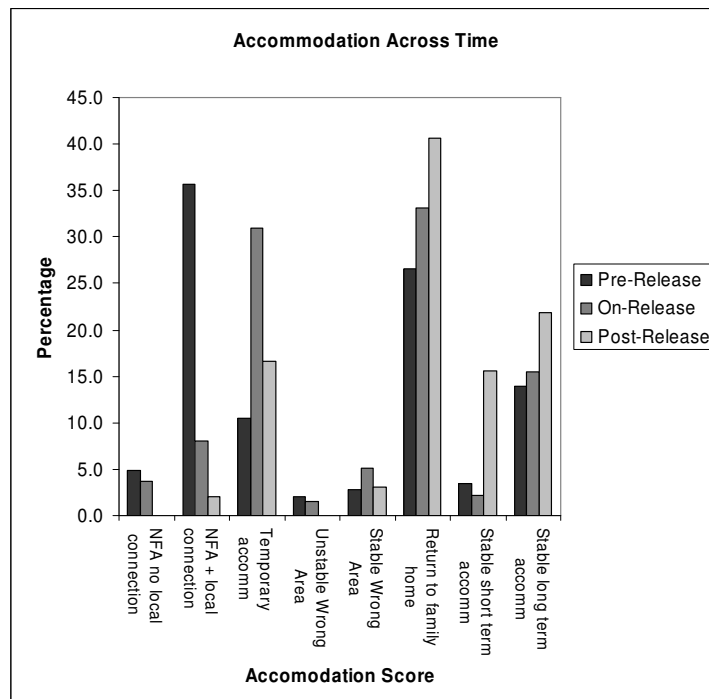


Table 30. Mean Score for Accommodation

	N	Mean	Std. Deviation
Pre Release Accommodation	143	4.26	2.36
On Release Accommodation	136	4.82	2.09
Post Release Accommodation	96	5.98	1.71

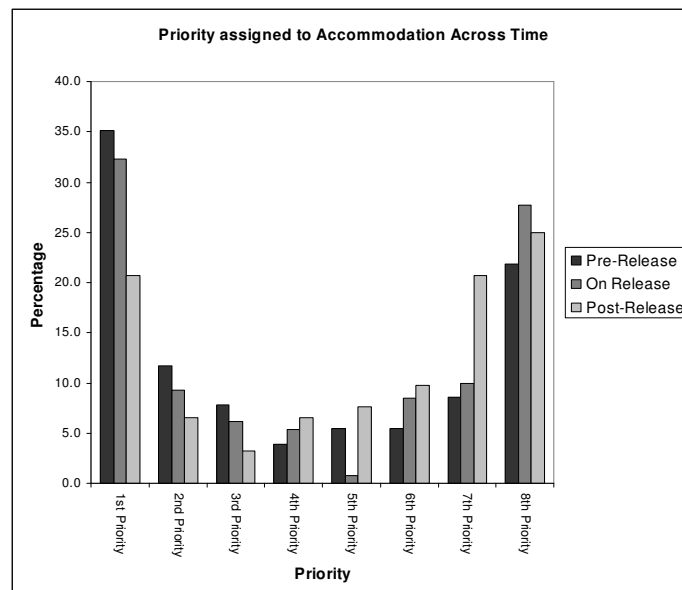
Lower scores indicate more problematic accommodation status. There were increases in mean accommodation scores between all interviews, with the mean score for accommodation increasing by a total of 1.72 points along the axis between the pre and post release interviews. This improvement between pre and post release accommodation scores was significant ( $t = -6.414, df = 95, p < .001$ ).

*Priority Assigned to Accommodation*

Table 31. Priority assigned to Accommodation across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	45	35.2	42	32.3	19	20.7
2nd Priority	15	11.7	12	9.2	6	6.5
3rd Priority	10	7.8	8	6.2	3	3.3
4th Priority	5	3.9	7	5.4	6	6.5
5th Priority	7	5.5	1	0.8	7	7.6
6th Priority	7	5.5	11	8.5	9	9.8
7th Priority	11	8.6	13	10.0	19	20.7
8th Priority	28	21.9	36	27.7	23	25.0
Total	128	100.0	130	100.0	92	100.0

Figure 2. Priority Assigned to Accommodation across Time



As illustrated in Table 31 and Figure 2 35.2% of Beneficiaries rated Accommodation as their first priority pre-release (mean = 3.93), which fell to 20.7% (mean = 5.12) post release (see Table 32 for Means and Standard Deviations). This suggests that over time Beneficiaries no longer felt that their accommodation needs were as important. When considered alongside the significant improvement in accommodation status over time, it is plausible to conclude that reductions in priority of accommodation are due to improvement in accommodation status rather than other needs becoming relatively more important.

A Paired Samples T-Test found that the mean priority score was significantly higher pre-release than post release ( $t = -3.67$ ,  $df = 82$ ,  $p < .001$ ), further supporting the demonstrated improvement in Accommodation status.

Table 32. Mean Priority for Accommodation across Time

	N	Mean	Std. Deviation
Priority of Accommodation Pre-Release	128	3.93	2.88
Priority of Accommodation On Release	130	4.37	2.99
Priority of Accommodation Post-Release	92	5.12	2.71

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was a negative correlation between the total improvement in accommodation status and the average priority assigned to accommodation (e.g. Beneficiaries who rated accommodation as a higher priority showed the biggest improvement in accommodation status) ( $r = -4.92$ ,  $n = 83$ ,  $p < .001$ ). This firstly suggests that Beneficiaries 'wants' are affecting outcomes, and secondly it can be inferred that intervention has targeted the areas highlighted as Beneficiaries' priority.

### *Community Chaplaincy Intervention*

Alongside assessments regarding improvements in accommodation status, data was also collected to assess the amount of improvement Beneficiaries attributed to their engagement in the Community Chaplaincy Project. Beneficiaries were asked to assign the level of Community Chaplaincy Project intervention to improvements between their pre-release and on-release scores and their on-release and post-release scores.

In regards to assistance within the Accommodation domain, 50% (pre-on release) and 64.6% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy Project had provided level one intervention pre-on release (35.3%) and level three intervention on-post release (35.3%) whilst

only 1.5% (pre-on release) and 8.8% (on-post release) felt that the Community Chaplaincy Project had provided level five assistance. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 2.18 pre - on release and at level 2.47 on - post release.

Table 33. Level of Community Chaplaincy Intervention across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	24	35.3	11	32.4
Level 2	19	27.9	5	14.7
Level 3	15	22.1	12	35.3
Level 4	9	13.2	3	8.8
Level 5	1	1.5	3	8.8
Total	68	100.0	34	100.0

#### *Summary of Accommodation*

There were significant improvements in Accommodation status from pre to post release, with the majority of offenders having stable accommodation on release. This is arguably the most important finding in regards to Accommodation, since it has been highlighted as a criminogenic need in previous research, and improvements are therefore assumed to be associated with reductions in re-offending. In addition it was found that most offenders rated accommodation as one of their top priorities, and that the level of prioritisation reduced over time, which was assumed to be due to the significant improvements in accommodation status over time. In addition, it was found that there was a positive relationship between priority and degree of improvement (top priorities related to bigger improvements) which suggests that support was focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in accommodation status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.2. Education, Training and Employment

Table 34. Education Training and Employment across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Unskilled, Unmotivated, Awaiting benefits	19	13.3	13	9.6	0	0.0
No finance to improve ETE	1	0.7	1	0.7	14	14.6
Desire to work (ETE) but no confidence	48	33.6	38	27.9	14	14.6
Lost job due to coming to prison	11	7.7	8	5.9	1	1.0
Has qualifications / experience but no job (ETE)	28	19.6	17	12.5	4	4.2
Confidence to work – actively seeking work (ETE)	14	9.8	34	25.0	39	40.6
Has potential job (ETE) to go to on out	11	7.7	14	10.3	6	6.3
Full time employment (ETE)	11	7.7	11	8.1	18	18.8
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>96</b>	<b>100.0</b>

As illustrated in Table 34 and Figure 3 the most common Education, Training and Employment (ETE) status pre and on release was having ‘a desire to work (ETE), but no confidence’ (33.6% and 27.9% respectively) whilst the most common post release ETE status was ‘Confidence to work, actively seeking work (ETE)’ (40.6%). There was also a big improvement in the numbers of people with either a potential job or secured full time employment comparing pre-release scores (15.4%) and post-release scores (25.1%). Thus indicating a general improvement in ETE status during engagement in the Community Chaplaincy Project.

Figure 3. Education, Training and Employment across Time

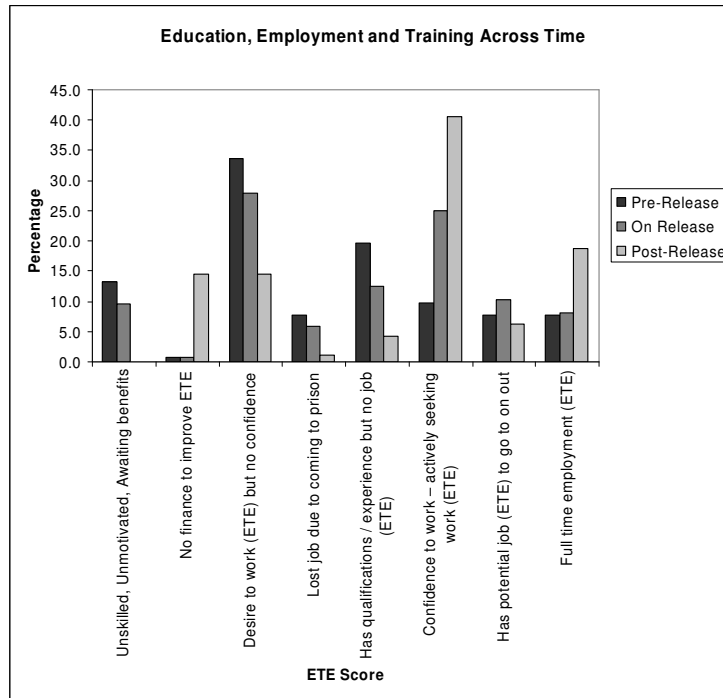


Table 35. Mean Scores for ETE across Time

	N	Mean	Std. Deviation
Pre Release ETE	143	4.18	2.02
On Release ETE	136	4.68	2.02
Post Release ETE	96	5.21	2.30

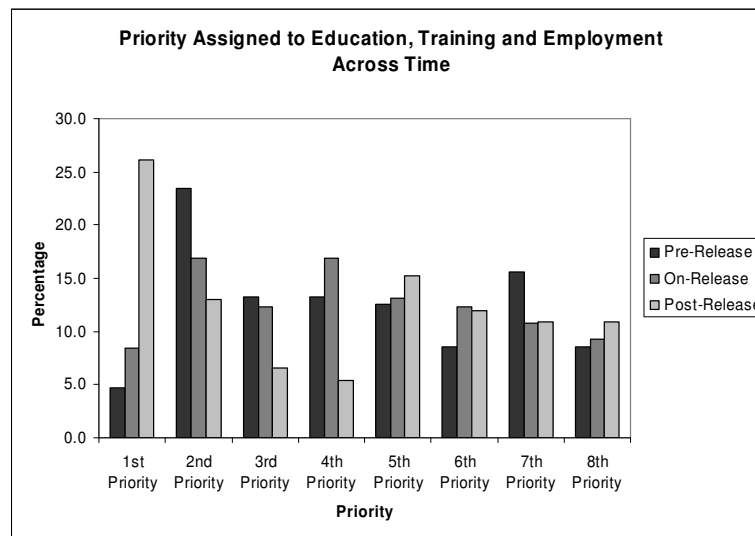
High scores indicate less problematic ETE status. There were increases in mean ETE scores between all interviews, with the mean score for ETE increasing by a total of 1.03 points along the axis between the pre and post release interviews. This improvement between pre and post release ETE scores was significant ( $t = -4.355$ ,  $df = 95$ ,  $p < .001$ ).

*Priority Assigned to ETE*

Table 36. Priority assigned to Education, Training and Employment across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	6	4.7	11	8.5	24	26.1
2nd Priority	30	23.4	22	16.9	12	13.0
3rd Priority	17	13.3	16	12.3	6	6.5
4th Priority	17	13.3	22	16.9	5	5.4
5th Priority	16	12.5	17	13.1	14	15.2
6th Priority	11	8.6	16	12.3	11	12.0
7th Priority	20	15.6	14	10.8	10	10.9
8th Priority	11	8.6	12	9.2	10	10.9
Total	128	100.0	130	100.0	92	100.0

Figure 4. Priority assigned to Education, Training and Employment across Time



As illustrated in Table 36 and Figure 4 4.7% of Beneficiaries rated ETE as their first priority pre-release which increased to 26.1% post release. The mean priority for ETE starts at position 4.18 pre-release and reduces to position 5.21 post-release (see Table 37 for Means and Standard Deviations). This suggests that although on average more people felt ETE needs reduced over time, a large frequency of Beneficiaries felt their education, training and employment needs were of primary importance. Due to the fact that across time ETE scores showed significant improvement, it appears that this increased priority was not due to lack of progress in this area, but perhaps because of their changing needs moving from the prison and resettling into society. This suggests that particular attention should be paid to ETE needs on and post release. The increase shown in priority for ETE over time could also be partly due to improvements in other domains that were initially given higher priorities, such as accommodation, resulting in these domains no longer being Beneficiaries' main areas of concern.

Table 37. Mean Priority Assigned to ETE across Time

	N	Mean	Std. Deviation
Priority of ETE Pre-Release	128	4.37	2.15
Priority of ETE On Release	130	4.35	2.13
Priority of ETE Post-Release	92	4.04	2.52

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was a negative correlation between the total improvement in ETE status and the average priority assigned to ETE. (e.g. Beneficiaries who rated ETE as a higher priority showed the biggest improvement in ETE status) ( $r = -2.5$ ,  $n = 83$ ,  $p = .023$ ). This firstly suggests

that Beneficiaries 'wants' are affecting outcomes, and secondly it can be inferred that intervention has targeted the areas highlighted as Beneficiaries' priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Education, Training and Employment domain, 41.2% (pre-on release) and 59.4% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy Project had provided level one intervention pre-on release (47.5 %) and level two intervention on-post release (48.7%), whilst none felt that they Community Chaplaincy Project had provided level five assistance either pre-on release or on-post release. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 1.76 pre - on release and at level 1.82 on - post release.

Table 38. Level of Community Chaplaincy Intervention for ETE across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	38	47.5	14	35.9
Level 2	26	32.5	19	48.7
Level 3	13	16.3	5	12.8
Level 4	3	3.8	1	2.6
Level 5	0	0.0	0	0.0
Total	80	100.0	39	100.0

### *Summary of Education, Training and Employment*

There were significant improvements in ETE status from pre to post release, with the majority of offenders either actively and confidently looking for employment or having employment on release. This is arguably the most important finding in regards to ETE, since it has been highlighted as a criminogenic need in previous research, and improvements are therefore assumed to be associated with reductions in re-offending. In addition it was found that most offenders rated ETE on average between their 4<sup>th</sup> or 5<sup>th</sup> priority pre/post release, and that the level of prioritisation increased over time, due to the fact that across time ETE showed significant improvements, it appears that this increased prioritisation was not due to lack of progress in this area but perhaps due to changing needs through the transition process or improvements in other domains initially given higher priority. It is promising that even though ETE was not rated, on average, as a top priority, there were still significant improvements across time, highlighting the Community Chaplaincy's success in improving domains even when they



are not the direct focus of intervention, providing a more holistic support service. In addition, it was found that there was a positive relationship between priority and degree of improvement (top priorities related to bigger improvements) which suggests that support was focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in ETE status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.3. Health

**Table 39. Health across Time**

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Life threatening disorders	1	0.7	1	0.7	0	0.0
No doctor	16	11.2	10	7.4	4	4.2
Banned from Doctors, still requires care	7	4.9	0	0.0	2	2.1
Medication required	8	5.6	4	2.9	4	4.2
Knows of Doctors - can't access medication	0	0.0	6	4.4	1	1.0
Engages with Community Health team	3	2.1	2	1.5	0	0.0
Has doctor and access to medication if required	60	42.0	63	46.3	43	44.8
Access to total NHS care inc. Dentist	48	33.6	50	36.8	42	43.8
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>96</b>	<b>100.0</b>

As illustrated in Table 39 and Figure 5 the most common Health status pre on and post release was 'Has Doctor and access to medication if required' (42%, 46.3% and 44.8% respectively). There was an improvement in the numbers of people with 'access to total NHS care inc. Dentist' comparing pre-release scores (33.6%) and post-release scores (43.8%). Thus indicating some improvement in Health status during engagement in the Community Chaplaincy Project.

**Figure 5. Health across Time**

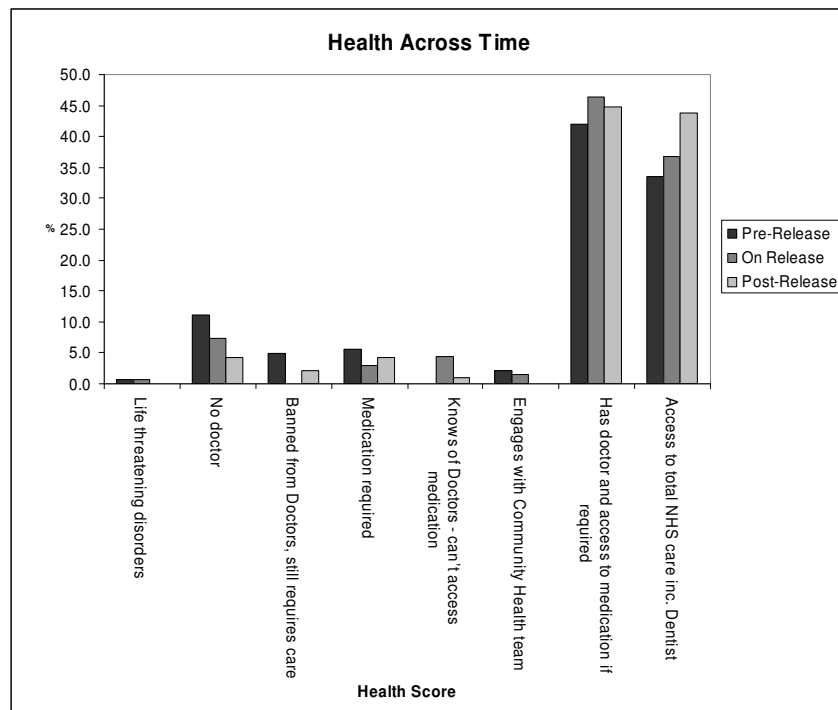


Table 40. Mean Health Scores across Time

	N	Mean	Std. Deviation
Pre Release Health	143	6.35	2.07
On Release Health	136	6.68	1.82
Post Release Health	96	7	1.50

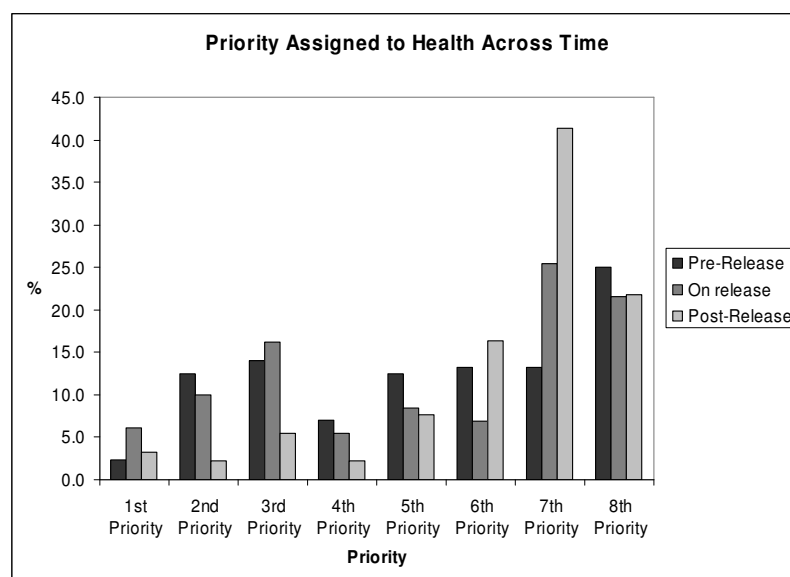
Low scores indicate a more problematic Health status. There were increases in mean health scores between all interviews, with the mean score for Health increasing by a total of 0.65 points along the axis between the pre and post release interviews. This improvement between pre and post release Health scores was significant ( $t = -3.167$ ,  $df = 95$ ,  $p = .002$ ).

### *Priority Assigned to Health*

Table 41. Priority Assigned to Health across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	3	2.3	8	6.2	3	3.3
2nd Priority	16	12.5	13	10.0	2	2.2
3rd Priority	18	14.1	21	16.2	5	5.4
4th Priority	9	7.0	7	5.4	2	2.2
5th Priority	16	12.5	11	8.5	7	7.6
6th Priority	17	13.3	9	6.9	15	16.3
7th Priority	17	13.3	33	25.4	38	41.3
8th Priority	32	25.0	28	21.5	20	21.7
Total	128	100.0	130	100.0	92	100.0

Figure 6. Priority Assigned to Health across Time



Increasing scores indicate a reduction in priority. As illustrated in Table 41 28.9% of Beneficiaries rated Health as one of their top three priorities pre-release which changed to 10.3% post release. The mean priority for Health starts at position 5.33 pre-release and increases to position 6.32 post-release (indicating a reduction in priority) (see Table 42 for Means and Standard Deviations). This suggests that over time Beneficiaries no longer felt that their Health needs were as important. When considered alongside the significant improvement in Health status over time, it is plausible to conclude that reductions in the priority of Health needs are due to improvements in Health status rather than other needs becoming relatively more important.

A Paired Samples T-Test found that the mean priority score was significantly lower pre-release than post release ( $t = -2.97$ ,  $df = 82$ ,  $p = .004$ ), further supporting the demonstrated improvement in Health status.

Table 42. Mean Priority for Health across Time

	N	Mean	Std. Deviation
Priority of Health Pre-Release	128	5.33	2.23
Priority of Health On Release	130	5.3	2.36
Priority of Health Post-Release	92	6.32	1.74

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was no relationship between the total improvement in Health status and the average priority assigned to Health. (e.g. Beneficiaries who rated Health as a higher priority didn't show bigger improvement in Health status compared to those who rated Health as a low priority) ( $r = -1.8$ ,  $n = 83$ ,  $p = .104$ ). This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Health domain, 87.5% (pre-on release) and 90.6% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, 58.8 % (pre-on release) and 44.4% (on-post release) felt that the Community Chaplaincy Project had provided level one intervention, whilst only 5.9% (pre-on release) and 11.1% (on-post release) felt that the Community Chaplaincy Project had provided level five

assistance. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 1.71 pre - on release and at level 1.9 on - post release.

Table 43. Level of Community Chaplaincy Intervention for Health across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	10	58.8	4	44.4
Level 2	4	23.5	4	44.4
Level 3	2	11.8	0	0.0
Level 4	0	0.0	0	0.0
Level 5	1	5.9	1	11.1
Total	17	100.0	9	100.0

### *Summary of Health*

There were significant improvements in Health status from pre to post release, with the majority of offenders having a doctor on release. This is arguably the most important finding in regards to Health. In addition it was found that most offenders rated Health, on average between their 5<sup>th</sup> or 6<sup>th</sup> priority pre/post release, and that the level of prioritisation decreased over time. Due to the fact that across time Health showed significant improvements, it appears that this decreased prioritisation was probably due to these improvements in Health status. Thus suggesting that this domain was tackled effectively. It is also promising that even though Health was not rated, on average, as a top priority, there were still significant improvements across time, highlighting the Community Chaplaincy's success in improving domains even when they are not the direct focus of intervention, providing a more holistic support service. Furthermore, it was found that there was not positive relationship between priority and degree of improvement (improvements weren't dependant on whether this domain was rated as a high or a low priority) which suggests that support wasn't necessarily focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in Health status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.4. Substance Use

Table 44. Substance Use across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Resigned to being a chaotic user	4	2.8	3	2.2	7	7.3
Occasional use in custody	0	0.0	1	0.7	1	1.0
Abstinent in custody only	44	30.8	14	10.3	2	2.1
Addressing substance misuse in custody – Short term	53	37.1	29	21.3	6	6.3
Addressing substance misuse in community – Long term	8	5.6	44	32.4	22	22.9
Engaged with community substance use agencies	6	4.2	19	14.0	9	9.4
Gaining in confidence in controlling substances	6	4.2	7	5.1	34	35.4
In total control	22	15.4	19	14.0	15	15.6
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>96</b>	<b>100.0</b>

As illustrated in Table 44 and Figure 7 the most common Substance Use status pre release was 'addressing substance misuse issues in custody – short term' (37.1%), on-release the most common status was "addressing substance misuse in custody – long term' (32.4%) which improved further post release to being 'Gaining confidence in controlling substance use' (35.4%). There was a vast improvement in the numbers of people who were either in total control or who were gaining in confidence controlling substance use comparing pre-release scores (19.6%) and post-release scores (51%). Thus indicating an improvement in Substance Misuse status during engagement in the Community Chaplaincy Project.

Figure 7. Substance Use across Time

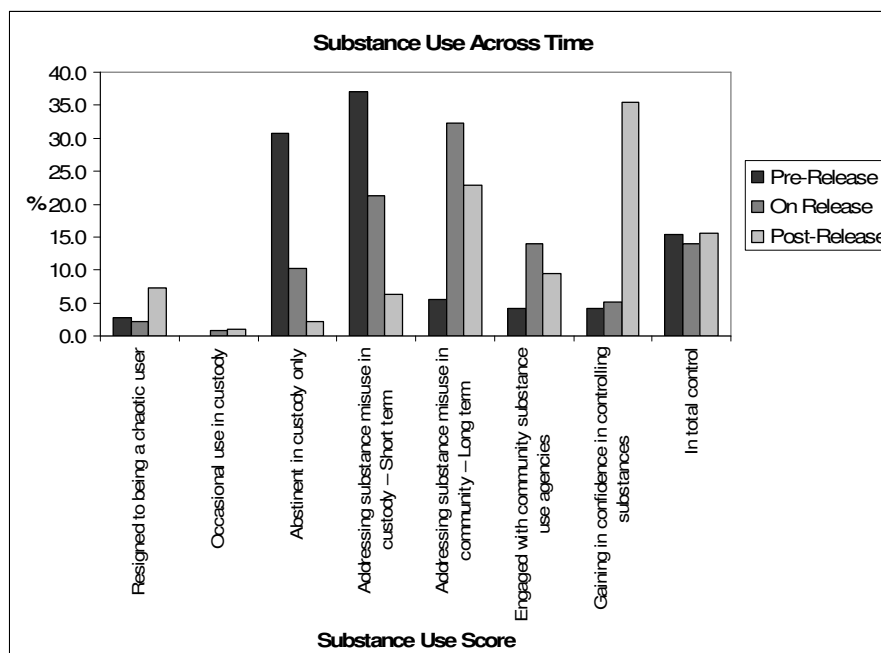


Table 45. Mean Score for Substance Use across Time

	N	Mean	Std. Deviation
Pre Release Substance Misuse	143	4.49	1.85
On Release Substance Misuse	136	5.13	1.63
Post Release Substance Misuse	96	5.84	1.91

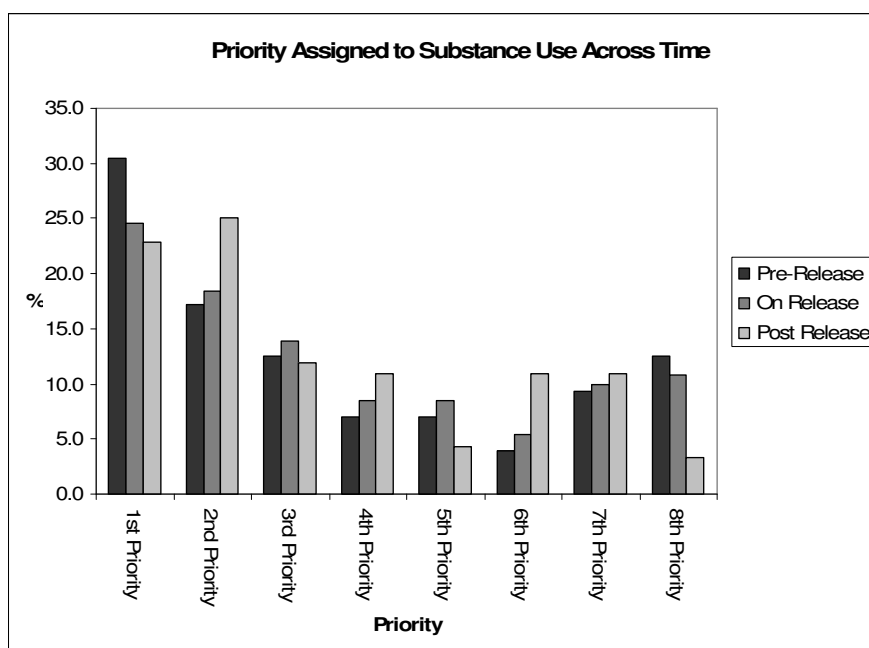
High scores indicate less problematic Substance Use problems. There were increases in mean Substance Use scores at each timeframe, with mean scores increasing by a total of 1.35 points along the axis between the pre and post release interviews. This improvement in Substance Use status was significant ( $t = -7.267$ ,  $df = 95$ ,  $p < .001$ )

### *Priority Assigned to Substance Use*

Table 46. Priority Assigned to Substance Use across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	39	30.5	32	24.6	21	22.8
2nd Priority	22	17.2	24	18.5	23	25.0
3rd Priority	16	12.5	18	13.8	11	12.0
4th Priority	9	7.0	11	8.5	10	10.9
5th Priority	9	7.0	11	8.5	4	4.3
6th Priority	5	3.9	7	5.4	10	10.9
7th Priority	12	9.4	13	10.0	10	10.9
8th Priority	16	12.5	14	10.8	3	3.3
Total	128	100.0	130	100.0	92	100.0

Figure 8. Priority Assigned to Substance Use across Time



Lower Numbers indicate a higher priority. As illustrated in Table 46 35.5% of Beneficiaries rated Substance Use as their top priority pre-release which reduced to 22.8% post release. The mean priority for Substance Use starts at position 3.55 pre-release and reduces to position 3.44 post-release (see Table 47 for Means and Standard Deviations). This suggests that although fewer people felt that Substance Use was their number one priority, more people felt that Substance Use was a high priority post-release compared to pre-release. Due to the fact that across time Substance Misuse scores showed significant improvement, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps because of the added pressure of abstaining whilst back in society with additional pressures and temptations. This suggests that particular attention should be paid to Substance Use needs during the transition from custody to community.

Table 47. Mean Priority for Substance Use across Time

	N	Mean	Std. Deviation
Priority of Substance Use Pre-Release	128	3.55	2.54
Priority of Substance Use On Release	130	3.68	2.44
Priority of Substance Use Post-Release	92	3.41	2.2

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was no relationship between the total improvement in Substance Use status and the average priority assigned to Substance Use. (e.g. Beneficiaries who rated Substance Use as a higher priority didn't show bigger improvement in Substance Use status compared to those who rated Substance Use as a low priority) ( $r = -0.21$ ,  $n = 83$ ,  $p = .851$ ). This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

#### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Substance Use domain, 25.7% (pre-on release) and 45.6% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy had provided level one assistance pre-on release (37.6%) and level two assistance on-post release (38.5%), whilst none pre-on release and only 1.9% on-post release felt that the Community Chaplaincy provided level



five intervention. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 1.99 pre - on release and at level 2.25 on - post release.

Table 48. Level of Community Chaplaincy Intervention for Substance Use across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	38	37.6	11	21.2
Level 2	34	33.7	20	38.5
Level 3	21	20.8	19	36.5
Level 4	8	7.9	1	1.9
Level 5	0	0.0	1	1.9
Total	101	100.0	52	100.0

### *Summary of Substance Misuse*

There were significant improvements in Substance Use status from pre to post release, with the majority of offenders either being in total control of their substance use or gaining confidence in controlling substance misuse post release. This is arguably the most important finding in regards to Substance Use, since it has been highlighted as a criminogenic need in previous research, and improvements are therefore assumed to be associated with reductions in re-offending. In addition it was found that most offenders rated Substance Use between their 1<sup>st</sup> or 2<sup>nd</sup> priority pre/post release, and that the average level of prioritisation increased slightly over time. Due to the fact that across time Substance Use showed significant improvements, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps due to added pressures and temptations during the transition back into the community. Therefore it is suggested that particular attention should be paid to substance use needs during this post-release transitional period. In addition, it was found that there was not positive relationship between priority and degree of improvement (improvements weren't dependant on whether this domain was rated as a high or a low priority) which suggests that support wasn't necessarily focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in Substance Use status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.5. Relationships

**Table 49. Relationships across Time**

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Has negative relationships – total disregard for others	1	0.7	1	0.7	0	0.0
Inappropriate relationships	21	14.7	3	2.2	6	6.3
Moods / emotions affect relationships	59	41.3	15	11.0	11	11.5
Wants to change in order to have good relationships	34	23.8	72	52.9	9	9.4
Takes responsibility for those close to me	14	9.8	21	15.4	27	28.1
Takes other people's feelings into account	2	1.4	9	6.6	15	15.6
Learning to commit to obtain stable relationships	4	2.8	6	4.4	21	21.9
Long term / stable relationships – outgoing, confident	8	5.6	9	6.6	7	7.3
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>96</b>	<b>100.0</b>

As illustrated in Table 49 and Figure 9 the most common Relationship status pre release was 'moods and emotions affect relationships' (41.3%), on-release the most common status was 'wants to change in order to have good relationships' (52.9%) which improved further post release to being 'takes responsibility for those close to me' (28.1%). There was a vast improvement in the numbers of people who were either learning to commit to obtain stable relationships or who were in long term, stable relationships between the pre-release scores (8.4%) and post-release scores (29.2%). Thus indicating an improvement in Relationship status during engagement in the Community Chaplaincy Project.

**Figure 9. Relationships across Time**

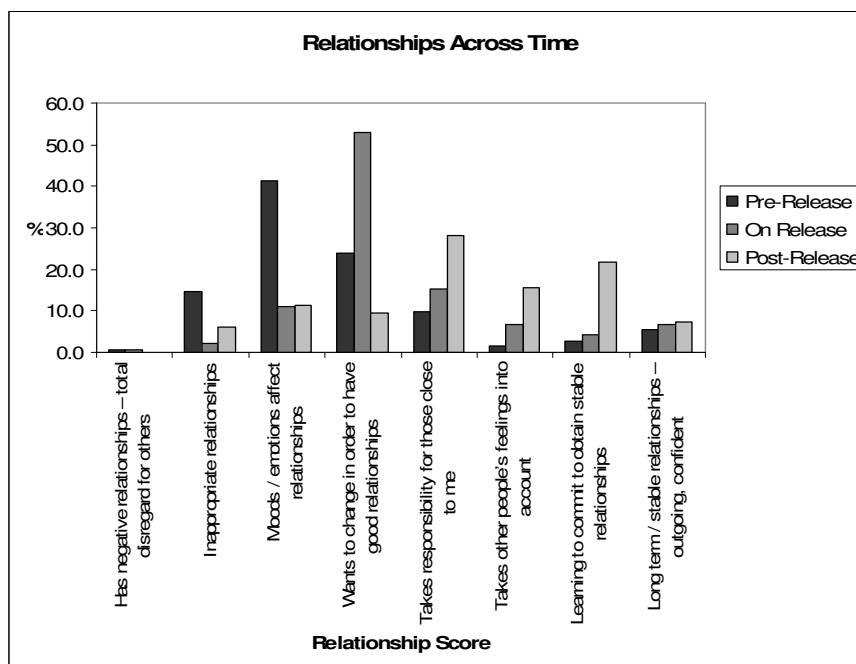


Table 50. Mean Scores for Relationships across Time

	N	Mean	Std. Deviation
Pre Release Relationships	143	3.71	1.51
On Release Relationships	136	4.51	1.28
Post Release Relationships	96	5.3	1.66

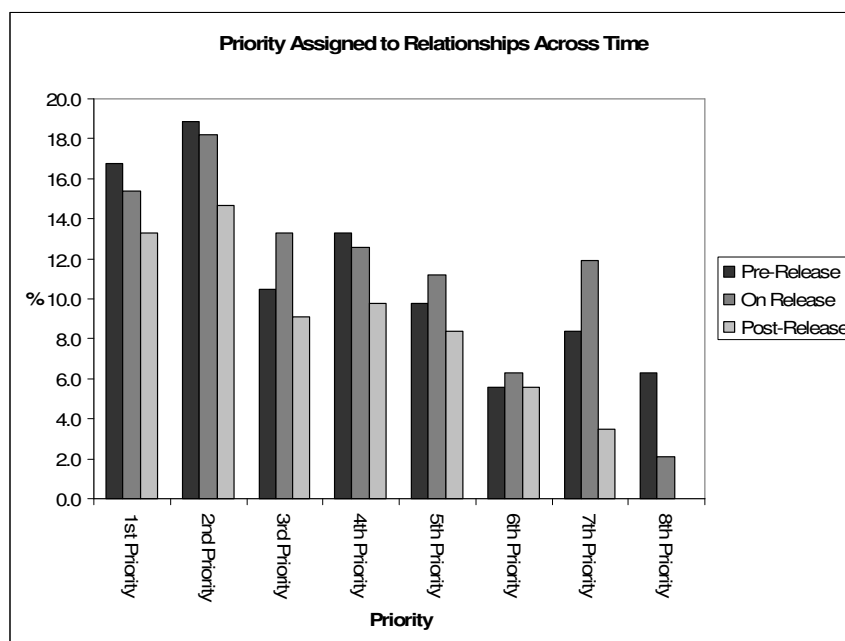
High scores indicate less chaotic Relationship status. There were increases in mean Relationship scores at each timeframe, with mean scores increasing by a total of 1.59 points along the axis between the pre and post release interviews. This improvement in Relationship status was significant ( $t = -8.711$ ,  $df = 95$ ,  $p < .001$ ).

### *Priority Assigned to Relationships*

Table 51. Priority Assigned to Relationships across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	24	18.8	22	16.9	19	20.7
2nd Priority	27	21.1	26	20.0	21	22.8
3rd Priority	15	11.7	19	14.6	13	14.1
4th Priority	19	14.8	18	13.8	14	15.2
5th Priority	14	10.9	16	12.3	12	13.0
6th Priority	8	6.3	9	6.9	8	8.7
7th Priority	12	9.4	17	13.1	5	5.4
8th Priority	9	7.0	3	2.3	0	0.0
Total	128	100.0	130	100.0	92	100.0

Figure 10. Priority Assigned to Relationships across Time



Lower Numbers indicate a higher priority. As illustrated in Table 51 18.8% of Beneficiaries rated Relationships as their top priority pre-release which increased to 20.7% post release. The mean priority for Relationships starts at position 3.7 pre-release and increases to position 3.25 post-release (see Table 52 for Means and Standard Deviations). This suggests that over time Beneficiaries felt their Relationship needs increased over time. Due to the fact that across time Relationship scores showed significant improvement, it appears that this increased need was not due to lack of progress in this area, but perhaps because of their changing priorities moving from the prison and resettling into society, or because Beneficiaries were not initially aware of the extent of this need. This suggests that particular attention should be paid to Relationships needs on and post release. The increase shown in priority for Relationships over time could also be partly due to improvements in other domains that were initially given higher priorities, such as accommodation, resulting in these domains no longer being Beneficiaries' main areas of concern.

Table 52. Mean Priority for Relationships across Time

	N	Mean	Std. Deviation
Priority of Relationships Pre-Release	128	3.7	2.22
Priority of Relationships On Release	130	3.69	2.09
Priority of Relationships Post-Release	92	3.25	1.83

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was no relationship between the total improvement in Relationship status and the average priority assigned to Relationships. (e.g. Beneficiaries who rated Relationships as a higher priority didn't show bigger improvement in Relationship status compared to those who rated Relationships as a low priority) ( $r = -1.02$ ,  $n = 83$ ,  $p = .361$ ). This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Relationships domain, 18.4% (pre-on release) and 45.8% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy had provided level one assistance pre-on release (40.5%) and level two assistance on-post release (46.2%), whilst none

pre-on release and only 1.9% on-post release felt that the Community Chaplaincy provided level five intervention. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 1.87 pre - on release and at level 2.19 on - post release.

Table 53. Level of Community Chaplaincy Intervention for Relationships across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	45	40.5	11	21.2
Level 2	42	37.8	24	46.2
Level 3	17	15.3	14	26.9
Level 4	7	6.3	2	3.8
Level 5	0	0.0	1	1.9
Total	111	100.0	52	100.0

### *Summary of Relationships*

There were significant improvements in Relationship status from pre to post release, with the majority of offenders taking responsibility for those close to them, taking people's feelings into account and learning to commit to stable relationships post release. This is arguably the most important finding in regards to Relationship, since it has been highlighted as a criminogenic need in previous research, and improvements are therefore assumed to be associated with reductions in re-offending. In addition it was found that, on average, offenders rated Relationships as their 3rd priority, and that the average level of prioritisation increased slightly over time. Due to the fact that across time Relationships showed significant improvements, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps because of changing priorities moving from the prison and resettling into society, or because Beneficiaries were not initially aware of the extent of this need. This suggests that particular attention should be paid to Relationships needs on and post release. In addition, it was found that there was not positive relationship between priority and degree of improvement (improvements weren't dependant on whether this domain was rated as a high or a low priority) which suggests that support wasn't necessarily focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in Relationship status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.6. Use of Time

Table 54. Use of Time across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Have no interest in anything	5	3.5	1	0.7	5	5.2
Takes advantage of support but no personal motivation	8	5.6	6	4.4	3	3.1
Interested but finds it difficult to motivate themselves	51	35.7	30	22.1	16	16.7
Motivated –learning to engage	43	30.1	34	25.0	13	13.5
Motivated – engages well (short term)	19	13.3	42	30.9	20	20.8
Motivated – engages well (long term)	6	4.2	15	11.0	20	20.8
Learns to distance himself appropriately	6	4.2	3	2.2	10	10.4
Living confidently	5	3.5	5	3.7	9	9.4
Total	143	100.0	136	100.0	96	100.0

As illustrated in Table 54 and Figure 11 the most common Use of Time status pre-release was being 'interested but finding it difficult to motivate themselves' (35.7%) whilst the most common on and post release Use of Time status was 'motivated, engages well (short term)' (30.9% and 20.8% respectively) with being 'motivated, engages well (long term)' being joint top post-release (20.8%). There was an increase in the number of people who were 'living confidently' pre-release (3.5%) compared to post-release (9.4%). Thus indicating a general improvement in Use of Time status during engagement in the Community Chaplaincy Project.

Figure 11. Use of Time across Time

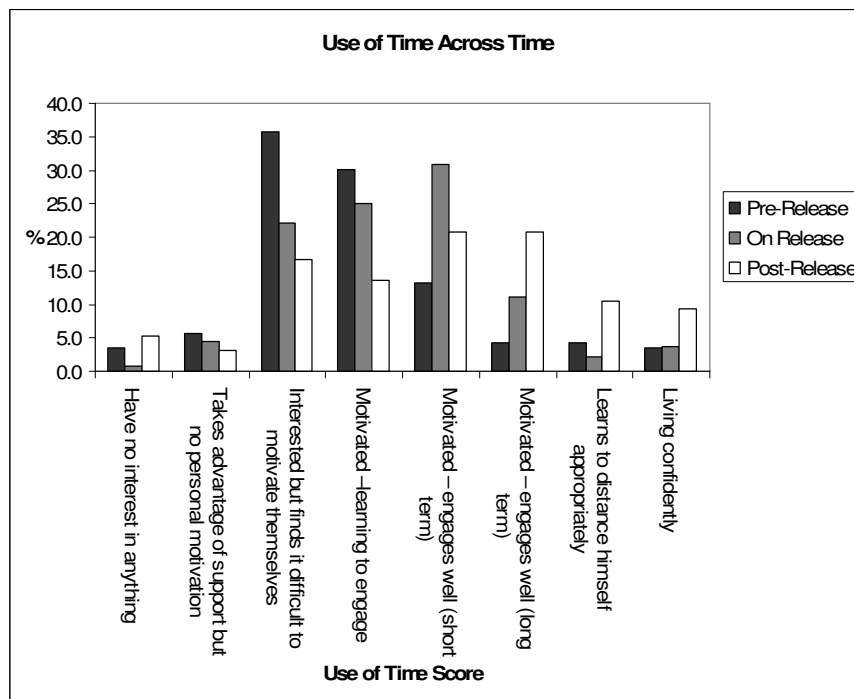


Table 55. Mean Score for Use of Time

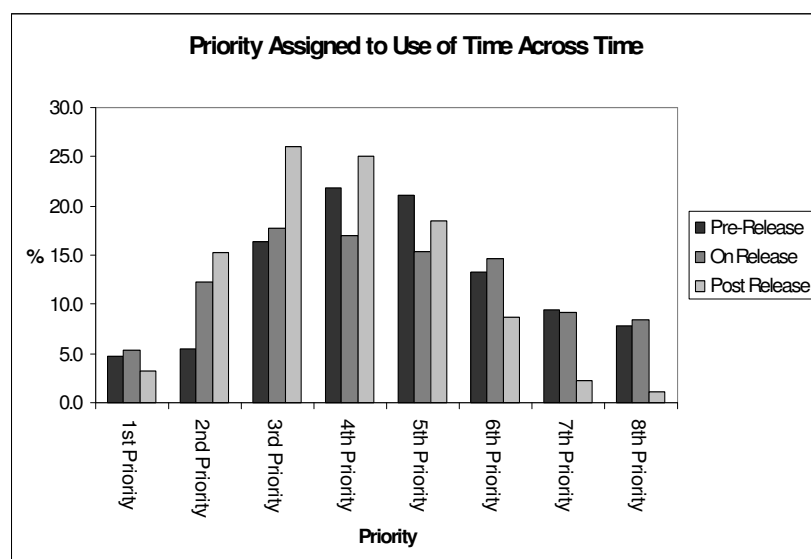
	N	Mean	Std. Deviation
Pre Release Use of Time	143	3.91	1.46
On Release Use of Time	136	4.41	1.36
Post Release Use of Time	96	4.93	1.85

Lower scores indicate more problematic Use of Time status. There were increases in mean Use of Time scores between all interviews, with the mean score for Use of Time increasing by a total of 1.02 points along the axis between the pre and post release interviews. This improvement between pre and post release Use of Time scores was significant ( $t = -5.651$ ,  $df = 95$ ,  $p < .001$ ).

### *Priority Assigned to Use of Time*

Table 56. Priority assigned to Use of Time across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	6	4.7	7	5.4	3	3.3
2nd Priority	7	5.5	16	12.3	14	15.2
3rd Priority	21	16.4	23	17.7	24	26.1
4th Priority	28	21.9	22	16.9	23	25.0
5th Priority	27	21.1	20	15.4	17	18.5
6th Priority	17	13.3	19	14.6	8	8.7
7th Priority	12	9.4	12	9.2	2	2.2
8th Priority	10	7.8	11	8.5	1	1.1
Total	128	100.0	130	100.0	92	100.0

Figure 12. Priority Assigned to Use of Time across Time

Lower Numbers indicate a higher priority. As illustrated in Table 56 and Figure 12 4.7% of Beneficiaries rated Use of Time as their first priority pre-release which fell to 3.3% post release. The mean priority for Use of Time starts at position 3.91 pre-release and reduces to position 4.93 post-release (see Table 57 for Means and Standard Deviations). This suggests that over time Beneficiaries no longer felt that their Use of Time needs were as important. When considered alongside the significant improvement in Use of Time status over time, it is plausible to conclude that reductions in priority of Use of Time are due to improvement in Use of Time status rather than other needs becoming relatively more important.

A Paired Samples T-Test found that the mean priority score was significantly higher pre-release than post release ( $t = -3.77$ ,  $df = 82$ ,  $p < .001$ ), further supporting the demonstrated improvement in Use of Time status.

Table 57. Mean Priority for Use of Time across Time

	N	Mean	Std. Deviation
Pre Release Use of Time	143	3.91	1.46
On Release Use of Time	136	4.41	1.36
Post Release Use of Time	96	4.93	1.85

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was no relationship between the total improvement in Use of Time status and the average priority assigned to Use of Time (e.g. Beneficiaries who rated Use of Time as a higher priority didn't show bigger improvement in Use of Time status compared to those who rated Use of Time as a low priority) ( $r = -0.14$ ,  $n = 83$ ,  $p = .903$ ). This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Use of Time domain, 25.7% (pre-on release) and 49% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy had provided level one assistance pre-on release (32.4%) and level two assistance on-post release (29.2%), whilst none felt that the Community Chaplaincy provided level five intervention. On average, Beneficiaries



rated the level of Community Chaplaincy Intervention at level 1.78 pre - on release and at level 2.08 on - post release.

Table 58. Level of Community Chaplaincy Intervention for Use of Time across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	44	32.4	9	9.4
Level 2	38	27.9	28	29.2
Level 3	16	11.8	11	11.5
Level 4	3	2.2	1	1.0
Level 5	0	0.0	0	0.0
Total	101	74.3	49	51.0

### *Summary of Use of Time*

There were significant improvements in Use of Time status from pre to post release, with the majority of offenders being motivated and engaging well post release. This is arguably the most important finding in regards to Use of Time. In addition it was found that, on average, offenders rated Use of Time as being between their 4<sup>th</sup> and 5<sup>th</sup> priority, and that the average level of prioritisation increased over time. Due to the fact that across time Use of Time showed significant improvements, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps simply due to other needs becoming relatively more important. In addition, it was found that there was not positive relationship between priority and degree of improvement (improvements weren't dependant on whether this domain was rated as a high or a low priority) which suggests that support wasn't necessarily focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in Use of Time status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.7. Attitude, Thinking and Behaviour

Table 59. Attitude, Thinking and Behaviour across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Resigned to life of crime	2	1.4	0	0.0	1	1.0
Maintains contact with former associates	17	11.9	3	2.2	9	9.4
No confidence to break away but would like to	31	21.7	18	13.2	5	5.2
Begins to talk positively about reform	66	46.2	44	32.4	12	12.5
Engages to address ATB	6	4.2	23	16.9	7	7.3
Looking at alternative ways to previous ways	9	6.3	29	21.3	24	25.0
Plans for success – using available support	9	6.3	17	12.5	31	32.3
Living without crime or criminal thoughts	3	2.1	2	1.5	7	7.3
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>96</b>	<b>100.0</b>

As illustrated in Table 59 and Figure 13 the most common Attitude, Thinking and Behaviour status pre and on release was ‘beginning to talk positively about reform’ (46.2% and 32.4% respectively) whilst the most common post release Attitude, Thinking and Behaviour status was ‘plans for success – using available support’ (32.3%). There has been a substantial increase in the number of people who felt they were either planning for success using available support or living without crime or criminal thoughts comparing pre-release (8.4%) and post-release (39.6%) scores. Thus indicating a general improvement in Attitude, Thinking and Behaviour status during engagement in the Community Chaplaincy Project.

Figure 13. Attitude, Thinking and Behaviour across Time

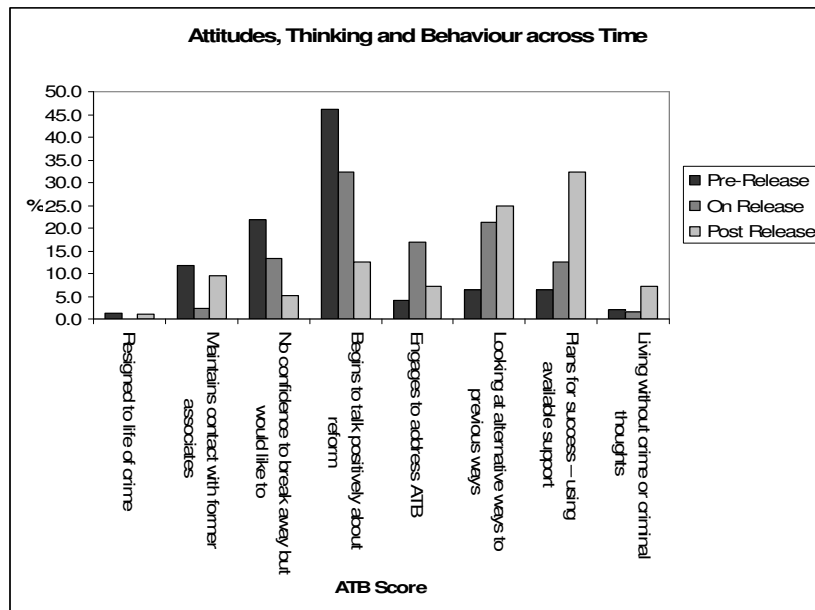


Table 60. Mean Score for Attitude, Thinking and Behaviour

	N	Mean	Std. Deviation
Pre Release ATB	143	3.94	1.42
On Release ATB	136	4.85	1.37
Post Release ATB	96	5.56	1.81

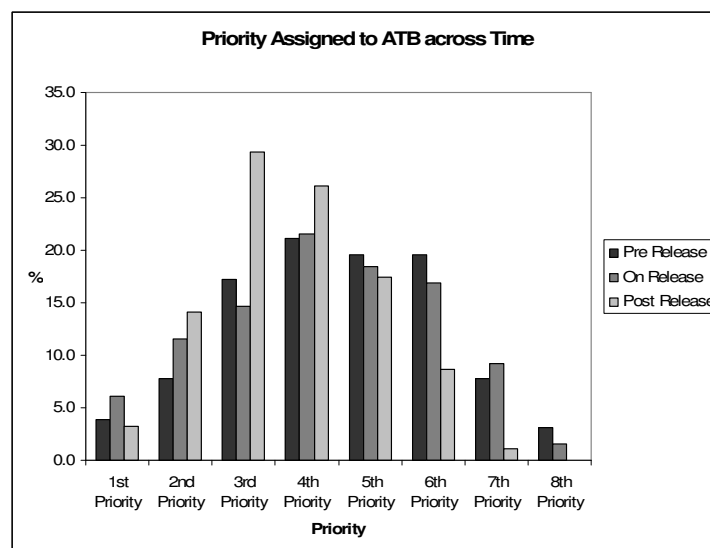
Lower scores indicate more problematic Attitude, Thinking and Behaviour status. There were increases in mean Attitude, Thinking and Behaviour scores between all interviews, with the mean score for Attitude, Thinking and Behaviour increasing by a total of 1.62 points along the axis between the pre and post release interviews. This improvement between pre and post release Attitude, Thinking and Behaviour scores was significant ( $t = -9.03$ ,  $df = 95$ ,  $p < .001$ ).

#### *Priority Assigned to Attitude, Thinking and Behaviour*

Table 61. Priority assigned to Attitude, Thinking and Behaviour across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	5	3.9	8	6.2	3	3.3
2nd Priority	10	7.8	15	11.5	13	14.1
3rd Priority	22	17.2	19	14.6	27	29.3
4th Priority	27	21.1	28	21.5	24	26.1
5th Priority	25	19.5	24	18.5	16	17.4
6th Priority	25	19.5	22	16.9	8	8.7
7th Priority	10	7.8	12	9.2	1	1.1
8th Priority	4	3.1	2	1.5	0	0.0
Total	128	100.0	130	100.0	92	100.0

Figure 14. Priority Assigned to Attitude, Thinking and Behaviour across Time



As illustrated in Table 61 and Figure 14 3.9% of Beneficiaries rated Attitude, Thinking and Behaviour as their first priority pre-release, which fell to 3.3% post release. The mean priority for ATB starts at position 4.5 pre-release and increases to position 3.7 post-release (see Table 62 for Means and Standard Deviations). This suggests that although fewer people felt that ATB was their number one priority, more people felt that it was a high priority post-release compared to pre-release. Due to the fact that across time ATB scores showed significant improvement, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps because of a more demanding post-release environment. Alternatively this increased prioritisation may simply be due to improvements in other domains initially given higher priorities resulting in these domains no longer being Beneficiaries main areas of concern.

A Paired Samples T-Test found that the mean priority score was significantly higher pre-release than post release ( $t = 3.885$ ,  $df = 82$ ,  $p < .001$ ), further supporting the demonstrated improvement in Attitude, Thinking and Behaviour status.

Table 62. Mean Priority for Attitude, Thinking and Behaviour across Time

	N	Mean	Std. Deviation
Priority of Use of Time Pre-Release	128	4.5	1.67
Priority of Use of Time On Release	130	4.3	1.74
Priority of Use of Time Post-Release	92	3.7	1.31

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was no relationship between the total improvement in Attitude, Thinking and Behaviour status and the average priority assigned to ATB. (e.g. Beneficiaries who rated ATB as a higher priority didn't show bigger improvement in ATB status compared to those who rated ATB as a low priority) ( $r = -0.054$ ,  $n = 83$ ,  $p = .626$ ). This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Attitude, Thinking and Behaviour domain, 16.9% (pre-on release) and 39.6% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy had provided level one or level two assistance pre-on release (35.4% each) and level two assistance on-post release (51.7%), whilst only one pre-on release (0.9%) and one on-post release

(1.7%) felt that the Community Chaplaincy provided level five intervention. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 2.04 pre - on release and at level 2.07 on - post release.

Table 63. Level of Community Chaplaincy Intervention for Attitude, Thinking and Behaviour across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	40	35.4	14	24.1
Level 2	40	35.4	30	51.7
Level 3	23	20.4	11	19.0
Level 4	9	8.0	2	3.4
Level 5	1	0.9	1	1.7
Total	113	100.0	58	100.0

### *Summary of Attitudes, Thinking and Behaviour*

There were significant improvements in Attitude, Thinking and Behaviour status from pre to post release, with the majority of offenders planning for success using support available post release. This is arguably the most important finding in regards to Attitude, Thinking and Behaviour, since it has been highlighted as a criminogenic need in previous research, and improvements are therefore assumed to be associated with reductions in re-offending. In addition it was found that the majority of offenders rated Attitude, Thinking and Behaviour as being between their 3<sup>rd</sup> and 4<sup>th</sup> priority, and that the average level of prioritisation increased over time. Due to the fact that across time Attitude, Thinking and Behaviours showed significant improvements, it appears that this increased prioritisation was not due to lack of progress in this area, but perhaps simply due to other needs becoming relatively more important. In addition, it was found that there was not positive relationship between priority and degree of improvement (improvements weren't dependant on whether this domain was rated as a high or a low priority) which suggests that support wasn't necessarily focused on areas which offenders wanted to improve/target. In regards to levels of Community Chaplaincy Intervention, most felt that the Chaplaincy had provided between level one and three intervention. This is partly promising, suggesting that some of the improvements in Attitude, Thinking and Behaviour status can be attributed to this intervention, rather than to the support of other agencies. To add further weight to this finding in future it would be advantageous to specify what each level of intervention refers to when collecting the data, and to also ask how much intervention the beneficiary feels they received from other supporting agencies.

### 5.1.8. Engagement with Community Chaplaincy

Table 64. Engagement with Community Chaplaincy across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Being prepared to engage with Community Chaplaincy	24	16.8	0	0.0	0	0.0
Beginning to form a relationship based on trust	65	45.5	7	5.1	2	2.1
Allowing Community Chaplaincy to offer alternatives	19	13.3	8	5.9	2	2.1
Established trust with Community Chaplaincy	27	18.9	73	53.7	35	36.8
Acting upon those alternatives	0	0.0	8	5.9	4	4.2
Seeking Community Chaplaincy input into situations	6	4.2	31	22.8	27	28.4
Allowing Community Chaplaincy input to alter my behaviour	0	0.0	6	4.4	9	9.5
Fully engages and values Community Chaplaincy help	2	1.4	3	2.2	16	16.8
<b>Total</b>	<b>143</b>	<b>100.0</b>	<b>136</b>	<b>100.0</b>	<b>95</b>	<b>100.0</b>

As illustrated in Table 64 and Figure 15 the most common Engagement with Community Chaplaincy status pre-release was ‘beginning to form a relationship based on trust’ (45.5%) whilst the most common on and post release Engagement with Community Chaplaincy status was ‘establishing trust with the Community Chaplaincy’ (53.7% and 36.8% respectively). There was a vast increase in the number of people selecting the three highest levels of engagement from 5.6% pre-release to 54.7% post-release. Thus indicating a general improvement in Engagement with Community Chaplaincy status across time.

Figure 15. Engagement with Community Chaplaincy across Time

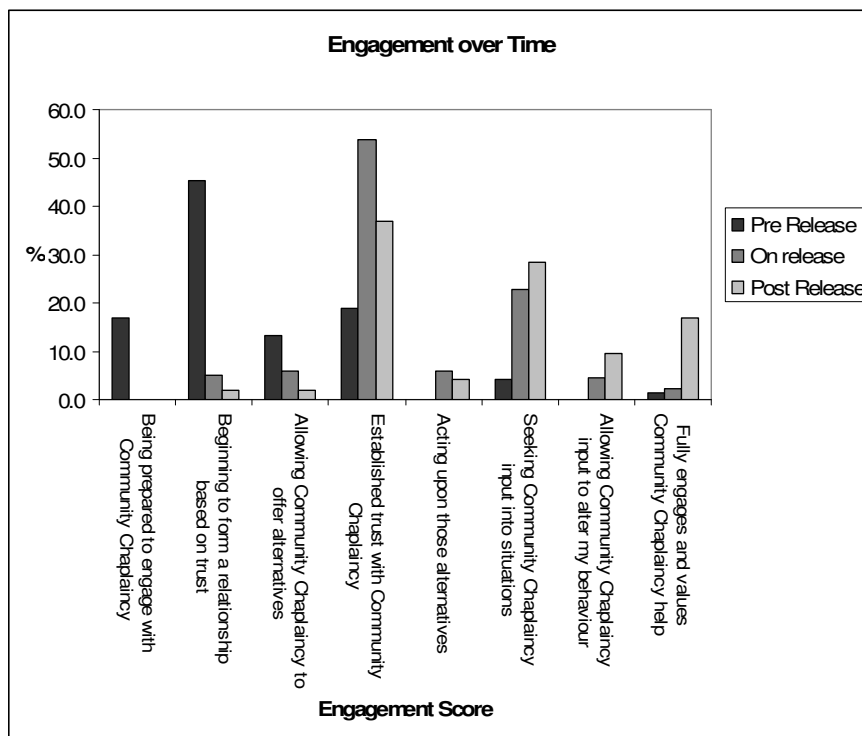


Table 65. Mean Score for Engagement with Community Chaplaincy

	N	Mean	Std. Deviation
Pre Release Engagement	143	2.59	1.38
On Release Engagement	136	4.57	1.3
Post Release Engagement	95	5.51	1.61

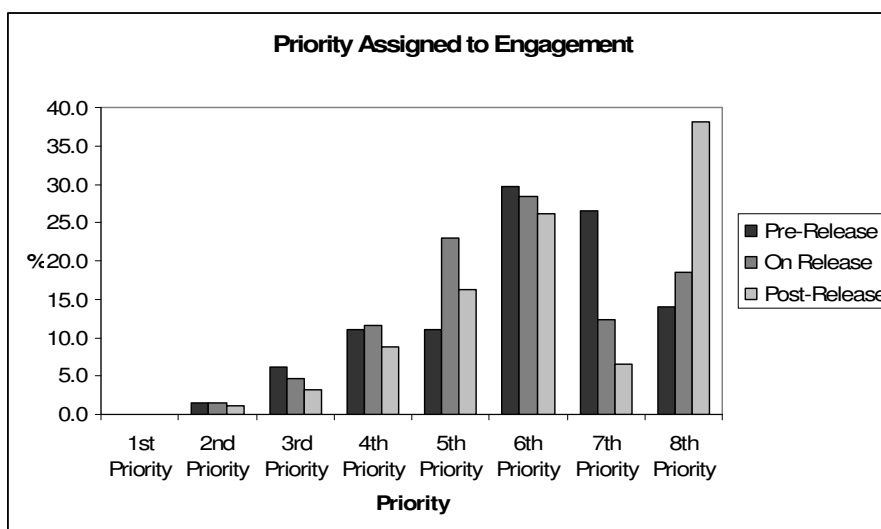
Lower scores indicate lower levels of Engagement with Community Chaplaincy. There were increases in mean levels of Engagement with Community Chaplaincy scores between all interviews, with the mean score for Engagement with Community Chaplaincy increasing by a total of 2.92 points along the axis between the pre and post release interviews. This improvement between pre and post release Engagement with Community Chaplaincy scores was significant ( $t = -18.358, df = 94, p < .001$ ).

*Priority Assigned to Engagement with Community Chaplaincy*

Table 66. Priority assigned to Engagement with Community Chaplaincy across Time

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
1st Priority	0	0.0	0	0.0	0	0.0
2nd Priority	2	1.6	2	1.5	1	1.1
3rd Priority	8	6.3	6	4.6	3	3.3
4th Priority	14	10.9	15	11.5	8	8.7
5th Priority	14	10.9	30	23.1	15	16.3
6th Priority	38	29.7	37	28.5	24	26.1
7th Priority	34	26.6	16	12.3	6	6.5
8th Priority	18	14.1	24	18.5	35	38.0
Total	128	100.0	130	100.0	92	100.0

Figure 16. Priority Assigned to Engagement with Community Chaplaincy across Time



High scores indicated the domain is less of a priority. As illustrated in Table 66 and Figure 16 no Beneficiaries rated Engagement with Community Chaplaincy as their first priority pre-release. The majority of Beneficiaries rated Engagement with Community Chaplaincy as their 6<sup>th</sup> priority pre-release which fell to last priority post-release (38%). On average, engagement was rated at position 5.97 pre-release, reducing to position 6.35 post-release.

Table 67. Mean Priority for Engagement with Community Chaplaincy across Time

	N	Mean	Std. Deviation
Priority of Engagement Pre-Release	128	5.97	1.48
Priority of Engagement On Release	130	5.83	1.48
Priority of Engagement Post-Release	92	6.35	1.57

The relationship between level of prioritisation and overall improvement in status was examined to highlight whether offender's wants were affecting their improvements. This relationship also reflects, in part, whether intervention has targeted the areas that Beneficiaries have stated are their priorities. There was a negative correlation between the total improvement in engagement and the average priority assigned to engagement (e.g. Beneficiaries who rated engagement as a higher priority showed the biggest improvement in engagement) ( $r = -0.226$ ,  $n = 83$ ,  $p = .04$ ). This firstly suggests that Beneficiaries' 'wants' are affecting outcomes, and secondly it can be inferred that intervention has targeted the areas highlighted as Beneficiaries' priority. This firstly suggests that Beneficiaries' 'wants' aren't affecting outcomes, and secondly it can be inferred that intervention isn't targeting this area dependant on its priority. Since significant improvements have been observed in this domain, it appears that intervention is helping all Beneficiaries across the board rather than giving particular help to those who rate it as a high priority.

### *Community Chaplaincy Intervention*

In regards to Community Chaplaincy Intervention within the Engagement with Community Chaplaincy domain, 6.6% (pre-on release) and 35.8% (on-post release) of Beneficiaries stated that they felt they had no issue and therefore could not attribute any success to Community Chaplaincy Intervention. Of those who did have an issue, the majority felt that the Community Chaplaincy had provided level three assistance pre-on release (33.1%) and level four assistance on-post release (36.1%). 7.1% Beneficiaries pre-on release and 13.1% on-post release felt that the Community Chaplaincy provided level five intervention. On average, Beneficiaries rated the level of Community Chaplaincy Intervention at level 2.93 pre - on release and at level 3.23 on - post release.



Table 68. Level of Community Chaplaincy Intervention for Engagement with Community Chaplaincy across Time

	Pre - On Release		On - Post Release	
	F	%	F	%
Level 1	25	19.7	6	9.8
Level 2	14	11.0	12	19.7
Level 3	42	33.1	13	21.3
Level 4	37	29.1	22	36.1
Level 5	9	7.1	8	13.1
Total	127	100.0	61	100.0

### *Additional Engagement Analysis*

It can be assumed that progress in this domain does not necessarily constitute an improvement in terms of criminogenic need itself, but rather makes improvements in other (criminogenic) domains more likely. In order to investigate this assumption, a correlation between post-release engagement scores and overall holistic change was conducted, which demonstrated a positive relationship between post-release scores on the engagement domain and overall holistic change. ( $r = 0.373$ ,  $n = 95$ ,  $p < .001$ ) (e.g. offenders who were engaging more displayed bigger improvements in holistic scores). The obvious factor related to likelihood of a beneficiary engaging with the Chaplaincy is the amount of contact they have had. It was found that the amount of contact (both numbers of contact and hours of contact) between the Community Chaplaincy and the beneficiary was positively related to post-release scores on the engagement domain (numbers of contact:  $r = 0.489$ ,  $n = 86$ ,  $p < .001$ ; hours of contact:  $r = 0.498$ ,  $n = 86$ ,  $p < .001$ ). Thus suggesting that the more contact Beneficiaries have with the Chaplaincy, the more likely they are to engage and therefore experience the benefits of this engagement such as large holistic lifestyle improvements.

### *Summary of Engagement*

There were significant improvements in Engagement status from pre to post release, with the majority of offenders having established a trusting relationship with the Chaplaincy post release. This is arguably the most important finding in regards to Engagement, as you would assume success in most areas to be dependant on Beneficiaries trusting, relating and engaging with the Chaplaincy. In addition it was found that the majority of offenders only rated engagement at their last priority. This is not entirely surprising as progress in this domain does not necessarily constitute what Beneficiaries may perceive to be actual improvements to their lifestyles, rather improvements in engagement are expected to make these lifestyle improvements more likely. A positive relationship between post-release engagement score and overall holistic change was found, suggesting that offenders who were engaging more displayed bigger improvements in holistic scores. Finally, it was found that the amount of contact (both numbers of contact and

hours of contact) between the Community Chaplaincy and the beneficiary was positively related to post-release scores on the engagement domain, thus suggesting that the more contact Beneficiaries have with the Chaplaincy, the more likely they are to engage and therefore experience the benefits of this engagement such as large holistic lifestyle improvements. Such positive results within this domain are very promising.

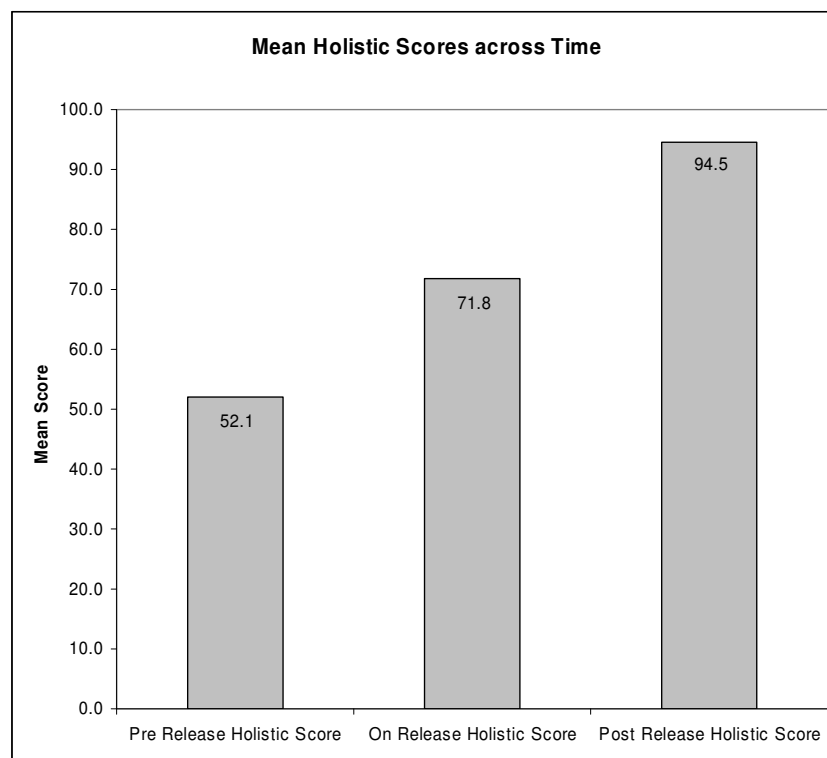
### 5.1.9. Holistic Beneficiary Outcomes

The “spider’s web” outcome monitoring method also produces a holistic impression of change by comparing the graphical area produced when joining assessment scores at each time. The means for total areas are presented below. By examining these ‘total areas’ we are able to see the overall progress made by Beneficiaries whilst engaging with the Community Chaplaincy.

Table 69. Mean Holistic Scores across Time

	N	Mean	Standard Deviation
Pre Release Holistic Score	143.0	52.1	28.3
On Release Holistic Score	136.0	71.8	30.5
Post Release Holistic Score	96.0	94.5	39.1

Figure 17. Mean Holistic Scores across Time



The mean score increased by 42.4 between pre and post release. Even reducing the sample to the 96 who had completed all stages yielded a highly significant positive result ( $t = -12.654$ ,  $df = 95$ ,  $p < .001$ ).

From these results it can be concluded that Swansea Community Chaplaincy is having a robust and positive effect on the lives of its Beneficiaries in the areas it is seeking to directly change, all of which should in turn affect offending behaviour.

### 5.1.10. Offender's Priorities

Beneficiaries' top priorities are examined at the three time points to investigate the areas that offenders want the biggest and most immediate improvements in. From table 70 it can be seen that both pre and post release, the most common domains listed as being Beneficiaries number one priority are Accommodation, Substance Use and Relationships. Post release, Education, Training and Employment is most commonly rated as Beneficiaries number one priority, followed again by Substance Use, Relationships and Accommodation.

Table 70. Most Common First Priority Across Time

	Pre Release		On Release		Post Release	
	Domain	%	Domain	%	Domain	%
Most Common	Accommodation	35.2	Accommodation	32.3	ETE	26.1
2nd Most Common	Substance Use	30.5	Substance Use	24.6	Substance Use	22.8
3rd Most Common	Relationships	18.8	Relationships	16.9	Relationships/Accommodation	20.7

It is promising to see that Accommodation and Relationships are commonly listed as Beneficiaries top priority because these are the areas that the biggest improvements have been observed between pre and post release timeframes.

## 5.2. Returns to HMP Swansea

Almost three quarters (72.73%) of Beneficiaries had not returned to HMP Swansea within the evaluation period (N = 103). This percentage of non-returns is significant ( $\chi^2=29.545$ ,  $df = 1$ ,  $p<0.001$ ). Most of those who returned to Swansea did so (were re-convicted to HMP Swansea returned) within 6 months of release (N = 27). Return to HMP Swansea rates were collected, on average, 40.83 weeks post release, but this varied from 15 pre-release to 78 weeks post release. The table below shows the frequencies and percentages of Beneficiaries who returned to HMP Swansea, broken down by post-release time increments.

Table 71. Beneficiary Returns to HMP Swansea

	F	%
Has Not Returned	103	72.0
Returned < 3 Months	13	9.1
Returned 3 - 6 Months	14	9.8
Returned 6 - 9 Months	3	2.1
Returned 9 - 12 Months	5	3.5
Returned > 12 Months	5	3.5
Total	143	100.0

Initially it was felt that those who declined support from the Community Chaplaincy would provide an appropriate comparison group in regards to returns rate. This information can be found in Table 72, which illustrates that the majority of Beneficiaries who returned to custody did so in the first 6 months (18.9%) which is also true, to a lesser extent, for those who declined support from the Community Chaplaincy (15.9%).

Table 72. Returns to HMP Swansea by Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
Has Not Returned	103	72.0	458	78.7
Returned < 3 Months	13	9.1	56	9.6
Returned 3 - 6 Months	14	9.8	31	5.3
Returned 6 - 9 Months	3	2.1	14	2.4
Returned 9 - 12 Months	5	3.5	10	1.7
Returned > 12 Months	5	3.5	13	2.2
Total	143	100.0	582	100.0

The table below shows the frequencies and percentages of Beneficiaries and decliners who returned to HMP Swansea, broken down by post-release time increments. These figures show that a slightly higher percentage of Beneficiaries returned to custody at HMP Swansea (28%) in comparison to those who declined support (21.3%), although this difference was not significant

( $\chi^2 = 2.646$ ,  $df = 1$ ,  $p = .104$ ). Differences between the groups were examined to ensure that the disparity in return rates was not due to differing lengths of time post-release before the returns data was collected (e.g. if Beneficiaries had, on average, several weeks longer post-release before the returns data was collated compared to the Decliners, then it could be assumed they had longer to reoffend and be sentenced, and therefore we would expect them to show higher returns rates).

Table 73. Mean Length of Time Post Release in Weeks

	N	Mean	Standard Deviation
Beneficiary	143	38.75	20.23
Decliner	582	41.34	23.12

The table above shows the average length of time between release and the collection of return rates data for Beneficiaries and decliners, along with the standard deviations of the means and the numbers of offenders in each group. From this table it is clear that differences in return to custody rates between Beneficiaries and Decliners is not due to Decliners spending, on average, less time post-release before return rates were calculated. In fact, Decliners spent more time on average post-release before return data was collected, implying that they had longer period in which to reoffend and be sentenced, making it more likely for them to exhibit higher return rates. However, this difference was not significant ( $t = 1.229$ ,  $df = 723$ ,  $p = .219$ ).

In an attempt to investigate why more Beneficiaries returned compared to decliners, self-reported accommodation, employment and substance use status given at screening by all offenders approached by the Community Chaplaincy (Beneficiaries and Decliners) was examined. The table below shows the frequencies and percentages of Beneficiaries and decliners who stated whether they did or did not have a substance misuse issue at screening.

Table 74. Substance Use Status at Screening of Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
No Substance Misuse Issue	35	24.8	252	46.3
Substance Misuse Issue	106	75.2	292	53.7
Total	141	100.0	544	100.0

It was found that more Beneficiaries reported issues with substance misuse (75.2%) compared to Decliners (53.7%). A Chi-squared with Yates's correction informs that this difference was significant ( $\chi^2 = 20.39$ ,  $df = 1$ ,  $p < .001$ ).

Table 75. Accommodation Status at Screening of Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
Has Accommodation	84	59.2	388	71.3
No Firm Accommodation	58	40.8	156	28.7
Total	142	100.0	544	100.0

The table above shows the frequencies and percentages of Beneficiaries and decliners who, at screening, stated they did or did not have accommodation on release. Similarly, significantly more Beneficiaries did not have accommodation confirmed on release (40.8%) compared to Decliners (28.7%) ( $\chi^2 = 7.212$ ,  $df = 1$ ,  $p = .007$ ).

Table 76. Employment Status at Screening of Beneficiaries and Decliners

	Beneficiaries		Decliners	
	F	%	F	%
Has Employment	19	13.4	141	26.0
No Employment	123	86.6	401	74.0
Total	142	100.0	542	100.0

The table above shows the frequencies and percentages of Beneficiaries and decliners who, at screening, stated they did or did not have employment on release. This shows that Beneficiaries were also significantly less likely to have employment on release (13.4%) compared to decliners (26%) ( $\chi^2 = 9.331$ ,  $df = 1$ ,  $p = .002$ ).

It is possible to suggest that because Beneficiaries have significantly higher amounts of substance use and significantly lower instances of accommodation and employment on release, they will be more likely to return to custody than the decliners. This notion is further supported when the relationships between substance use, accommodation, employment and returns to custody is considered. A non-parametric correlation was performed which indicated that there was a significant negative relationship between accommodation and return rates, suggesting that lack of accommodation on release is associated with higher rates of return ( $\rho = -1.36$ ,  $N = 544$ ,  $p = .001$ ). Similarly, a significant relationship was also found between substance use and returns rate, suggesting that substance misuse is associated with higher rates of return to custody ( $\rho = -0.94$ ,  $N = 544$ ,  $p = .028$ ). There was no significant correlation between employment on release and return rates. Therefore it appears that the suggestion that increased return to custody rates of the Beneficiaries compared to the Decliners is due to Beneficiaries having more significant criminogenic needs, is a sound assumption.

An alternative reconviction comparison worth bearing in mind is a 56% reconviction rate in 2004 across England and Wales over 2 years post conviction (Home Office, 2007). The return to HMP

Swansea rate is well below this figure (28%), but again it must be noted that this is not a valid reconviction measure as it is restricted to returns to HMP Swansea (and therefore does not consider reconviction to other institutions), and does not measure 2 years post-conviction.

An examination of the differing lengths of time between release and the collection of returns data casts more doubt on the validity and therefore usefulness of the return to custody rate. As seen in table 77, offenders who returned to custody had a significantly longer period post-release in which to reoffend (47.97 weeks) compared to those who did not return (38.79 weeks). This difference was significant ( $t = -4.611$ ,  $df = 723$ ,  $p < .001$ ). Therefore, those offenders who are recorded as 'non-returners' had a significantly shorter time in which to reoffend and be sentenced, suggesting had they been given the same amount of time in which to re-offend they may have done so and therefore may be recorded as false negatives. The table below shows the average length of time between release and the collection of return rates data for all offenders, along with the standard deviations of the means and the numbers of offenders in each group

Table 77. Mean Number of Weeks Post Release Returns Data Collected

	N	Mean	Standard Deviation
Returned to HMP Swansea	161	47.97	21.66
Did not Return to HMP Swansea	564	38.79	22.45

Due to all of the validity issues of the 'reconviction' rates, it is not viable to examine relationships between variables such as holistic score improvement, sentence length, hours of contact etc. and rates of return.

#### *Summary of Return to HMP Swansea Rates*

Although slightly more Beneficiaries returned to custody at HMP Swansea in comparison to Decliners, this difference was not significant. An examination of factors that could explain this slight difference found that it was not due to returns data for Beneficiaries being collected over a longer time period post release (and therefore providing them with longer to re-offend and be sentenced) compared to decliners. It is then suggested that the differences in return rates may be due to Beneficiaries having significantly more problems in certain criminogenic areas (accommodation, employment, substance use) compared to decliners. This point is reinforced by the finding that negative statuses in two of these areas (substance use and accommodation) are associated with higher rates of return.

It must be emphasised again that although returns data has been discussed, due to the numerous methodological flaws of this data and the assumed poor validity, no firm conclusion can be drawn. Similarly, in an examination of the minutes from the Strategic and Advisory Management Board that was held on the 6<sup>th</sup> December 2006, it is discovered that 'some men



have returned after being arrested for historic offences' which again suggests that the return to custody rates may not bear a true reflection upon the success of the Community Chaplaincy Project in reducing re-offending.

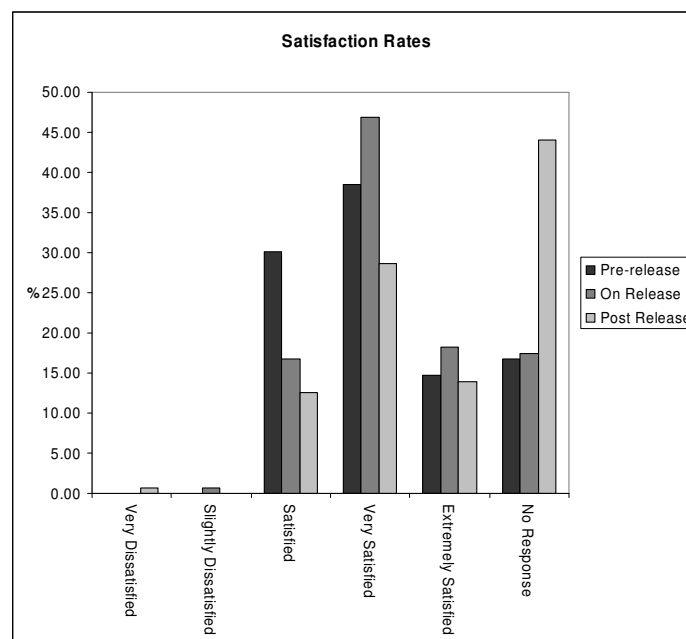
### 5.3. Satisfaction

Satisfaction with the Community Chaplaincy Project was measured via Beneficiaries' self-reported satisfaction to the assessment Chaplain, at the three time-points of their data collection. This method will not yield the most accurate satisfaction rates, as the beneficiary may feel pressure to respond positively. Nevertheless, all Beneficiaries who responded pre-release stated they were satisfied to varying degrees, with the majority stating they were 'very satisfied' (38.46%). On release, there was only one negative response, and the majority again stated they were 'very satisfied' (46.85%). Post-release there was again one negative response, whilst the majority again stated they were 'very satisfied' (28.67%). The high percentage of non-responses at each of these time points (16.78% pre-release, 17.48% on release and 44.06% post release) cannot be assumed to be negative responses.

**Table 78. Satisfaction Rates**

	Pre-Release		On Release		Post-Release	
	F	%	F	%	F	%
Very Dissatisfied	0	0.00	0	0.00	1	0.70
Slightly Dissatisfied	0	0.00	1	0.70	0	0.00
Satisfied	43	30.07	24	16.78	18	12.59
Very Satisfied	55	38.46	67	46.85	41	28.67
Extremely Satisfied	21	14.69	26	18.18	20	13.99
No Response	24	16.78	25	17.48	63	44.06
Total	143	100.00	143	100.00	143	100.00

**Figure 18. Satisfaction Rates**



#### 5.4. *Costs*

Since October 2006 until the end of March 2008, the Community Chaplaincy at HMP Swansea has interviewed, screened and offered support to 725 offenders and has provided support and resettlement intervention for 143 offenders during the transition from custody to community. Results show a 27.7% return to HMP Swansea rate, which is approximately half that of national average reconviction rate in 2004 across England and Wales (56% for adult males) (Home Office, 2007). The numerous problems associated with the current evaluation's proxy re-conviction rate have been extensively discussed in sections 2 and 5.2. Due to these issues, and constraints of the current evaluation, a full analysis of the benefits of the Community Chaplaincy in terms of costs saved has not been completed. An indication of the extent of the cost benefits of the project can be considered. The Social Exclusion Unit (2002) states that 'A re-offending ex-prisoner is likely to be responsible for crime costing the criminal justice system an average of £65,000 to get to the point of re-imprisonment, and as much as £37,500 a year to re-incarcerate thereafter.'

Out of the 143 offenders who received support from the Community Chaplaincy, the national re-conviction rate of 55% would suggest that approximately 79 offenders will be re-convicted. In actuality, only 40 Beneficiaries returned to custody at HMP Swansea, suggesting that 39 who were predicted to return did not. The cost to get all of these offenders to the point of re-imprisonment is approximately £2,535,000, with an additional cost of £37,500 per offender per year of incarceration thereafter (and these are just the costs incurred by the criminal justice system, the Government Spending Review (2000) estimated that there is a non-criminal justice cost of around £31,000 per year, per offender). The total costs for the Community Chaplaincy for one year (the period of March 2007 until February 2008) were £94,430.53, which is dramatically smaller than the estimated costs saved due to the reduction in returns rate associated with involvement in the Community Chaplaincy Project. Again, it must be emphasised that the returns rate only refers to offenders who were re-convicted to HMP Swansea and not to other establishments, and is only over an average of 40 weeks post release and not a standard 2 year follow-up. Therefore, it is expected that the return to HMP Swansea rates underestimate the actual number of Beneficiaries who will be re-convicted.

## *6. Process Evaluation*

### *6.1 Community Chaplaincy Project Delivery*

As described in the introduction, the primary aim of the project is to support offenders during the bridging process between custody and reintegration into the community using the established skills and expertise of the faith and voluntary sector. This is accomplished by identifying individual needs (of those who wish to participate in the project) during prison confinement, addressing these needs through various support services and networks, and by providing continued support throughout the bridging process. This includes support for the individual, their families where necessary, and within the community with the aim assisting offenders to become contributors to their society and helping to prevent re-offending.

Given this explanation of the project, it is difficult to provide a clearly defined description of how the Chaplaincy support is delivered. The nature of the support is such that it is offender-led, and individually tailored, and as such, provides a flexible service dependent on individual needs and priorities. The range of support provided includes practical and emotional support offered by the Chaplains, identifying and initiating contact with support within the prison (such as linking offenders with drug workers), and also includes identifying appropriate outside agency support (such as housing agencies or resettlement workers) as and when required over the intervention period of 12 weeks (and sometimes more). Clearly then, each case will be considered as very different from the next, and the type and level of support provided will vary considerably.

In order to examine the process of the Community Chaplaincy Project for the current evaluation an examination of data collection methods, inter and intra organisational communication, and engagement and motivation will be presented. Areas where the project is working effectively will be highlighted and areas where improvements could be made will also be examined. This approach aims to identify not only the projects successes, but also where changes can be implemented in order for the project to reach potential.

### *6.2 The Recruitment and Project Processes*

The following points describe the steps of recruitment for offenders who participate in the Community Chaplaincy Project within Swansea Prison:

- Offenders are made aware of the services provided by the Community Chaplaincy Project within twenty-four hours of arriving at Swansea Prison.

- Further information regarding support is offered during the sentence period, on release, and after release from Swansea prison.
- Six weeks prior to release Community Chaplains formally interview (or 'screen') offenders with the aim of answering any questions about support, identifying areas of need, signposting support services, and implementing personal support if necessary.
- If support is requested, the SPIDER assessment is completed (as described in detail in sections 1 & 2) This forms the basis of the release plan for the beneficiary and the Chaplain
- A project team member is allocated to the beneficiary who then interprets the SPIDER assessment and provides required support within the explained parameters of the project.
- One week prior to release, Swansea prison holds a discharge board and release details are discussed. This covers issues associated with housing, employment, benefits, health, clothing, location, fears, upcoming appointments and any other issues that may arise for each individual offender.
- This allows the Community Chaplains to identify particular areas where there are gaps in existing service provision, and offer support to 'fill in the gaps'. The type of support offered may be to provide furniture, starter kits, links to community groups and resources for example.
- Second SPIDER assessment is completed just prior to release in order to identify the beneficiary's perception of their release situation, and to identify changes made since last assessment (both positive and negative)
- If requested, assigned Community Chaplains meet Beneficiaries at the gate on release, and/or arrange to meet with them post release in order to begin implementing support identified for this second phase of intervention. At this point, the Community Chaplains become available to provide support as and when agreed outside of Swansea prison.
- Six weeks post release a further SPIDER assessment is completed monitoring the perceived post release situation and any changes since last assessment. At this point monitoring is completed, although contact is often continued at the discretion of the project team.

### *6.3 Data collection processes*

During the intervention process, various methods and types of data collection are used in order to identify common characteristics of offenders accessing the service, to identify Beneficiaries' needs, monitor changes in needs and priorities over time, and to record information for audit purposes.

Type of data recorded includes demographics and offending history of all offenders who were screened by the Community Chaplaincy (including Beneficiaries) in addition to records pertaining solely to Beneficiaries (see section 2 for more detailed description of data recording).

The screening record, as described in section 2, includes data regarding all offenders identified for intervention. This method and content of data collection is beneficial for evaluation purposes as it allows differences between those who accept and those who decline support to be analysed. This also provides data on a suitable comparison group in order to compare the efficacy of the Community Chaplaincy Project. This method of data collection provides an efficient, accurate and thorough record of all offenders approached by Community Chaplaincy. Therefore it is beneficial for evaluation, audit, and monitoring processes (see recommendation one).

The assessment processes (pre, on and post release) provided by the SPIDER assessment are thorough and well documented, and allow simple and easily accessible information regarding Beneficiaries progress to be observed. The Relationships domain encompasses the NOMS pathway of Children and Families adequately, possibly allowing a broader level of support in regards to close relationships outside the immediate family. The addition of the engagement domain is also a beneficial addition to the NOMS pathways, and allows engagement to be effectively mapped and monitored over time. Engagement and motivation is evidenced as being important to improvements in offender outcomes. However, the use of time domain does not directly relate to any of the NOMS pathways, and the 'Debt and Finance' NOMS pathway is effectively missing from the Community Chaplaincy assessment process. Given this, it would be beneficial to adapt the SPIDER Assessment to include intervention and assessment regarding debt and finance. The second version of the SPIDER Assessment is in progress, and plans are to include all 7 NOMS pathways in addition to the engagement domain. It is strongly suggested that this development is implemented, to ensure evidenced criminogenic needs are being targeted.

Although methods of data collection have clearly improved over time as the project has developed (and in response to previous evaluations), it could be further developed by including definitions of levels (1 – 5) of Community Chaplaincy Intervention for each domain (explained further in section 2) to allow more meaningful comparisons and understandings of what is being recorded. Currently, Beneficiaries simply rate the perceived level of Chaplaincy intervention for each domain between timeframes on a scale of 1 to 5. It is recommended that these values are given meaning to provide a standardized measure of levels of intervention. This would provide a consistent and more reliable and valid measure for future assessments (see recommendation five).

Good record keeping practice is observed in regards to qualitative data being collected relating to Beneficiaries perceptions of types of changes that they have made between time points, on each domain. This adds context to assessment results, which not only refreshes the Community Chaplains' understanding of progress made, but also provides a more biographical representation of the progress for the beneficiary.

In addition to the rich data that is already collected, it is suggested that Community Chaplaincy also collects more detailed information relating to Beneficiaries contact with other agencies; which other agencies are supporting the beneficiary, how much support is being received from each of the other agencies, which agencies Community Chaplaincy has referred the beneficiary to etc. This would provide benefit for evaluation purposes (see recommendation six).

In addition to a thorough and well-documented assessment process provided for Beneficiaries, the Community Chaplaincy also make use of a database detailing contact between each Community Chaplain and each beneficiary. The presence of this data is beneficial; however this benefit may be maximized further. Currently this data is recorded in Microsoft Excel, and a new spreadsheet is started every three months. Each Community Chaplain has their own page within each quarterly spreadsheet. A single beneficiary, therefore, may appear on each of the Community Chaplain's pages in several quarterly spreadsheets. This makes calculations regarding amount of contact received by Beneficiaries on an individual level very time consuming. Therefore, it is suggested that databases are not split quarterly so that individual Beneficiaries can be tracked from the start of their intervention to the end (see recommendation seven).

#### *6.4 Inter and Intra Organisational Communication*

Given the project aims, an essential element would include good communication, understanding of existing provision, and contact with other service providers. This essential communication is achieved through regular attendance at various meetings with both internal and external agency representatives, and via continuous networking and awareness raising of the project with outside agencies. As the project has evolved over time, outside agencies have developed stronger links as they have become more familiar with the project's work. This has been achieved through continued and increasing use of these agencies services, the publication and circulation of regular annual reports, public speaking, and specific organised agency networking events. Clearly, the Community Chaplaincy Project has worked hard to build and maintain good links and communication with outside agencies with success. This is highlighted in interview data with various outside agencies in response to being asked about the level of communication they have with the Community Chaplains:

*'There's good communication between the Community Chaplain workers and me as a worker both inside the prison and since being out, they will keep a contact with me and let me know what's going on and update me...and they work well with other services as well, very friendly, always easy to get hold of, easy to talk to.'*

Another outside agency worker states:

*'I mean they've been pretty approachable when I've had you know to deal with them... he was easy to contact...they seem to be, you know professional, both friendly and co-operative, every time I've met them both, to be honest and that's both inside prison and outside.'*

A further outside agency representative stated:

*'they've got quite a lot of time for our role as well, they make sure that only the relevant people um come to us rather than wasting everyone's time, they make sure those that who we aren't able to offer a service to are able to get the service provided where they're eligible for it.'*

*'We've got their mobile phone numbers, um they've got our phone numbers, you know I've worked particularly close with both of them on a couple of cases, and even if it's just leaving a message on the answer machine they've been getting back to me within sort of a half hour to an hour anyway so they give sort of more holistic sort of route to the client in the way that we only get a snap shot of them for a couple of hours here whilst I can phone either one of them up and ask do you think this client is going to cope with this sort of tenancy? And they're able to give me much better advice you know...we've built up a pretty good relationship to be honest and I think its because we're specialising in offenders, it gave them someone, a sort of point of contact here...it's been brilliant, we occasionally meet up in the prison as well, and if [Community Chaplain] sort of got a problem, you know he wants to discuss maybe a client with us, he can meet us in the prison as well so that we all you know we always bump into each other there as well so it's great.'*

*'We've got their mobile numbers, you know if ever they've been with someone and they haven't been able to speak, they will call back straight away, they have been really, really helpful. Quite often it can be quite time consuming getting people up here, getting them to come back once we've e sort of investigated the housing history a bit more, you know they've just helped us from wasting time really you know they've got clients in on time rather than you know waiting half hour to an hour and they still don't turn up, um which means we are able to do a lot more um with our work as well...they've been quite happy with the work we've done that we can just get people through straight away we are quite a specialist team altogether if you like which worked really, really worked'*

There were no negative comments in relation to this point, so clearly from the interview data collected for the current evaluation, this is an area that has been improved and is working well for



the benefit of the project, the outside agencies involved and essentially for the Beneficiaries. This essential element of communication is not only important between Community Chaplaincy and outside support services, but is also important within the prison across departments. As an integral part of Swansea Prison, the presence of the Community Chaplaincy team is both permanent and well known with other departments/staff members throughout the prison. In relation to communication within Swansea prison the following excerpts illustrate opinion:

*'From my perspective, yeah there is very good communication cos you know I know all the people they are working with I'm not party to exactly how they are working with them, I'm not party to that and that's fine but if I've got a concern about someone I will share it with the Chaplaincy so I communicate, I think that, I'd like to think that I communicate and they communicate well with me cos they will come and see me and if they see there is someone on the register, they will come and check with me...he's asked me for a little bit of insight into what does the law mean and what does that mean, they are communicating you know so that they can best help the person... Consultation and communication, it's really good, it's imperative.'*

Another department representative stated:

*'We've always had really strong links with the Chaplaincy, probably because when one of our programmes started, we asked the staff if they could do a session as part of the after-care programme...So to me the, the links have always been there and they've always been such strong links...their offices are us opposite us so we can just pop in and we've got that personal communication that's quite easy but very valuable...Yeah, the communication is really good.'*

*'Everybody has been very approach, very approachable with all the communication you know there's been the formal way things are done but there's also been the from my point of view, I'll pop into their office or they'll pop into my office...We both make the effort to communicate with each other.'*

Again, there were no negative comments in relation to this point from departments within Swansea Prison, and clearly the high level of communication and ease in ability to contact the Community Chaplains can be viewed as a contributing factor to the success of Community Chaplaincy support. In relation to communication within the Community Chaplaincy team, again this revealed all positive opinion, and offers insight into the effects their high level of communication may have. This was evident across all three interviews with the Community Chaplains:

*'There's good communication by the fact that we respect and trust each other as individuals, we have team meetings, we share in training days, away days, we constantly have opportunity to discuss particular cases and situations both*

*within the prison and out on the field...very often if there's a situation that arises people will ring each other to get advice, to get some guidance, to get some clarification, to get some just general support in the situations that they face, so the communication side is very good...we all bring various experiences and expertise that we have from various other aspects of our lives, our education, our life experience, our contacts.'*

*'We're quite honest with each other...there's a lot of security there, I think there's a lot of there is a lot of communication, we have team meetings every week and if anything does arise, its brought to their attention straight away so communication yes, yes definitely. Yep, it couldn't work without that, it couldn't work.'*

*'Everyone knows their roles, there are obviously tensions, simply because they are dealing with people who have huge frustrations about the way society works...but it's the confidence in sharing those tensions and those frustrations, everyone knows where they are all going. There is this honesty, cards on the table and, it's an understanding of what people in the scheme, what problems and difficulties they face together with understanding and appreciating their successes.'*

In summary, there is a high level of communication both within and between the Community Chaplaincy and other prison departments/outside agencies. Interview data reveals an efficient friendly and reliable process in operation which could be understood as contributing to the overall success of the project. There were no problems highlighted within any of the interview data in relation to this point, and so no recommendations are necessary.

### *6.5 Support, Motivation and Engagement*

An essential element of engaging offenders in any intervention programme is motivation, which in turn increases likelihood of reduced reconviction rates, and more positive lifestyle outcomes. Certainly findings within the impact evaluation of the current report make a clear relationship between level of engagement and positive outcomes to support this assumption. Previous research has identified several factors pertaining to engagement and motivation particularly in relation to repeat offenders (Maguire & Raynor, 2006). These factors include; Planning & preparation for release, establishing a relationship with the prisoner prior to release, continuity of pre and post release intervention/support, an individually tailored response, 'prisoner led' intervention, empathetic support to maintain motivation, welfare support must not outweigh offender responsibility, and that assessed needs must be dealt with in a holistic manner not in isolation.

From the information presented so far, the Community Chaplaincy Project can be understood as addressing all of these requirements, but particular strengths of the project can be understood as

establishing a relationship with offenders, providing holistic support, continuity of support, and empathetic support. All of these points can be understood as contributing towards creating and maintaining responsibility for behaviour, and towards behaviour change. It could be suggested that these requirements conform to the particular strengths of the Community Chaplaincy provision, and that disjointed and impersonal interventions/support may not be as well equipped. Additionally, the gap in current service provision in relation to short term offenders, that is those serving sentences of twelve months or less, is such that many of these offenders receive little or no support in regard to resettlement. Again, this highlights the importance of the Community Chaplaincy Project's intervention which fills this specific gap in necessary service provision, particularly within the current population where 58% of Beneficiaries were serving sentences of less than twelve months (compared with the overall Swansea prison population of 26% serving short term sentences). The fluidity of the type of intervention offered by the project, and the ability to go beyond particular restrictions that many statutory support agencies have, all contribute to the provision of a service well equipped to fill gaps and provide a more complete holistic approach in support provision. Positive feedback from all beneficiary interviewees (both pre and post release) reinforce these suggestions, and provide further explanation of the unique type and scope of support provided:

*'He's helped me out with my kids to be honest to you, coz I've just split up with my wife, and she weren't too happy about me still seeing the kids, but [Chaplain] sorted that out for me, so... He's really helped me... You've always got help, they're only too willing to help you with anything, its not just housing and benefits, its anything, even if your feeling a bit down... a lot of people who wouldn't be able to do what these people can do for them, you know like these people go out and go back on the streets, or whatever... I just think they are doing well and they should carry on, there has never been anything like this before. I've been coming to jail for a few years and I've never had any help, although there is a lot of services that say they will help, but when you actually confront them, huh, you know? But these people are genuine, yeah, really good.'*

*'The fact that he'd be there at the end of the phone and apparently willing to travel to chat with me if I get into any difficulties is I think is a massive support, the only support really cos a probation officer can only play a limited role in my supervision when I'm released cos I am only on a 2 year license.'*

*'On coming out of prison I got a visit off [Chaplain] nearly every week now, he has done a lot for me since coming out of prison... help sort out the place... I think they've taken a massive step forward with the help and support that they provide for people in prison.'*

*'He visits me on a weekly basis he's taken me out once into the home town where I know people will be giving me mucky looks and he's been with me, and we've walked the town together.'*

*'They are providing me with support when I'm released, if I've got any problems, I will be able to contact the Chaplaincy. You know, and my understanding of it is anytime. So it's something, whereas with a probation officer, they are 9 – 5 you know, and not always can they speak to you. I've had alcohol and drug issues for many years, I feel I've overcome these problems in these last 2 years with my work with the drug worker that I've got here, and obviously one of the Chaplains has been through rehab, and a lot of the prisoners can really identify with him. I mean he's a sterling worker in all honesty. Because he's walked that walk if you like, he's been there, he's done it, he's turned his life around'*

*'There has been fantastic support for me here... in actual fact he's taken me from the prison on a day release to where I'm going to live. And he's going to probation with me and he's also going to social services with me. I couldn't wish for more, and it's a first. You know in all the years I have been coming in and out of prison, this kind of support has never been there before. You know, so it will all help as part of my rehabilitation I would say'.  
'The support that they provide, the understanding of problems that you are likely to face and the advice they give you to help to deal with problems that are obviously going to arise you know'.*

*'Chaplains are different to anyone else that's involved in the system, you can speak to the Chaplain about anything...there's that element of not being dishonest with them... but there's this thing that exists within prisons in that it's them and it's us, they [Chaplains] seem to break those barriers down and you seem to be more honest with the Chaplaincy and they seem to be more understanding of your situations'*

*'It's nice to know there is someone I can speak to'*

*'I honestly believe that I will not, that I will never offend again'.*

*'I've had excellent support and encouragement to carry on in the same vein that I've done my prison sentence...I certainly intend to carry on behaving in the way that I've behaved here in the last 2 years and with the support of the Chaplain is a bonus cos it's something that has never been offered in the past, you just seem to be chucked out of prison and get on with it.'*

*'You can talk to him about anything, and there's not a problem that they haven't got some experience, they always give you good advice and advice they give to you in such a way that you can understand it and relate to it...and they are always there for you, you've only got to put in an application in and they are there are for you. Whereas with other parts of the service here, you put applications in and you can wait days on end before you are seen by anyone... They are fantastic, I got to be honest with you, and they always make time for you.'*

*'I had great trouble with the council and things like and he took me around all the places and signed up where I needed to do and you know.'*

*'Before I got out from the last sentence the Chaplain, he came to see me every week for the last month or the last 2 months of my sentence, making plans, where I failed in the past, he was writing them down and trying to counteract them, be more constructive finding ways of avoiding temptation and I found it quite helpful.'*

*'He's there for me, I pick up the phone and he's there. One example, I was homeless about a month after release, I had nowhere to stay at all, I phoned [Chaplain] up, and he came down to pick me up and put me in a bed and breakfast in Swansea for the night which is a roof over my head and helped me a great deal that night.'*

*'It's helped a great deal, I know I haven't got to struggle through life now, it's given me faith and sees the good in me and not the bad... I was a drug user and I done some pretty bad things, but [Chaplain] saw through all of that, which gives me better self belief in myself.'*

*'When I couldn't get to my local probation which is a certain way from the area again [Chaplain] came down and travelled with me across to the next valley to my probation, so had he not done that then I would have been in breach of my license.'*

*'He met me on the gates cos didn't know whether my sister or my mother would meet me on the gates as was quite early in the morning and so [Chaplain] gave me a lift into the city centre and offered to take me to breakfast and have a quick chat about how I was feeling and that if I needed anything and if I needed to talk to anybody if I was in any sort of danger, he would be there, he gave me his number, his mobile and asked me to ring him after he left'.  
He's just a good man and helps you in any way he can.'*

*'He changed the way I was thinking you know, on relapsing and lapsing, you know he told me the ups and downs you know what would happen if I went down that road again you know and he kept me on the straight and narrow for you know quite some time.'*

*'Being in jail you are locked up you know 23 hours every other day and being out there on release its like 100 mile per hour, it's hectic and you just need to be near someone who knows what they are doing, who's got the you know the qualifications, you know, and the understanding basically.'*

*'It has made a lot of difference...just my whole attitude to being in contact with him whilst being in jail and on my release. I took it as a joke to be honest you know, been to jail now but it wasn't like that on my release he made me realise I could easily fall back into the same crowd and his attitude was brilliant, it changed the way I was living, it was good.'*

*'It has made me think twice about what I'm doing with myself you know and do I want to end up back in jail cos the people that I got myself into were the persistent offenders and I needed to get out of that crowd and stop the way that I was thinking you know and [Chaplain] did that for me'*

*'I could actually understand why I actually could benefit out of it. They are there for support and that was actually what I needed, I found it hard to talk to my family and since the relationship that I built up with [Chaplain], I knew I could trust him and he wasn't the sort of person just to agree with me and stuff you know.'*

*'I knew I could trust him and it would be confidential.'*

*'If it hadn't been for [Chaplain] I wouldn't have been able to cope.'*

*'In my opinion, if it weren't for [Chaplain] I think I would have been dead a long time ago, cos when I was so low, he brought me out of that, lifted my spirits a bit.'*

*'With their support, I see my future looking pretty good.'*

*'Made me realize that at 51 years of age that there's more to life than all this nonsense that has been going on in my life, the main problem obviously has been alcohol, and they certainly helped me in my determination to abstain from alcohol in the future..... They seem to have a better understanding of the problems of alcohol in many, many respects than the care workers within the prison'*

Clearly from this information, the service from the perspective of the Beneficiaries can be understood as providing vital practical and emotional support for those who may otherwise receive very little. This is achieved not only by identifying support needs, but also by building trusting relationships over time, and providing adaptable and stable support as necessary during the transition process from prison to community. In line with previous research, it could be suggested that this process of relationship building facilitates engagement, increases motivation and promotes positive behaviour change. However, as there is no objective measure of motivation in use at present, this cannot be validated within the current research, and as such it is suggested that a validated measurement tool is implemented. This would provide measurement of changes in Beneficiaries' motivation over time, and allow comparisons and associations to be made between engagement, motivation, behaviour change and re-offending rates within future evaluations, and also may provide more insight into issues associated with attrition and retention rates (see recommendation two).

There were no negative comments during these interviews in relation to the Community Chaplains, although there were a few suggestions in relation to how the service could be improved:

*I do feel that perhaps a few more Chaplains could be employed...that is the only criticism I would have, that they could spend more time with us but they haven't got the time, they seem restricted, I can only speak of my experience with them, we seem to be restricted with the time that we can spend with them.'*

*Perhaps having more of them in the prison itself to, to help the people cos I think they are overworked.'*

Clearly then, the only improvement that can be suggested here, is the provision of more Community Chaplaincy staff, however this is not possible at present due to funding restrictions, but is considered as an important point to highlight within the current evaluation. The representative interviews highlighted very similar points, reinforcing information already presented in regard to 'filling in the gaps', consistency and the value of the support:

*It gives the prison another dimension in how you can support people.'*

*'A lot of the people in here are very damaged, very few have the support of relationships and you know the difference between coming back into prison and possibly making it, may very much depend on what happens to them in the very first 24 hours of being released and I think that possibly the biggest impact the Chaplaincy has is for those who want it, it will support them through that very difficult transition... people have to report to probation, if they have to go job seekers, if they have to go for drug appointments, if they have to medical appointments, the Chaplains will gently ease them into that. There maybe those contacts which they didn't make last time which resulted in them coming back so I think to be able to engage with people in a much more human way gives the project a real uniqueness which other resettlement projects and behavioural programmes don't quite have.'*

*It's very much a question really of them assessing really what offenders need at particular times and I think within that they are very, very skilled. They also have the ability which you know is perhaps very good, you know to go back and see people when they feel they need a bit of moral support in a kind of non intrusive invasive way, so I would say the way they work is exceptionally good.'*

*'As well as the consistency, I would say one of the strongest points is the fact that they will keep working with somebody and they will go the extra mile whereas a lot of other services will have times when they're closed and not available, they're able to stretch things a little bit more you know and go an extra mile to help, and I think they don't have as many rules and regulations as normal community workers.'*

*'They've got the kind of spiritual content to their work if actually people want that but they've also then got their other hats which is kind of being able to support people through very difficult issues, perhaps family issues, mental health issues, giving people confidence, um when they actually move out of prison and I would say that the biggest advantage they have and the biggest way its developed is they actually can form relationships with people before they leave so that they are actually able then to work with them here, through the gates for a continued amount of time through it, so it's very much developed in the range of support they would offer people which I think is reflected in the fact that we have far more complex offenders coming into prison, you know people with quite a lot of substance misuse, people with mental health issues, people with relationship problems, people who are homeless, people who have difficulties in basically living skills and basic skills, so although the prison is able to address some of those, if they are short sentences, they don't really have the time, the Chaplains are actually able to sort of befriend and work with people.'*

*'There are prisoners who don't have any drug or alcohol problems to report or don't feel they need to work on it, perhaps they are not likely to seek help if they need to, and they are able to get that support from the Chaplains so people don't fit the criteria for other things, it's a very broad range of help people can access the Chaplaincy service, so I think that's why the Chaplaincy service is at its best.'*

*'There are a lot of people coming out of prison who don't have any of that kind of support, people who are serving less than a year, if they are serving less than a year then it means they got limited support on the outside so the Chaplaincy can fill that gap and it does fill that gap you know, everybody here knows that the Chaplaincy sit under the reception board and everybody in the prison knows the help is there...[offenders] may not have anywhere to go, and we have a resettlement office here and we can point them in the right direction, we don't actually find housing for them, so that can be a daunting, a daunting time for someone, leaving prison with nowhere to go, with no support out there from any statutory agency and so the Chaplaincy fill that gap, I believe the Chaplaincy fill that gap, and you know they do a sterling work.'*

*'It's got to impact on the community in terms of public protection because if there is support out there they can be guided, they can be guided into not committing offences because they haven't got any money to buy food but actually taken into the DSS so they can get an emergency payment or whatever. The support is there if they want it and the continued support as well if they want it, I mean the whole thing is about letting go, isn't it and for people to re-establish themselves but sometimes we all need that little bit of help in the beginning.'*

*'I think it's very important, I think it's very, very important because probation officers are seen as authority, prisons are seen as authority, education is seen as authority, and the Chaplains are seen as people who will sit and listen. We might do all those things as well but that's how they view us. And it's good to have that balance you know?'*



*'I think it would be good if it was set up in more prisons, others could benefit from the same service as Swansea is having.'*

The representative interview data consisted of many positive examples and opinions of the range, value and necessity of Community Chaplaincy support, and provides clear explanation of how the project fills the gaps in existing service provision.

In reference to improving service delivery however, one representative suggested information sharing between probation and the Community Chaplains could be beneficial:

*'If you looking at further developing it, the Chaplaincy are very different bodies, I've come from a statutory body and mine is all about protecting the public, it is about reducing the offending, it's about reintegrating the offender back into the community, which is something the Chaplaincy are trying to do as well, so my work is all about risk and reducing risk, so how I think it may develop is for the Chaplains to have a better insight into what we do...I think that for the Chaplains to understand maybe a little bit more about the criminal justice system, our role in it and how we manage risk in the community...there are some people who are quite dangerous and are leaving prison cos they've served all their time and they are leaving on their license expiry date so it's looking at if the Chaplains were working with anyone like that then we would still be involved through MAPP A and I wonder if they would like to have a little bit of knowledge about MAPP A and the process and how we look at managing risk to the person and the community.'*

Given this comment, it may be beneficial for the Community Chaplains to act on this suggestion in order to ensure most appropriate support is provided, and to ensure continued consideration of public safety at all times (see recommendation eleven). Further improvements were suggested in relation to increasing staffing levels, increasing length of time in which support is provided after release, and in relation to funding constraints:

*'As time scales goes with things the Chaplains actually support the people for quite a long period of time but if it could be even longer that would be beneficial cos they do need an awful lot of support when they leave here... cos most of them have no idea how to live in, in the real world.'*

*'Well I know they're only allowed a certain period of time afterwards, there is nothing infinite or whatever, it is not time limitless, there is a time limit and maybe that could be extended.'*

*'More Chaplains I mean there's only so many of them isn't it? And they can't get round every single person'*

*I think, I think if there was one thing I could change about the project would be our funding, you know that we have a far longer term, more strategic way of accessing funding, you know we are currently trying to access funding for April, next year well you know its December and we still don't know and I think constant worry of where we are going to find the funding to keep the project going.'*

The interview data provides a more detailed understanding of the service provided by the Community Chaplaincy Project, and provides insight into engagement, motivation, and changes in attitudes and thinking of those engaged in the project. A very positive view of the project is evident from the perspective of both the Beneficiaries and the representatives. Suggestions for improvements enforce this positive perception as they consistently suggest a need for more Community Chaplains and provision of longer post release support. Clearly, this would not be possible without increasing funding which in itself is another problem that was highlighted within the interview data. Suggestion is also made to further the Community Chaplaincy understanding of the role of probation with their Beneficiaries, and methods of managing risk for offenders released into the community in order to ensure support reaches its full potential and fully considers public protection. In addition, in order to provide a more objective measure of the level of motivation, it may also be valuable to implement a validated measurement tool in order to gauge changes in Beneficiaries' motivation over time (see recommendation two). This would also allow valuable comparisons to be made in future evaluations, and may provide more insight into issues associated with attrition and retention rates.

## *7. Summary of Results*

19.7% of offenders offered support accepted it.

Beneficiaries received on average a total of 16.08 contacts (lasting a total of 25.5 hours) from the Community Chaplaincy. On average Beneficiaries received more hours post release compared to pre-release (13.44 hours and 14.81 hours respectively). This is positive as it shows Beneficiaries received increased support once they transitioned from custody to the community, where they arguably would have needed extra support to put their resettlement plans in place.

The average age of Beneficiaries was 29.32, with most (42%) falling into the 26 – 35 age category. The majority of Beneficiaries were White British (95.8%) and stated they had no religion (72.7%).

Beneficiaries were likely to be serving short sentences (58.1% serving sentences less than 12 months) and to be repeat offenders (average of 2.82 previous sentences since the age of 21).

Further, at screening, 40.8% of Beneficiaries stated they had no firm accommodation, 86.6% had no job (with 51.4% receiving job seekers, and 34.5% receiving incapacity benefit), and 75.2% had substance misuse issues (44% drugs, 16.3% alcohol and 14.9% drugs and alcohol).

Figures reveal a 67.6% retention rate (completers), and a 32.4% attrition rate (non-completers).

Results indicate that there is no relationship between the level of risk (assessed via OASys risk assessment) of Beneficiaries and the amount of contact they receive from the Community Chaplaincy, revealing that the risk principle has not been met (see recommendation ten).

It appears that offenders serving sentences for miscellaneous crimes (such as those for non-compliance) are more likely to withdraw from the programme. Further, Beneficiaries with more previous sentences are significantly more likely to withdraw from the programme. This would suggest that for the current sample the programme was more effective for those with fewer or no previous sentences. Possibly suggesting a

mismatch between offender and service characteristics in relation to repeat offenders. Service characteristics including ability and interest of staff may need to be examined in order to provide more motivation, interest and compatibility for those more prolific offenders. This finding also suggests that there may be a need to pay more attention to programme participation and monitoring for this group (see recommendation eight).

There were significant improvements in all 8 domains between the pre and post release timeframes. This indicates a huge success for the Community Chaplaincy Project, in not only meeting its aims, but also in the significant reductions in criminogenic factors and improvements to Beneficiaries lives. These results are subjective, and only indicate that Beneficiaries perceive their status in each domain is improving, there are no objective measures of improvement (see recommendation four).

There were significant improvements in overall holistic scores between pre and post timeframes. Thus suggesting Community Chaplaincy is having a positive holistic effect on Beneficiaries.

The most common domains listed as being number one priority pre and on release are Accommodation, Substance Use and Relationships. Post release, Education, Training and Employment is most commonly rated as Beneficiaries number one priority, followed again by Substance Use, Relationships and Accommodation.

Excepting engagement with Community Chaplaincy, the largest and most significant improvements were in Accommodation, Attitudes, Thinking and Behaviour, and Relationships.

Such large improvements in Attitudes Thinking and Behaviour is particularly encouraging, as it is the factor most integral to the person, and therefore it can be hoped that it produces the most reliable and stable changes, enabling the Beneficiaries to remain more resilient against negative life events and to avoid the temptations into offending behaviour.

Satisfaction rates were high, with 100% Beneficiaries being satisfied pre release, and 99.3% being satisfied on and post release.

Although slightly more Beneficiaries returned to custody at HMP Swansea in comparison to Decliners, this difference was not significant. It is then suggested that the differences in return rates may be due to Beneficiaries having significantly more

problems in certain criminogenic areas (accommodation, employment, substance use) compared to decliners. This point is reinforced by the finding that negative statuses in two of these areas (substance use and accommodation) are associated with higher rates of return. The follow up period of returns data is much shorter (average of approximately 40 weeks) compared to standard re-conviction follow ups (typically two years) indicating the returns rate may underestimate the actual number of Beneficiaries who will return over time (see recommendation three).

A positive relationship between post-release engagement score and overall holistic change suggests that offenders who were engaging more displayed bigger improvements in holistic scores. Additionally, the amount of contact between the Community Chaplaincy and the beneficiary was positively related to post-release scores on the engagement domain, thus suggesting that the more contact Beneficiaries have with Community Chaplaincy, the more likely they are to engage and therefore experience the benefits of this engagement such as large holistic lifestyle improvements (see recommendation nine).

The detailed records kept of all offenders approached prior to release, provide data on a suitable comparison group to Beneficiaries. The assessment processes provided by the SPIDER assessment are thorough and well documented, and allow simple and easily accessible information regarding Beneficiaries progress to be observed. Similar good record keeping is observed in regards to qualitative data being collected relating to Beneficiaries perceptions of types of changes that they have made between time points, on each domain, adding context to assessment data.

The domains covered by the SPIDER do not fully match the NOMS 7 pathways; the SPIDER Relationship domain is a suitable upgrade from the NOMS Children and Families domain, however, the Use of Time domain does not suitably match the missing NOMS pathway of Debt and Finance, although may be covered within parts of the other domains of SPIDER. The levels of Community Chaplaincy intervention are only listed as 1 -5 and are not defined and therefore are not standardised. No detailed information is collected about the level of involvement of other supporting agencies. Data collected regarding hours of contact is not recorded in the most proficient manner (see recommendation one).

There is a high level of communication both within and between the Community Chaplaincy and other prison departments/outside agencies. Interview data reveals an

efficient friendly and reliable process in operation which could be understood as contributing to the overall success of the project. There were no problems highlighted within any of the interview data in relation to this point, and so no recommendations are necessary.

A very positive view of the project was evident from the interview data. An essential element of the success of the Community Chaplaincy Project is related to the high level of relationship building and empathetic understanding felt by Beneficiaries about their Community Chaplains. A common theme of the interview data was the flexibility of the intervention to the individual needs and wants of Beneficiaries. Similarly, it was repeatedly mentioned that Community Chaplaincy filled a gap in current service provision for short term sentenced offenders, and were able to transcend the restrictions of existing statutory service provision.

There are clearly improvements evident in beneficiary outcomes, a high retention rate, and a low rate of returns evident within the current evaluation, suggesting the project is achieving the aims of providing holistic support, contributing to community reintegration, and creating and maintaining partnerships with the prison and community agencies.

Given these findings, it is highly likely that the project is responsible for reducing reoffending for those who take part. However, it cannot be objectively concluded that this is the case. This is due to the lack of a suitable comparison group, and the short time frame used to quantify those returning to custody. What is clear though is the unique approach provided by the building of trusting relationships, fluidity of the support provision, and the continuity of care provides a service well suited to fill the gaps of existing service provision. This would suggest that sustained funding can only be beneficial to the project, the Beneficiaries, and that it is likely to play a significant role in reducing re-offending within HMP Swansea.

## *8. Recommendations*

Recommendation One: Adapt the SPIDER assessment to match the NOMS 7 pathways more closely.

Recommendation Two: Assess Beneficiaries' motivation at each of the assessment timeframes. The Readiness to Change Treatment Version Questionnaire (see references for source) can provide a reliable and valid measure.

Recommendation Three: Continue collecting return to HMP Swansea data for two years post release for all Beneficiaries.

Recommendation Four: Include objective assessment of Beneficiaries over all timeframes. This could be as simple as having the Community Chaplain rating the beneficiary on the same SPIDER assessment to provided a more objective comparison.

Recommendation Five: Provide clear definitions of levels of Community Chaplaincy Intervention. For example, a simple likert scale including no support (1), minimal support (2), some support (3) lots of support (4) total support (5) giving standardised examples for each level of support.

Recommendation Six: Provide information of supporting agencies, differentiating between those referred by the Community Chaplaincy and those arranging via alternative support provision.

Recommendation Seven: Covert the existing hours of contact database from quarterly logs split by Community Chaplain to a single database which includes all relevant information.

Recommendation Eight: Identify prolific offenders (those with more previous sentences) and offenders serving sentences for miscellaneous crimes (such as those of non-compliance) on the programme, ensure the Community Chaplaincy Project is being responsive to their needs, and that more attention is paid to programme participation and monitoring for this group. Extra time (increased contact hours over a longer timeframe) and resources need to be directed at engaging these offenders. This may include further training from staff to increase competencies at engaging with more difficult and criminally entrenched offenders to maximise treatment effects.

Recommendation Nine: Increase contact hours and extend post release support timeframe (this may require more project staff) in order to maximise beneficiary engagement and holistic improvements, to ensure that the service reaches its full potential.

Recommendation Ten: Match OASys risk classifications with appropriate hours of contact. High risk offenders should receive high intensity intervention.

Recommendation Eleven: Increase the Community Chaplaincy's understanding of the role of probation and other agencies supporting high risk offenders, to ensure most appropriate support is provided, and to ensure continued consideration of public safety at all times.



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*List of Appendices*

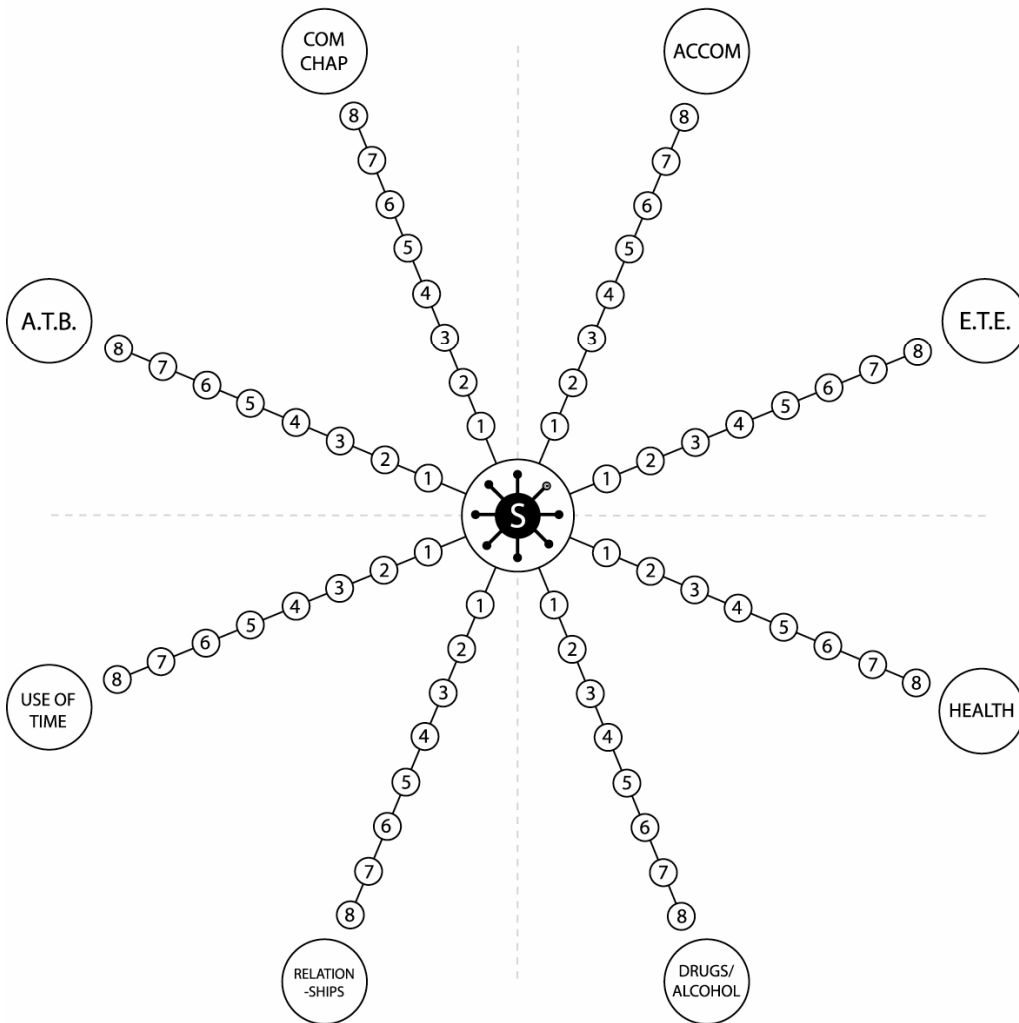
*Appendix 1: SPIDER Assessment*

*Appendix 2: Domain Outcomes*

*Appendix 3: Example of Individual Outcome Monitoring Output*

Appendix 1: SPIDER Assessment

 <p><b>SPIDER ASSESSMENT</b></p>	BENEFICIARY _____	PRIORITISATION:
	DATE _____	1 2 3 4 5 6 7 8
	REVIEW <input type="checkbox"/> PRE <input type="checkbox"/> ON <input type="checkbox"/> POST	ACCOMODATION <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	COM. CHAPLAIN _____	E.T.E. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMPLETED BY <input type="checkbox"/> COM. CHAPLAIN & BENEFICIARY	HEALTH <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	DRUGS/ALCOHOL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> COM. CHAPLAIN ONLY	RELATIONSHIPS <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	USE OF TIME <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> BENEFICIARY ONLY	A.T.B. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	COM CHAPLAINCY <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



## Appendix 2: Domain Outcomes

### SPIDER Leg 1 - Accommodation

1	NFA with no local connection to area returning
2	NFA with local connection to area returning to
3	Temporary accommodation (friends / relatives / B&B)
4	Returning to unstable accommodation in wrong area
5	Returning to stable accommodation in wrong area
6	Return to family home
7	Stable short term accommodation
8	Stable long term accommodation

and Alcohol

### SPIDER Leg 2 – Education, Training and Employment

1	Unskilled, unmotivated – awaiting benefits
2	No finance to improve ETE
3	Desire to work (ETE) but no confidence
4	Lost job due to coming to prison
5	Has qualifications / experience but no job (ETE)
6	Confidence to work – actively seeking work (ETE)
7	Has potential job (ETE) to go to on out
8	Full time employment (ETE)

### SPIDER Leg 3 - Health

1	Life threatening disorders
2	No doctor
3	Banned from Doctors, still requires care
4	Medication required
5	Knows of Doctors - can't access medication
6	Engages with Community Health team
7	Has doctor and access to medication if required
8	Access to total NHS care inc. Dentist

### SPIDER Leg 4 – Drugs

1	Resigned to being a chaotic user
2	Occasional use in custody
3	Abstinent in custody only
4	Addressing substance misuse issues in custody – Short term
5	Addressing substance misuse issues in community – Long term
6	Engaged with community substance use agencies
7	Gaining in confidence in controlling substances
8	In total control

### SPIDER Leg 5 – Relationships

1	Has negative relationships – total disregard for others
2	Inappropriate relationships
3	Moods / emotions affect relationships
4	Wants to change in order to have good relationships
5	Takes responsibility for those close to him
6	Takes other people's feelings into account
7	Learning to commit to obtain stable relationships
8	Long term / stable relationships – outgoing, confident

### SPIDER Leg 6 – Use of Time

1	Have no interest in anything
2	Takes advantage of support but no personal motivation
3	Interested but finds it difficult to motivate themselves
4	Motivated –learning to engage
5	Motivated – engages well (short term)
6	Motivated – engages well (long term)
7	Learns to distance himself appropriately
8	Living confidently

### SPIDER Leg 7 – Attitudes, thinking and behaviour

1	Resigned to life of crime
2	Maintains contact with former associates
3	No confidence to break away but would like to
4	Begins to talk positively about reform
5	Engages to address ATB
6	Looking at alternative ways to previous ways
7	Plans for success – using available support
8	Living without crime or criminal thoughts

### SPIDER leg 8 - Engagement

1	Being prepared to engage with Community Chaplaincy
2	Beginning to form a relationship based on trust
3	Allowing Community Chaplaincy to offer alternatives
4	Established trust with Community Chaplaincy
5	Acting upon those alternatives
6	Seeking Community Chaplaincy input into situations
7	Allowing Community Chaplaincy input to alter my behaviour
8	Fully engages and values Community Chaplaincy help

*Appendix 3: Example of Individual Outcome Monitoring Output*

