



HM Prison &
Probation Service

Technical Appendices:

Developing a toolkit to measure intermediate outcomes to reduce reoffending from arts and mentoring interventions

**Mike Maguire, Emma Disley, Mark Liddle, and Rosie Meek with
Nina Burrowes**

Ministry of Justice Analytical Series
2019

Preventing victims by changing lives



Her Majesty's Prison and Probation Service is committed to evidence-based practice informed by high-quality social research and statistical analysis. We aim to contribute to the informed debate on effective practice with the people in our care in prisons, probation and youth custody.

Disclaimer

The views expressed are those of the authors and are not necessarily shared by the Ministry of Justice (nor do they represent government policy).

First published 2019



© Crown copyright 2019

This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at National.Research@noms.gsi.gov.uk

This publication is available at <https://www.gov.uk/government/publications>

Contents

List of tables

List of figures

Appendix A: Intermediate Outcome Measurement Instrument (IOMI)	1
Appendix B: Results of principal component analysis – stage 5 testing with prisoners	4
Appendix C: Instruments reviewed	8
Appendix D: Further information about the dimensions	10
Appendix E: Further information about stage 6 piloting with providers	16

List of tables

Table B-1: Total variance explained – stage 5 testing with prisoners	5
Table B-2: Item loadings – stage 5 piloting with prisoners	6
Table C-1: Scales reviewed in stage 4	8
Table E-1: Providers involved in stage 6 piloting with providers	17

List of figures

Figure B-1: Scree plot analysis – stage 5 piloting with prisoners	4
---	---

Appendix A: Intermediate Outcome Measurement Instrument (IOMI)

Please say whether you agree or disagree with the statements on the next two pages by circling a response, for example:

I enjoy watching movies	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
-------------------------	----------------	-------	----------------------------	----------	-------------------

Please answer all of the questions and remember that there are no right or wrong answers. When answering the questions, think about how you feel today.

1. I have close friends I can trust	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
2. I don't really think about what I'm doing, I just do it	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
3. There are people who really understand me	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
4. My problems will dominate all of my life	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
5. I often do the first thing that comes into my head	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
6. There are people I can turn to when I have a problem	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
7. I tend to bounce back quickly after hard times	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
8. I make good decisions	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
9. I feel confident	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
10. I feel hopeless about my future	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
11. There are some people who I trust	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
12. I feel good about myself	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

13. I feel capable of making decisions	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
14. I have a hard time making it through stressful events	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
15. I owe it to myself to change	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
16. My life is full of problems which I can't overcome	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
17. Anyone can talk about changing themselves; I'm actually going to do something about it	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
18. I often do things without thinking of the consequences	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
19. I usually deal with problems well	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
20. I am confident that I can cope with unexpected events	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
21. I am really working hard to change my life	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Optional questions about relationships with staff, for use during or after an intervention:

22. The staff here have treated me fairly	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
23. The staff here have listened to me	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
24. The staff here do what they say they'll do	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
25. I feel able to trust the staff here	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
26. The staff here have helped me to think differently about myself	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

Please indicate whether the problems below are a big problem for you or no problem for you by circling a response to the right of the statement. Please answer all of the questions and remember that there are no right or wrong answers.¹

1. Problems with money	Big problem	Problem	Small problem	No problem at all
2. Problems with employment / prospects	Big problem	Problem	Small problem	No problem at all
3. Problems with health and fitness	Big problem	Problem	Small problem	No problem at all
4. Problems with housing	Big problem	Problem	Small problem	No problem at all
5. Problems with drugs	Big problem	Problem	Small problem	No problem at all
6. Problems with drink	Big problem	Problem	Small problem	No problem at all
7. Problems with relationships	Big problem	Problem	Small problem	No problem at all
8. Problems with gambling	Big problem	Problem	Small problem	No problem at all

¹ The eight questions about practical problems have been taken from CRIME-PICS II. Copyright M&A CRIME-PICS, 2013. All rights reserved. No reproduction or use is permitted without the prior written consent of M&A Research.

Appendix B: Results of principal component analysis – stage 5 testing with prisoners

Five factors were extracted based on scree plot analysis (Figure B-1). These five factors had eigenvalues greater than 1.5 and explained 50% of the variance, with subsequent factors adding minimally to the variance explained, as illustrated in Table B-1. Factor one however encompassed three theoretically distinct dimensions: resilience, wellbeing and agency / self-efficacy. So, it was decided that this factor would be separated into these three distinct subscales for further analysis (resulting in seven dimensions in total).

Figure B-1: Scree plot analysis – stage 5 piloting with prisoners

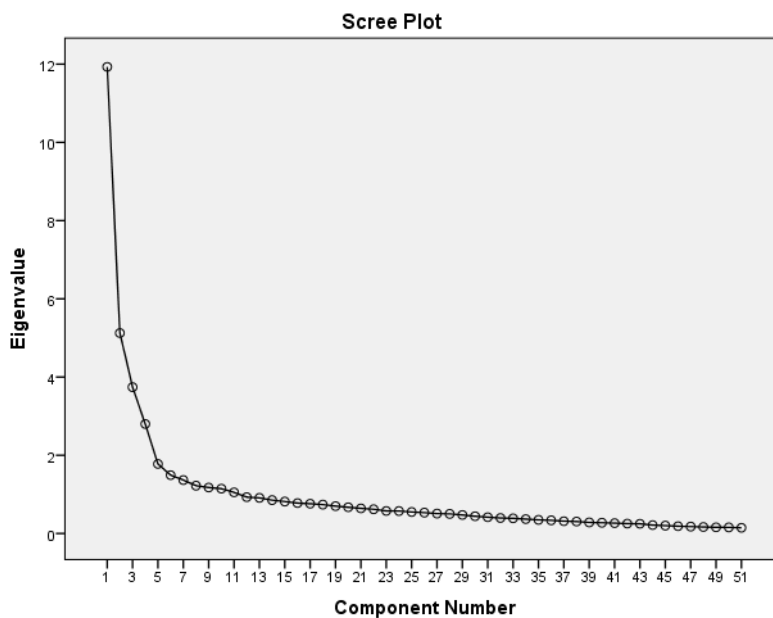


Table B-1: Total variance explained – stage 5 testing with prisoners

Component	Initial eigenvalues			Extraction sums of squared loadings			Rotation sums of squared loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	11.931	23.395	23.395	11.931	23.395	23.395	5.442	10.671	10.671
2	5.124	10.047	33.442	5.124	10.047	33.442	4.748	9.310	19.981
3	3.741	7.335	40.777	3.741	7.335	40.777	4.649	9.116	29.097
4	2.800	5.489	46.267	2.800	5.489	46.267	3.696	7.247	36.344
5	1.778	3.486	49.752	1.778	3.486	49.752	3.555	6.971	43.315
6	1.491	2.924	52.676	1.491	2.924	52.676	2.356	4.619	47.934
7	1.365	2.677	55.353	1.365	2.677	55.353	2.011	3.944	51.878
8	1.223	2.397	57.751	1.223	2.397	57.751	1.885	3.695	55.573
9	1.175	2.304	60.055	1.175	2.304	60.055	1.674	3.282	58.855
10	1.146	2.246	62.301	1.146	2.246	62.301	1.647	3.230	62.085
11	1.051	2.062	64.363	1.051	2.062	64.363	1.162	2.278	64.363

Rotated item loadings onto each factor are presented in Table B-2. Item loadings of less than .4 were suppressed due to their likely insignificance (Stevens, 1992).

Table B-2: Item loadings – stage 5 piloting with prisoners

Item	Loadings					Dimension
	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	
I feel confident	.776					Wellbeing
I tend to bounce back quickly after hard times	.723					Resilience
I feel good about myself	.672					Wellbeing
I am confident that I can cope with unexpected events	.658					Agency / self-efficacy
I usually deal with problems well	.657					Wellbeing
I have a hard time making it through stressful events	-.567					Resilience
I feel capable of making decisions	.533					Agency / self-efficacy
I find it hard to cope when things go wrong	-.512					Resilience
I make good decisions	.465					Agency / self-efficacy
I'm interested in trying new things	.447					Agency / self-efficacy
I often do things without thinking of the consequences		.788				Impulsivity
I don't really think about what I'm doing, I just do it		.774				Impulsivity
I often do things on the spur of the moment		.773				Impulsivity
I often do the first thing that comes into my head		.738				Impulsivity
I usually think carefully before doing something		-.699				Impulsivity
I tend to get bored easily		.666				Impulsivity
I think it's important that I change my life			.865			Motivation to change
I want to change my life			.839			Motivation to change
I owe it to myself to change			.771			Motivation to change
I am really working hard to change my life			.737			Motivation to change
Anyone can talk about changing themselves; I'm actually going to do something about it			.713			Motivation to change
The people who care about me want me to change my life			.621			Motivation to change
There's nothing that I really need to change about myself			-.617			Motivation to change
Other people try to make my life difficult				.654		Interpersonal trust
Things happen to me and I can't do anything about it				.644		Agency

Item	Loadings					Dimension
	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	
I am often the victim of circumstances beyond my control				.597		Agency
Most people I meet are only looking out for themselves				.584		Interpersonal trust
Most people I meet try to take advantage of me				.548		Interpersonal trust
My life is full of problems which I can't overcome				.510		Agency
My problems will dominate all of my life				.460		Agency
I feel hopeless about my future				.418		Hope
There are some people who I trust					.791	Interpersonal trust
There are people who really understand me					.786	Interpersonal trust
There are people I can turn to when I have a problem					.683	Interpersonal trust
I have close friends I can trust					.671	Interpersonal trust
There are people I feel close to					.572	Interpersonal trust
Nobody really knows me well					-.541	Interpersonal trust

Appendix C: Instruments reviewed

The Table C-1 shows the instruments reviewed. Questions were adapted from those in italics.

Table C-1: Scales reviewed in stage 4

Dimension	Scales reviewed
Impulsivity	Eysenck's Impulsivity Inventory Barratt Impulsivity Scale Teen Conflict Survey Impulsiveness Scale <i>Conflict Resolution, Impulsivity and Aggression Questionnaire</i> CRIAQ CRIME-PICS
Problem solving	Social Problem-Solving Inventory (revised) The Problem-Solving Inventory Problem-Solving Self-Efficacy Scale and Problem-Solving Skills Scale Means-Ends Problem Solving Procedure
Communication and interpersonal skills	Interpersonal Cognitive Distortions Scale Interpersonal Communication Inventory Interpersonal Communication Scale Interpersonal Reactivity Index Adolescent Interpersonal Competence Questionnaire Teenage Inventory of Social Skills
Social capital	Prison Social Support and Outside Social Support The Social Capital Inventory Personal Social Capital Scale <i>Revised UCLA Loneliness Scale</i> Citizen Audit Questionnaire 2001
Hope	Adult Hope Scale <i>The State Hope Scale</i> The Adult Dispositional Hope Scale
Locus of control	Craig, Franklin and Andrews 1984 Locus of Control Scale Paulhus 1983 Spheres of Control Scale Rotter 1966 Internal – External locus of Control Scale <i>Levenson Multidimensional Locus of Control Inventory (Prison Service Adaptation)</i>
Empowerment / agency	Agency for Desistance Questionnaire Watts and Guessous 2006 Community Leadership Scale Perceived Control Scale Employee Empowerment Questionnaire Rosenburg Self-Esteem Scale (modified)
Wellbeing	Warwick-Edinburgh Mental Wellbeing Scale WHO-Five Wellbeing Index Satisfaction with Life Scale R Ryff's Scales of Psychological Wellbeing Brief Life Satisfaction Scale Psychological Distress, Perceived Adaptability, Perceived Safety Questionnaire
Motivation / engagement	Perceived Commitment to Change Scale Intrinsic Motivation Inventory Processes of Change Questionnaire SOCRATES <i>University of Rhode Island Change Assessment Scale</i>

Dimension	Scales reviewed
Values goals possible selves	Personal Strivings Assessment Personal Values Questionnaire Valued Living Questionnaire BULLs-eye instrument about valued life Aspirations Index Committed to Conventionality Scale
Self-efficacy	Self-Efficacy Scale <i>General Self-Efficacy Scale</i> <i>Poverty and Social Exclusion Survey 1999</i>
Insight / awareness	Kentucky Inventory of Mindfulness Skills Mindfulness Attention Awareness Scale Toronto Alexithymia Scale
Resilience	Connor-Davidson Resilience Scale The ER 89 The Resiliency Attitudes Scale and Adolescent Resiliency Attitudes Scale Resilience Scale (RS-14) Changes in Outlook Questionnaire <i>The Brief Resilience Scale</i> The Resiliency Attitudes and Skills Profile

Appendix D: Further information about the dimensions

Agency, wellbeing, resilience	
Desistance pathway	Recidivism pathway
A realistic sense of agency – awareness of things which are/are not within my control. Able to achieve a sense of agency through pro-social activities. Feel a sense of agency with regard to my future – there are things I can do to create a better life for myself.	Only able to experience agency through offending behaviour. Low sense of agency – a victim stance whereby I am the passive recipient of life events, or have low confidence in my own ability.
Ideal change would be	
Increased levels of realistic agency. The ability to experience agency during pro-social activities.	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
Arts REA: tentative findings indicate arts projects may be able to produce improvements in locus of control, anger, self-efficacy. Mentoring REA: locus of control not mentioned directly. However, there is tentative evidence, from studies scoring level 3 or lower, which reported associations between mentoring and coping and perceived life problems. Desistance theory and research: locus of control is strongly linked in cognitive-behavioural theories with the likelihood of reduced criminal behaviour. Interviews: 4 interviewees from mentoring organisations mentioned outcomes related to self-efficacy, 2 mentioned outcomes related to locus of control.	
Questions in the IOMI instrument	Sources of questions
I am confident that I can cope with unexpected events (Agency)	General Self-Efficacy Scale (modified) [original: I am confident that I could deal efficiently with unexpected events] (Schwarzer and Jerusalem, 1995)
I feel good about myself (Wellbeing) I make good decisions (Agency) I feel confident (Wellbeing) I usually deal with problems well (Wellbeing)	Research team
I feel capable of making decisions (Agency)	Poverty and Social Exclusion Survey (modified) [original: Have you recently felt capable of making decisions about things?] (Gordon et al., 1999)
I tend to bounce back quickly after hard times (Resilience) I have a hard time making it through stressful events (Resilience)	Brief Resilience Scale (unmodified) (Smith et al., 2008)

Impulsivity	
Desistance pathway	Recidivism pathway
Reduced levels of impulsivity. Increased ability to make conscious choices from a range of options. Increased planning and ability to think through options and consequences. An increase in focus and discipline – the ability to concentrate on one thing for a period of time.	High levels of impulsive behaviour. Poor problem solving skills based on inaccurate perceptions, perceived limited range of options, no contingency planning.
Ideal change would be	
A reduction in impulsivity. An increased ability to focus and be aware of options.	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
Arts REA: two level 2 studies and one level 5 study found no impact on problem solving. Mentoring REA: not mentioned. Desistance theory and research: good evidence that reduced impulsivity and improved problem solving is associated with reduced reoffending. Interviews: mentioned by 6 mentoring organisations.	
Questions in the IOMI instrument	Source of questions
I don't really think about what I'm doing, I just do it I do things without thinking of the consequences I often do the first thing that comes into my head	Conflict Resolution, Impulsivity and Aggression Questionnaire (unmodified) (M&A Research, n.d)

Inter-personal trust	
Desistance pathway	Recidivism pathway
<p>Attitude towards others includes a sense that others mean me well, and perceptions of being able to trust others.</p> <p>I have something positive to gain from engaging with others, there are people out there who care about me.</p> <p>A sense of being connected to other people (indication of social capital, communication skills, and attitude towards others)</p>	<p>Other people are out to get me, dog eat dog attitude, people can't be trusted, lack of interest in others, sense of persecution, no one cares about me.</p> <p>A sense of being isolated and disconnected (indication of a lack of social capital, low skills, or poor attitudes towards others).</p>
Ideal change would be	
<p>An increase in positive attitude towards other people.</p> <p>An increase in connectedness (to a wider range of people, pro-social connections).</p>	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
<p>Arts REA: One study which could not be scaled indicated that participation in an arts project may have led to positive relationships with community members.</p> <p>Mentoring REA: One level 4 study did not reveal any significant relationship between mentoring and family and community outcomes.</p> <p>Desistance theory and research: Intermediate outcomes relating to family and community relationships revolve around the idea of social capital as a principal factor in desistance. Family and work are key to both the production and exercise of social capital. In this context, development of social bonds post-release has been found to be associated with lower recidivism rates.</p> <p>Interviews: Communication skills, cooperation, getting along with other prisoners, feeling part of a group and group interaction mentioned as possible outcomes during interviews.</p>	
Questions in the IOMI instrument	
<p>I have close friends I can trust</p> <p>There are some people who I trust</p>	<p>Research team</p>
<p>There are people who really understand me</p> <p>There are people I can turn to when I have a problem</p>	<p>Revised UCLA Loneliness Scale (modified) [original: I feel as if nobody really understands me]</p> <p>[original: There is no one I can turn to] (Fetzer Institute, n.d.; Russell et al., 1978)</p>

Engagement and internal motivation	
Desistance pathway	Recidivism pathway
Internal motivation to lead a pro-social life (i.e. I am doing this for me because this is the person I want to be). Internal motivation to engage in activities that may help with desistance (e.g. education, classes, employment, training, programmes).	Low levels of engagement with activities that may help with desistance (e.g. education, employment, programmes, etc.). Engagement with activities through external motivation (e.g. a desire to kill time, play the game). High levels of internal motivation to continue with offence-supportive activities.
Ideal change would be	
A shift from no motivation to high levels of internal motivation. A shift from external motivation to internal motivation. An increase in levels of engagement – in the mentoring or arts programme, or with other interventions. Reduced internal motivation to continue with activities which support offending.	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
Arts REA: Tentative, but best available evidence suggests arts projects may enhance effectiveness of offending behaviour programmes. Mentoring REA: Tentative evidence that mentoring projects may enhance effectiveness of offending behaviour programmes. Desistance theory and research: Extensive international literature on the effectiveness of offending behaviour programmes, including role played by programme engagement. Interviews: 2 interviewees from arts organisations and from mentoring organisations mentioned outcomes related to engagement. 3 from arts interventions and 6 from mentoring organisations mentioned outcomes related to motivation. Also mentioned was interest in trying new things.	
Questions in the IOMI instrument	Source of questions
I am really working hard to change my life Anyone can talk about changing themselves; I'm actually going to do something about it	University of Rhode Island Change Assessment Scale (modified) (DiClemente <i>et al.</i> , 2004) [original: I am really working hard to change] [Original: Anyone can talk about changing; I'm actually doing something about it.]
I owe it to myself to change	Research team

Hope	
Desistance pathway	Recidivism pathway
A sense of hope that will feed my motivation, resilience, agency, self-esteem, my selection of goals, my sense of possible selves.	A sense that the future is hopeless (feeds in to low agency, low motivation etc.). Low levels of resilience based on inaccurate perceptions and assumptions, low levels of commitment. A sense that it is inevitable that things will not work out well for me.
Ideal change would be	
A new sense of hope – this could be a catalyst for a number of other changes such as a more flexible and positive perception of the future, internal motivation, and agency.	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
Arts REA: one level 2 study found improvements in hope for the future. Mentoring REA: sense of hope was only looked at by one study which could not be graded. Desistance theory and research: There is a vast literature that links individual psychological change to the process of desistance, although empirical evidence of link between hope/resilience is not proven. Interviews: mentioned by 1 arts interviewee and 2 from mentoring organisations. Mentioned in focus groups with representatives from arts projects.	
Questions in the IOMI instrument	Source of questions
I feel hopeless about my future My life is full of problems which I can't overcome	Research team
My problems will dominate all of my life	Levinson's Locus of Control Measure (modified) [original: My problems will dominate all my life] (Huntley et al., 2012)

Practical problems	
Desistance pathway	Recidivism pathway
Reducing in the problems which provide practical obstacles to desistance.	No change or worsening in relation to these issues and problems, hampering desistance process.
Ideal change would be	
Reduction in or abstinence from drug use, controlled drinking or abstinence from drinking. Access to stable and secure accommodation. Improved health and access to health care. Gaining employment or training which may lead to employment.	
Why include in the IOMI?	
Evidence from stage 1 assessment of existing literature, stage 2 consultation with providers and desistance theory	
Mentoring REA: Evidence that mentoring projects may be associated with improvements in mentees' employment outcomes. More tentative evidence that mentoring projects may be associated with improvements in housing situation. Very limited evidence suggests associated with reductions in substance misuse. No evidence of a link between mentoring and health outcomes. Arts REA: Very tentative evidence that arts projects may be effective at improving educational outcomes and enhancing the effectiveness of offending behaviour programmes. Desistance theory and research: Proven link between practical problems (7 pathways) and reduced reoffending. Interviews: Employment mentioned by interviewees from 28 mentoring organisations and 1 arts organisation. Accommodation mentioned by 16 mentoring organisations.	
Questions in the IOMI instrument	Source of questions
Problems with money Problems with employment / prospects Problems with health and fitness Problems with housing Problems with drugs Problems with drink Problems with relationships Problems with gambling	CRIME-PICS ² (M&A Research, 2013)

² The eight questions from CRIME-PICS II are third party copyright material and are reproduced with permission from M & A Research. Copyright M&A CRIME-PICS, 2013. All rights reserved. No reproduction or use is permitted without the prior written consent of M&A Research.

Appendix E: Further information about stage 6 piloting with providers

Identifying and securing involvement from providers

The research team initially aimed to develop partnerships with around six providers (three arts and three mentoring providers) which had different, annual throughputs, were from different regions of the country, and undertook different types of work. A long list of possible providers was developed, drawn from those who had taken part in the consultation.

During the field work period (approximately six months) around a dozen providers gave an undertaking to participate in the pilot.³ However, some providers that had initially signed up to use the instrument subsequently did not do so. This was for a variety of reasons. One arts project decided they did not have sufficient time to introduce and administer the tool alongside other commitments. In another case, agreement had been reached at management level about use of the tool, but front-line workers turned out not to be in favour of using it. In some cases because they felt that existing information-collection arrangements already gave them most of what they thought needed collecting.

The team took steps to recruit other providers who might still use the tool. Assistance was provided by organisations such as the Arts Alliance and the team contacted 28 organisations that had indicated in the consultation that they would be happy to be contacted about follow-up work.

Further details concerning the six projects that participated in the pilot are provided in Table E-1.

³ A great deal of telephone and email communication accompanied this strand of liaison with providers. On-site presentations were made to six projects, describing the instrument and its use, and exploring whether the tool could be integrated into existing data-collection and other project practices. Some sent the research team other instruments that they had been using, and asked for views about whether these should be amended or jettisoned if they chose to use the IOMI. Other projects were interested in understanding more about links between the IOMI and their own theories of change, and in one case the research team held a full-day theory of change session with a provider to assist them in both in clarifying their own theory of change, and in assessing what role the IOMI could play in helping them to keep track of individual client progress within that.

Table E-1: Providers involved in stage 6 piloting with providers

Type of project	Description	Number of completed questionnaires	
		Initial	Follow-up
Mentoring project 1	<p>The project is based in the North West, and works with young people aged 15 to 25 who have served a custodial sentence. It provides them with intensive mentoring, support and advocacy and helps them to gain EET opportunities in the area. The project is supported by key statutory, public and private sector partners and offers participants an opportunity “to break out of the cycle of offending behaviour and to adapt to a positive future beyond custody”.</p> <p>Peer Ambassadors play an important role in designing and delivering project work, and engaging with other participants.</p>	19	1
Arts project 1	<p>The project is a team of theatre practitioners who “present interactive theatre and facilitate drama-based group-work, staff training and consultation for the probation service, prisons, young offender institutions, youth offending teams, secure hospitals and related agencies throughout the UK and abroad”.</p>	10	10
Mentoring project 2 (women only)	<p>This is a women-only mentoring project, based in London, which works with young women under 25 who are leaving custody. It provides one on one mentoring support for up to 12 months. The project works with women inside the prison in order to build a strong relationship, and then offers through-the-gate support. After release, the project works with each client to set goals and plan tasks, and mentors continue to act as advocates for clients to access other services.</p> <p>Through one on one support the project aims “to empower women towards a different kind of life”, and it is of key importance to the project team that each participant understands that they “believe in you”. Recognising that change processes can be lengthy for people having multiple and complex needs, the project is committed to “staying the course” in terms of ongoing support.</p>	13	0
Mentoring project 3	<p>The project staff team prefer not to call themselves a mentoring project. They undertake intensive “holistic” case work with small numbers of young people up to 19 years old who have received custodial sentences or have been subject to custodial remand in Young Offenders Institutions or Secure Training Centres. The project, based in South-East England, aims to provide a tailored package of support to young people who are transitioning from the secure estate for up to six months post release. The project works with clients to address problems that they face as they integrate back into their families and communities, providing an integrated support package in order to dissuade them from reoffending and becoming involved in other risk-taking behaviours.</p> <p>The project has a focus on “life-changing activities and opportunities”.</p>	8	0
Arts Project 2	<p>The project is a film and theatre production company based within a prison and YOI in Northern England. They employ a combination of serving prisoners, ex-offenders and industry specialists to deliver a range of services in custodial and non-custodial settings.</p>	8	8
Mentoring project 4	<p>Based in Wales, this is one of the largest and longest-established mentoring schemes for ex-prisoners in the UK. The scheme offers support to short-term prisoners with substance misuse problems with intensive follow-up with project mentors.</p>	49	44
<i>Totals</i>		<i>107</i>	<i>63</i>

The piloting process

Providers were asked to collect completed IOMI questionnaires in hard copy and retain these for pick up by the research team. All questionnaire included details concerning date of completion and at least one identifier for the individual respondent (this was usually a unique project ID). Completed questionnaires were picked up from providers by courier.

Some providers used questionnaires which had front sheets with fields for entry of details concerning gender, ethnicity and date of birth (in addition to the information above), and also a preliminary section to secure informed consent of the respondent. Providers that already had procedures in place for the securing of informed consent did not use this extra section.

In most cases where providers used the brief version of the questionnaire, they forwarded further details about respondents to the team by email, using the unique project identifier to allow the research team to link questionnaire responses to those details.

Providers were instructed to ask participants to complete the instrument as close as possible to the start of the programme, and then to administer the follow-up questionnaire as many times as seemed practicable within the project's own patterns of assessment and review with clients. To avoid attrition as much as possible, providers were asked to administer a follow-up questionnaire if it seemed likely that a participant might disengage or otherwise leave the programme.

Collecting feedback from providers

During the stage 6 piloting process, providers delivered feedback about the instrument and its use. At the end of the fieldwork period, providers were invited to provide further feedback about the whole process. Some issues of interpretation also arose – two providers highlighted what they saw as potential ambiguity in one question, and another provider made useful suggestions relating to the questions about client/staff relationships.

Reflections on the challenges of securing engagement from providers

Securing the involvement of providers in the pilot took much longer than the research team anticipated, and there appear to have been several reasons for this.

- Concerns about funding were very much on the minds of staff. For some providers, this led them to de-prioritise evaluation work in the short term.
- For some providers there appeared to be a mismatch of perceptions between strategic and operational levels of the provider organisation, with senior managers

agreeing that the instrument should be adopted and front-line workers demonstrating less interest in using the instrument.

In the view of the research team, some focused (and brief) support work with providers in the future could make introduction and implementation of the instrument more streamlined and less time-consuming. Such support could be more carefully designed to make it clear to users what the various benefits of using the tool could be to their own workloads and to their work with clients.