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## Intermediate outcomes of mentoring interventions: a rapid evidence assessment

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This report summarises the findings from a rapid evidence assessment (REA) which sought to identify intermediate outcomes from mentoring projects.<sup>1</sup> The REA is the first stage in a wider project funded by the National Offender Management Service (NOMS), to develop a framework for measuring intermediate outcomes which can be adopted by organisations that deliver mentoring to offenders.

### Key points

- There are many different kinds of mentoring. Programmes vary considerably in aims, content and the nature of the mentor–mentee relationship. This diversity makes it difficult to generalise about effectiveness and good practice.
- There is a lack of good-quality research evidence on the impact of mentoring projects with offenders. Available studies indicate that some kinds of mentoring may influence reoffending through acting as a ‘bridge’ to other services and providing continuity of support ‘through the gate’.
- Tentative evidence indicates that mentoring projects may be associated with improvements in mentees’ employment outcomes, and may improve engagement in other programmes and interventions.
- More tentative evidence suggests that mentoring projects may be associated with improvements in mentees’ housing situation. Very limited evidence suggests they may be associated with reductions in substance misuse.
- There is very limited evidence that mentoring programmes can increase coping abilities, improve family and peer relationships and reduce pro-criminal attitudes.
- All of these ‘intermediate outcomes’ can be theoretically linked to reductions in reoffending behaviour. Most relate to criminogenic or protective factors identified widely in the academic and research literature, and hence are likely to contribute to the process of desistance from crime.
- The research team recommends these intermediate outcomes are considered for inclusion in a proposed toolkit which can be adopted by organisations delivering mentoring interventions to measure their activities and impacts.

<sup>1</sup> Full report available on request from [research@justice.gsi.gov.uk](mailto:research@justice.gsi.gov.uk)

## Context

This report summarises the findings from an REA which addresses three research questions.

- What evidence is there of a direct relationship between mentoring or peer mentoring and reduced reoffending?
- What positive outcomes, apart from reductions in reoffending, have been claimed, hypothesised or demonstrated to have been brought about (partly or wholly) by mentoring and peer mentoring?
- In each case, are there established or plausible links between the (intermediate) outcome in question and reductions in reoffending?

The purpose of the REA is to identify evidence to guide the construction of potentially valid measures of intermediate outcomes achieved as a result of mentoring projects. In later stages of this project these intermediate outcomes could be included in user-friendly toolkits, which could be used by provider organisations to measure their activities and impact.

### **Why would measuring intermediate outcomes be valuable?**

Intermediate outcomes are those that can be directly or indirectly associated with reductions in reoffending: for example, reducing substance misuse or improving positive relationships. They are intermediate in the sense that they indicate that an offender is making positive changes towards an offence-free future, but is not yet considered to have successfully stopped offending. This may be because they have made only partial progress towards change, or they are unable to demonstrate successful avoidance of offending behaviour because they are still in custody. Improvements in intermediate outcomes may indicate successful steps on a journey towards the desired final outcome of reduced reoffending and desistance from crime. It may be that mentoring can provide a bridge into appropriate services, help maintain mentees' motivation and support them to overcome obstacles and thus desist from crime.

In the context of an increased focus on intervention outcomes (Ministry of Justice, 2010) (including outcomes beyond reduced recidivism alone), the advent of payment by results and the involvement of more third sector and private providers, there is a need for a strong evidence base about the

effectiveness of services for offenders (Ministry of Justice, 2012), and more robust and reliable ways of measuring their impact – measuring intermediate outcomes might provide answers to these challenges.

### **What is mentoring?**

Mentoring is often defined as a one-to-one, non-judgemental relationship in which an individual gives time to support and encourage another (Active Community Unit, Home Office, cited in Mentoring and Befriending Foundation, 2008). Beyond this basic definition, there is considerable variability in the way in which mentoring is delivered. It can include:

- peer mentoring schemes;
- programmes in prison, in the community and 'through the gate';
- programmes in which mentoring is the only or main service provided;
- those where it is delivered to support other kinds of interventions.

Mentoring programmes are often client-led, meaning that their contents and objectives are tailored to clients' needs, and thus may differ on an individual basis. This poses challenges to those who wish to systematically capture intermediate outcomes of a mentoring programme.

## Approach

A systematic search of electronic databases and specialist websites was employed to identify relevant academic and grey literature. Unpublished literature was identified by contacting academics who work in the field. This combined approach ensured that the review included the best available academic research, as well as smaller evaluations conducted by service providers.

The review was limited to studies published between 1990 and 2012 relating to mentoring with those aged 18 and above.

## How was the quality of the research studies assessed?

A mixed method approach to quality assessment was employed including use of the Maryland Scale (Sherman *et al*, 1997),<sup>2</sup> the Evidence for Policy and Practice Information and Co-ordinating Centre Weight of Evidence assessment (Gough, 2007) and the Government Social Research Network assessment tool for qualitative research (Spencer *et al*, 2003). Overall, the assessment focused on the following.

- Relevance – to what extent was the study considered relevant to the topic area of mentoring and offenders, providing information that is relevant to the construction of a toolkit?
- Transparency – to what extent were the aims of the study and research methods used clearly stated?
- Robustness – to what extent did the study follow good practice in terms of data collection and analysis?
- Coherence – to what extent were the methods chosen suitable for the stated aims of the study? To what extent are there clear and justifiable links between the findings and the conclusions?

## How were the findings consolidated?

A narrative approach was used to synthesise findings from the identified sources, discussing the strengths and limitations of each study to build up a rich description of the evidence base. This approach:

- enabled the review to be inclusive (including methodologically limited studies which scored lower on the Maryland Scale), while also being robust (greater weight was given to those papers that were of higher methodological quality);

- made the best of the available literature while being very clear about the quality of the evidence base; and
- allowed the analysis to draw on wider desistance literature and theory.

Overall, 23 studies were included in the review, of which nine scored level 3 or above on the Maryland Scale.<sup>3</sup> Among the included studies:

- nine are peer-reviewed academic journal articles, 14 are grey literature research reports;
- ten are conducted in the UK, nine in the USA, three in Canada and one in Australia;
- three UK studies scored 3 or above on the Maryland Scale;
- eleven report on programmes delivered in the community only, three in prisons only and nine 'through the gate'.

## Results: question 1 – the effect of mentoring on reoffending

Of eight studies graded level 3 or 4 on the Maryland Scale, six detected some statistically significant positive impacts of programmes involving mentoring on reoffending, rearrest and time-to-rearrest (Bauldry *et al*, 2009; Braga, Piehl and Hureau, 2009; Clancy *et al*, 2006; La Vigne, Brazzell and Small, 2007; Lindquist *et al*, 2009; Wilson, Cortoni and McWhinnie, 2009). One level 3 study detected positive effects which were not statistically significant (Maguire *et al*, 2010). Overall, however, evidence of the effect of mentoring on reoffending is not conclusive: in some studies mentoring was only one element of the programme, and the available evidence does not allow the impact of mentoring alone to be isolated.<sup>4</sup> In others, participants voluntarily engaged in mentoring, possibly introducing selection bias in favour of those most ready and motivated to change.<sup>5</sup>

Available evidence indicates that 'through-the-gate' mentoring is more likely to reduce reoffending than mentoring which is limited to a prison setting (Clancy *et al*, 2006; Maguire *et al*, 2010). There were fewer studies on the effects of peer mentoring than non-peer mentoring.

<sup>2</sup> The Maryland Scale uses five separate levels for judging methodological rigour -Level 1: Correlation between a crime prevention program and a measure of crime or crime risk factors at a single point in time. Level 2: Temporal sequence between the program and the crime or risk outcome clearly observed, or the presence of a comparison group without demonstrated comparability to the treatment group. Level 3: A comparison between two or more comparable units of analysis, one with and one without the program. Level 4: Comparison between multiple units with and without the program, controlling for other factors or using comparison units that evidence only minor differences. Level 5: Random assignment and analysis of comparable units to program and comparison groups.

<sup>3</sup> Some studies utilised different research designs for different outcomes and were accordingly given several grades.

<sup>4</sup> For example, this was the case in studies by Lindquist *et al*. (2009) and La Vigne, Brazzell and Small (2007).

<sup>5</sup> This was the case in the study conducted by Bauldry *et al* (2009).

The literature reviewed does not allow the identification of particular client populations who may be more likely to benefit from mentoring interventions.

### **Results: questions 2 and 3 – intermediate outcomes**

Evidence on six clusters of possible intermediate outcome measures was identified in the review:

- 1 employment outcomes;
- 2 engagement in programmes and interventions;<sup>6</sup>
- 3 housing outcomes;
- 4 health outcomes;
- 5 attitudinal, cognitive or motivational change;
- 6 family and community relationships.

#### **Employment outcomes**

The review included seven studies that examined employment outcomes: all but one found that mentoring was associated with an improvement in employment outcomes, including two studies graded level 4.<sup>7</sup> There is a well-demonstrated link between increased employment and reduced reconviction (Social Exclusion Unit, 2002<sup>8</sup>) and the role which employment can play in the desistance process.

#### **Engagement in programmes and interventions**

Evidence from one level 3 study found that mentoring may be associated with increased participation in other programmes designed to reduce reoffending and encourage desistance (Bauldry *et al*, 2009). Three studies, graded level 1 and 2, showed similar results. Two level 2 studies showed no effect. Evidence concerning links between programme engagement, the desistance journey and reduced reconviction is not conclusive, although such links have a strong theoretical basis in the wider literature.

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<sup>6</sup> It is recognised that programme engagement may be seen as a process or output measure. Its inclusion reflects the fact that several studies report on client engagement as an intermediate outcome.

<sup>7</sup> Level 4 studies were Bauldry *et al* (2009) and Lindquist *et al* (2009). Other studies in this cluster were Cox and Cook (2011), Lobb (2011), Maguire *et al* (2010) and Williams (2008). While Clancy *et al* (2006) presented data on employment outcomes for some participants, these data were not robust enough to be used as an outcome measure.

<sup>8</sup> See also 'Transforming Rehabilitation. A summary of evidence on reducing reoffending', Ministry of Justice, 2013.

#### **Housing outcomes**

Available empirical evidence of the effect of mentoring on housing is inconclusive. One level 3 study found no significant effect of mentoring on housing. However, a level 2 study and two qualitative studies which could not be scored on the Maryland Scale did report improvements in housing outcomes. Thus the weight of evidence supports a hypothesis that mentoring might improve mentees' housing situation. There are proven empirical links between housing and reduced reoffending.

#### **Health outcomes**

This category was subdivided into two groups: substance misuse and other health-related outcomes.

##### **Substance misuse**

All studies reviewed in the REA suggested a positive direction of change: one level 4 study showed an association between mentoring and reduced substance misuse, but the findings were not statistically significant. A level 2 study found that mentoring increased contact with specialist drug treatment agencies. Further, there is a strong wider evidence base demonstrating a link between drug use and reoffending.

##### **Other health-related outcomes**

Evidence for other health outcomes is inconclusive. A level 4 study showed no effect, but two qualitative studies with small sample sizes report mentees' accounts of drawing great support from mentors at times when they were contemplating suicide. There is no strong evidence of the effects of mentoring on these outcomes.

##### **Attitudinal, cognitive or motivational change**

This category was subdivided into two groups: coping and perceived life problems, and attitudinal, cognitive or motivational change.<sup>9</sup>

##### **Coping and perceived life problems**

All five studies reviewed which looked at this outcome (all of which were level 2 or could not be scored on the Maryland Scale) reported positive effects of mentoring on coping, stress and mentees' perception of their life problems. The evidence is not conclusive, but offers some support to a hypothesis that mentoring might improve these psychological skills.

<sup>9</sup> Coping is closely related to both attitudinal change and psychosocial health. The outcomes are discussed separately to capture differences in the strength of available evidence in the reviewed studies.



### **Attitudinal, cognitive or motivational change**

There were no level 3 studies which looked at this outcome from mentoring programmes. Two level 2 studies reported that mentoring led to reductions in pro-criminal attitudes. Positive improvements in self-efficacy, motivation and feelings of self-worth were reported in one level 2 and one level 1 study. The link between attitudes and thinking patterns and reducing reoffending is demonstrated strongly in the desistance literature, and is central to evidence-based cognitive behavioural programmes for offenders. However, the mechanism through which mentoring might lead to improvements in attitudes is not clear from the available studies. Therefore, the inclusion of these types of intermediate outcomes in toolkits could be justified on the basis of the weight of evidence – that is, all reviewed studies pointing in the same direction – which warrants further testing.

### **Family and community relationships**

Two level 4 studies showed no effect of mentoring on exposure to negative peers or frequency of community activities. A level 2 study found improvements in mentees' perceived social support, and three qualitative studies (which could not be scored on the Maryland Scale) provide accounts of mentoring improving mentees' understanding of relationships and social capital. Thus, while inconclusive overall, the weight of evidence identified in the REA suggests a possible link between mentoring and improved relationships. There are strong theoretical links between improved positive family and peer relationships and the desistance process.

### **Implications**

The level of evidence in support of each of these intermediate outcomes varies. Some mentoring programmes have been associated with the kinds of outcomes listed above. Vitality, each of these intermediate outcomes has a strong theoretical link to desistance and reducing reoffending.<sup>10</sup>

The research team recommends that each of these six intermediate outcomes be considered for inclusion in toolkits designed to be used by provider organisations that are looking to improve the way that they measure outcomes and demonstrate the impacts of their work.

The inclusion of some intermediate outcomes, such as those relating to employment, can be justified on the grounds of the available empirical evidence. Others, such as attitude change, might be considered for inclusion on the grounds that they are as yet empirically unproven, but their inclusion provides opportunities to explore the mechanisms through which mentoring programmes may bring about positive changes, and to undertake further testing.

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<sup>10</sup> The theoretical link for health outcomes focuses primarily on mental health and substance misuse.

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