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Chapter 28

Working with clinically relevant in-treatment presentations in a trauma and diversity responsive way

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Introduction

This chapter explores in-treatment clinically relevant presentations as an opportunity to work on offending behaviour/desistance, and as an opportunity to explore and, perhaps more importantly, test out hypotheses about safety/risk. It begins with an exploration of the limitations of using reconviction as a measure of vulnerability for returning to offending (RTO) and highlights the need for testing out hypotheses about risk/safety through making predictions based on them and then seeing if they are evidenced, i.e., adding a testing component to the structured professional judgement (SPJ) paradigm. This is suggested as an adjunctive source of warranty for assertions about risk and safety that is necessitated by the acknowledgement of the poverty of assertions deriving their warranty from the identification of ‘risk factors’ ‘validated’ using prediction of, or correlation with, reconviction.

After establishing the need for a more systematic focus on in-treatment clinically relevant behaviour the chapter explores a further challenge to the validity of ‘risk factors’, as traditionally identified, as measures of vulnerability of RTO, which is posed by the requirement that every risk factor needs a triggering or precipitating internal and external context for it to be realised. Not to specify the circumstances under which a risk factor or mechanism is activated, it is suggested, is to underspecify the construct. There is no such thing as a risk factor or mechanism without a context.

Situational contexts and intra-personal psychological contexts are explored, using the idea of offence related states. The concept of ‘low level’ offensive behaviour (Goldstein, 1999) and different kinds of objectification and treating people in a way that obscures or denies their humanity, are suggested as relevant foci for looking at daily ways of in which offence relevant processes may be played out – or not, in the case of somebody moving away from offending. Deprivation of needs or resources is identified as a neglected area for risk intervention; being treated in stigmatising or objectifying ways as well as trauma triggers are explored.

The chapter goes on to illustrate the use of some of the ideas of clinically relevant behaviour and offence paralleling contexts as ways of testing hypotheses deriving from formulations as a way of establishing their warranty or otherwise. Much of what is described is an attempt to capture what is often an implicit clinician logic model.

Offence paralleling behaviour (OPB) and Positive/Prosocial Alternative Behaviour (PAB)

The OPB/PAB framework (Daffern, Jones & Shine 2010) is an approach at working with safety that focuses on testing and refining formulations by looking at current manifestations of risk processes identified in case formulations. The formulation of risk processes, and ways of coping that do not involve or result in offending, as well as formulation of those that do, are considered. The OPB framework is more about testing a formulation than offering a model of offending. It can be used with a wide range of theoretical models (Daffern, Jones & Shine 2010).

What the OPB paradigm offers, which is often missed in discussions about it, is a requirement that Structured Professional Judgement formulation involves a substantive process of **testing hypotheses** about risk or safety, i.e., that it should be Structured *Tested* Professional Judgement. It requires prediction and re-formulation, based on confronting the hypothesis the prediction is based on with the outcome of that prediction.

 For a process impacting on safety/risk to be considered relevant the following features are usefully sought for: 1) was it evident in more than one offence (or if there hasn’t been any past offences then has it been evident in past ways of coping/behaving) – pattern matching across episodes; 2) does the individual’s demographic profile/pattern and the potentially triggering contextual features match (e.g. Yin, 1984) those that characterised the individuals and relevant contexts in large N studies identifying risk factors, and do they evidence the risk factor, and 3) are they evidencing the risk process in the current context – also pattern matching. Each of these sources of warranty are illustrated in Figure 1.

*Problems with validity in risk assessments*

The most common operationalisation of risk is one that involves measuring whether or not a cohort of people go on to be reconvicted. This is however a problematic measure of RTO, because a) it has been established that conviction of any kind is racially biased in terms of who is vulnerable to this and who isn’t (e.g., Mayson 2018; Woldgabreal & Day, 2023), b) biased in terms of fitting a stereotype of what an offender ‘should’ be like (Larcombe 2012), and c) doesn’t reflect a significant amount of offending that goes undetected (e.g. Jones, 2004/2022). If RTO is what we are interested in modelling as practitioners, then measures using reconviction as an operationalisation are going to be significantly biased because of this.

It is also biased in that, a) risk is being conceptualised as something that belongs to individuals, not individuals in contexts (see below on importance of context), and b) the event being predicted is the culmination of a psychological process but is defined for legal purposes, not for the purposes of psychological investigation. Jones (2004) highlighted that what we describe as ‘offences’ are in fact the culmination of a sequence of events, not discrete events and, moreover, proposed that it is sequential processes, not events or ‘risk factors’, that practitioners attempting to manage risk or safety should be analysing.

*Problem with using reconviction as an outcome measure*

Jones, Liell and Fisher (2023) highlighted some of the fundamental problems with the use of reconviction as a measure of re-offending. Notwithstanding work to find other measures – e.g., Falshaw et al.’s (2001) argument for ‘broadening the outcome measure’ to deal with the low base rate level problem when evaluating interventions with people who had offended sexually – formal records of offending of any kind run the risk of not being an accurate reflection of offending generally, and the extent to which people have the capacity to evade detection and conviction (cf Jones et al., 2023). The thrust of their argument was that reconviction – and similar measures - underestimates the rate of offending behaviour generally (see Figure 1 below), reflects a range of structural biases (cf Mayson 2018; Woldgabreal & Day, 2022) that cannot be easily factored out and that the consequences of this warrant attention, for risk assessments based on these measures. Since Jones (2004) an argument in favour of the offence paralleling behaviour paradigm is that it attempts to offset some of the problems deriving from sole reliance on more traditional ‘risk factor’ based models.

Applied risk assessment contexts require the practitioner to undertake a range of warranty analyses/tests to support claims made on the basis of the assessment. The single case literature on theory testing is very helpful here (Harlow, 2010)

*“During the progress of the project, the researcher applies a process of deductive and inductive reasoning. Although often thought of as separate, it has been argued that in case study research, the two processes are blurred and mutually beneficial. Similarly, it has been argued that theory testing and theory development are inevitably associated, and that the interplay of both is implicated. The term retroduction has been coined as a means of describing this interplay. Retroduction is therefore the circular process by which the researcher tests his or her theoretical ideas against the emerging data, reframes the ideas, and retests until the conclusions reached are deemed trustworthy. Multiple cases might improve claims to trustworthiness in that the research can be replicated. The replication may facilitate confirmation of the emergent theory, but if not, the theory itself will be redeveloped to take account of the new data. The process of replication may continue as long as is necessary and/ or feasible”(p236)*

This iterative approach to formulation and reformulation using induction, deduction and ‘retroduction’ alongside tests of the theory that lead to theory revision, is at the heart of the methodology for using clinically relevant behaviour to see if/how an individual has changed/adapted. ‘Multiple cases’ here refers to multiple cases of a particular pattern of behaviour within an individual case.

* Insert Figure 1 here

Sources of warranty for formulation derived causal models

Figure 1 illustrates the different kinds of warranty used in developing a formulation.

*Nomothetic warranty*

Support for the argument that a particular individual who manifests a ‘risk factor’ that has been evidenced to be correlated with reconviction comes from:

1. Evidence that the individual and their contexts are not significantly dissimilar from the population(s) and contexts upon which the argument that that risk factor is indeed a risk factor is based. At a minimum this requires that the demographic profile of the individual – e.g., age, gender, race, culture, I.Q., mental health status, developmental experiences – match those evidenced in the studies that identified the links between the risk factor and reconviction in the first place (e.g. Craig et al 2004). Similarly they need to match the context the research was done in – if the study is looking at people being released into an American context and the individual is being released into a UK context there may be very different situational factors at play (Michael Daffern personal communication 8th September 2022) .

One possibility here is to undertake a procedure described by Campbell (e.g., 1966) and more recently by Yin (1984) and Trochim (1989) as ‘pattern matching’ whereby the key variables for the individual case are matched with those in the nomothetic/ large *n* study. It is not clear, however, which variables are critical to match in the absence of an accepted theoretical account of why the particular variable is linked with risk. In addition, it is not clear what kinds of mismatch between the nomothetic study parameters and the individual case parameters are clinically significant.

1. A well evidenced theoretical model explaining why the variable is linked with reconviction is also important. This model should give some clear criteria for identifying under what conditions a particular individual would manifest the risk process identified in order to be clinically useful. Ideally it should also be possible to identify, on the basis of the hypothesised, theory based, risk process *how to test* whether a particular individual will manifest that risk process or not.

*Predictive warranty*

If a particular risk process is hypothesised, as part of a formulation, as being evident, then testing this hypothesis is necessary. The following tests can be usefully undertaken.

1. Is this particular risk or protective process evidenced by this particular individual? What conditions are necessary and sufficient for the process to be precipitated (triggered). How can this process be identified as being present or absent in a clinically meaningful way for this case?
2. What evidence would show that this process is no longer in operation?

When we give an individual a psychometric test in a risk assessment, we are testing the prediction that the individual is manifesting risk process X by looking at their responses to questions attempting to operationalise risk factor X. At heart this is using an OPB logic model.

1. At the time of the offence risk process X was at play, precipitated by context c.
2. If this person is at risk of doing this again then risk process x will still be evident and triggerable.
3. To test risk propensity, predict that process X will be triggered by context c in timeframe t; also predict that prosocial alternative processes y1 to yn will be triggered by context c in timeframe t if the individual has changed.
4. If process X is not triggered in context c then this suggests that process x is no longer (less of) a problem. An analysis of why process X is not triggered, informed by knowledge of whether or not any prosocial alternative processes, y1 to yn, were evident as a way of meeting the needs met by process X at the time of the offence.

In the case study literature these approaches are called ‘prospective case studies’ (see Bitekine 2008/2009). Essentially predictions based on case formulations are a form of theory testing using ‘pattern matching’ (e.g., Trochim, 1989; Yin, 1984).

*Risk processes involve individuals in contexts*

Jones (2022) highlighted the importance of conceptualising a **risk process** associated with any specific risk factor. Simply identifying dynamic risk factors as being somehow intrapersonal or ‘inside people’ is a form of construct under-specification (Jones 2023; Sizmur, 2014;). An account of a risk process is a specification of the context(s) in which a risk factor will be triggered and the mechanism that is set in motion by the triggering context i.e. what brought the risk process into being and what kind of mechanism is it?.

So, for example, having offence supportive beliefs, for example ‘violence is an appropriate way of meeting your needs’ arguably needs, a) to be foregrounded by a context e.g., needing or wanting something (money) maybe due to loss or deprivation, and b) the diminution of alternative beliefs about the costs of behaving violently e.g. being in a state of mind where conceptualising costs is less likely (emotionally aroused, numb or impulsive states) or where cultural factors – such as peer group – narrate the prospect of offending in a way that minimises the possibility of getting caught.

Often, as psychologists, we have seen risk factors or propensities as being characteristics of people who have offended; but seen through this lens risk factors are characteristics of people who have offended in different contexts. A risk factor is latent until it finds its precipitating context at which point it is realised; not to specify the precipitating context is to underspecify it (see Figure 2).

* Insert Figure 2 here

If we conduct a thought experiment asking ourselves under what conditions might we kill somebody, for instance, the answers that might emerge are likely to be about extreme or unusual contexts in which this behaviour might be more likely; perhaps if one was being attacked by somebody one believed was in a position to kill you, for instance. In this situation one might have offence supportive beliefs activated – e.g., that it is okay to kill somebody if you believe that they are threatening your life in a serious manner, or the belief that other people would do the same in the same situation.

So, for each ‘risk factor’ we need to specify under what **circumstances** the risk factor will become **activated**, and under what circumstances it will remain latent. Conceptualised in this way a risk process is seen as requiring a precipitating context (often involving resource loss or privation) and a facilitating shift in state from untriggered to triggered; all unaccompanied by protective responses from the individual or the containing context. In Jones (2022) precipitating processes are seen as trauma or adversity (i.e., resource loss, see later) ongoing in the current context or reminders of past resource loss episodes.

This is in effect a specialist application of single case methodology highlighted by Elger (2008) who describes Pawson and Tilley’s (1997) approach as pointing towards:

*“the analysis of relationships among mechanisms, contexts, and outcomes. This can be unpacked as a search for entities with particular causal powers (mechanisms) that operate in distinctive ways when accompanied by other entities that* ***may trigger, mediate, or contradict these powers*** *(treated in summary fashion as contexts) to produce distinctive effects (outcomes)”.* P254 (my emphasis)

When we are considering in-treatment clinically relevant behaviours we need to take a contextual turn and consider the offence paralleling context as well as possible offence paralleling behaviour or prosocial alternative behaviours. Asking questions such as, how does this person respond to contexts that are similar to those that were around at the time of the offence? What are these contexts? Do we know the full range of precipitating processes?

Conservation of resources (COR) theory: a framework for conceptualising the impact of current and past offending-relevant trauma and adversity

A risk process is usefully conceptualised as being set within a trajectory of adaptation akin to those identified by Layne and Hobfoll (e.g., 2020) as responses to trauma. Their work, aimed at identifying and scaffolding resilient responses to trauma – conceptualised as resource loss – attempts to characterise ways in which people respond to trauma and in doing this identify what gets in the way of producing a positive outcome (conserving resources). Translating this model, developed for understanding trauma responses, to focussing on safety and risk can be usefully undertaken by hypothesising offending generally as being different kinds of response – trajectories of adaptation - to resource loss or privation (current or historical deprivation, oppressive experiences or trauma). When thinking about this clinically, it is useful to conceptualise the full range of traumas and adversities in an individual’s life, perhaps using the trauma matrix.

What is harmful is the impact of traumatic experiences (individually and cumulatively; currently and historically) on resources in the individual’s world. This model has much in common with the idea of ‘goods’ in the Good Lives Model (GML: Prescott & Willis, 2022) which focusses attention on the ways in which loss or deprivation of ‘goods’ can impact on the propensity to enter into offending processes. A broad definition of trauma in GLM terms is privation or deprivation of ‘goods’ in the past and in the present. Not just safety but the full range of needs. This can then result in some needs taking on a motivational monopoly in different ways. Experience of historical trauma or adversity often has the effect of foregrounding a pre-occupation with certain kinds of need. For example, the need to feel safe, experienced often as hypervigilance, and intrusive thoughts about being attacked after experiencing a history of violent abuse.

Contextual analysis is important to working on offence paralleling behaviour and positive alternative behaviour because the focus is on what leads up to offending, the offending prodrome, and this is usually a sequence of events driven by intrapersonal, interpersonal and contextual processes. Maguire, Daffern et al.’s (2021) Model for Understanding Inpatient Aggression (MUIA) gives a pivotal role to **‘high-risk states’** that then escalate into aggressive behaviour. High risk states are seen as being determined by both personal and contextual short term and long-term risk and protective factors. These factors, to a greater or lesser extent, overlap with the same contextual and personal factors that were at play when the individual was offending (see Figure 3). Through an analysis of the personal and contextual triggering or precipitating processes we arrive at a formulation that can be tested in the current context.

* Insert Figure 3 here

*Trauma and adversity events as precipitating events for offending*

It is often contextual change, or the cumulative impact of adversity, oppression or anticipation of threat/loss, that precipitates the need for coping responses aimed at restoring/acquiring resources or ‘goods’. This can be done through offending or through other more prosocial means.

People are often released into contexts where they are significantly deprived of resources, social and material, from custodial contexts where they are similarly deprived. The similarity of these contexts, post release and custodial, in their capacity to precipitate offending behaviour is a key question when looking at OPB (Jones, 2004/2010b). In both contexts however we are dealing with the possibility of lifestyles with seriously constricted horizons. This requires practitioners to move away from the notion of trauma and adversity ‘in the past’ implying that the adversity is somehow over; the reality is, sadly, that people have lived experience of chronic adversity and are having to deal with ongoing adversities with all the psychological ramifications that go with that (see Stein et al (2016) on ‘ongoing traumatic stress’ as opposed to ‘post-traumatic stress’). When the context is seen in this way it is possible to acknowledge the ways in which people are often responding to adversity when they offend (Jones, 2022). These reactions are also accompanied by shifts in mental states. In behavioural terms these are called ‘establishing operations’ or ‘setting events’; in schema therapy language (e.g., Young et al., 2003) these are schema modes and in cognitive analytic terms (e.g., Ryle & Kerr, 2020) these are ‘self-states’. The basic idea is that people behave differently in different states. This is an important way of making sense of behaviour of people who are apparently very different in different states. It allows for, or indeed suggests, the possibility that somebody with one set of values and goals can shift those values and goals radically in a short space of time by transitioning into a different state. Consequently, intervening with them when they are not in the state that they were in at the time of the offence, when they are relatively calm and self-regulated in the therapy room for instance, runs the risk of not impacting on the behavioural repertoire of the individual when they are in an offence related altered state.

Trauma responses are adaptations to what has been described as ‘fast’ evolutionary contexts (Durrant 2015; Jones 2022), i.e., contexts where there are fewer resources and there is more competition and lack of safety. In these contexts, rapid unthinking responses, arguably driven by changes in levels of hormones like adrenaline and noradrenaline along with sympathetic nervous system activation, might be more common and adaptive (in the evolutionary sense). The response to these contexts is one where the field of consciousness is constricted and certain behaviours become hypervalent responses; behaviours are, as it were, offered quickly in completely formed sequences that are then played out quickly and unthinkingly, such as flight, fight, freeze or fawn when the fear system is activated.

When people are released from prison, they are exposed to a barrage of often new adverse experiences building on the adverse experiences of being in custody. The initial trauma is the experience of transition-loss from a place attachment to prison (Adshead & Moore 2022) alongside the experience of having low status, lacking financial support or employment, being co-located with other people who are similarly struggling with resource loss.

COR theory (Hobfoll, 1988, 1989, 1998) can shape up an understanding of how and why people exposed to a given type of trauma, loss, or other stressor can respond very differently over time. The theory rests on the assumption that individuals seek to obtain, retain, foster, and protect things they value, which are conceptualised as ‘resources’. These resources include:

* object resources (e.g., shelter, transportation),
* condition resources (marriage, educational status, social status, job security),
* personal resources (self- esteem, optimism, social skills), and
* energy resources (knowledge, money, credit).

It is hypothesised that individuals invest and use a range of resources to cope with different stressors consequently, the characteristics or qualities of available resources can strongly shape how well people can cope with major adversities and, by extension, their *trajectories of adjustment* over time (Hobfoll, Horsey, & Lamoureux, 2009). Layne and Hobfoll (2020) outlined 11 general qualities of coping resources that help to shape the way that people can cope with major life adversities (see Table 1)

* Insert Table 1 here

“With respect to the last two resource qualities, resources high in facilitative effects (e.g., planning and management skills) and generative capacity (e.g., creativity) are especially useful because they help to create, attract, manage, and catalyze other resources. They thus help to populate, mobilize, and grow *resource caravans* (clusters of resources that “travel together” across development) and create *resource growth cycles* over time (Hobfoll, 2014).” (my emphasis)

The key contributions this model make to the analysis of offence paralleling behaviour and positive alternative behaviour are firstly that many resources are not in the hands of the individual and consequently we need to be *identifying what contexts or situations* are offence paralleling and could replicate the resource loss narrative that precipitated the offending process and, as importantly, resource acquisition and implementation narratives that have enabled a prosocial alternative response to adversity in the past. And secondly analysis of offence paralleling behaviour needs to involve an analysis of precipitating resource losses experienced by the individual and the extent to which they are being replicated or are replicable in the current context.

When conceptualising resource loss, we need to be thinking in a constellatory sequential way rather than just thinking about single traumas. Typically, people who have offended have experienced a range of different traumas (often undetected and un-convicted offending) at different stages in their lives which together have created a platform from which offending can occur (see Harris et al., 2022).

*Offence drivers*

Offending can be conceptualised as being precipitated through a process of unmet needs reaching a point where the individual seeks to meet them through illegal means. Seen through the lens of the Good Lives Model, motivation to offend comes from the privation or deprivation of goods, and their mutually supporting nature, as well as the absence of skills in overcoming these deprivations in a legal way. Another way of describing deprivation of ‘goods’ is to see it as a combination of trauma, oppression and adversity impacting on resources (Jones 2022), basing this on the resource loss model of trauma (Layne Brigs & Courtois 2014). This model can be used to inform a framework for looking at clinically relevant in-treatment offence paralleling behaviour (OPB) in clinically relevant contexts, offence paralleling contexts (OPC)

Offending motivations, it is contended, emerge out of either current ongoing trauma and adversity (privation of basic psychological goods) or past trauma and adversity that have left the individual with an enhanced propensity to be triggered. A broad definition of trauma is used, not just focussing on the ‘fear system’ – central to conceptualisations that are developed in relation to PTSD - that includes exposure to intense ‘pleasurable’ experiences that result in a similar process of intrusive redirection of interest as that obtained from the ‘fear system’ (Gilbert, 2015; Jones, 2022; Liotti, 2017; Panksepp, 1998). Substance misuse and intense experiences of power or status can, for example, result in changes to personality that are associated with the same kinds of intrusive cognitive and affective processes, linked with an altered capacity to think, as those deriving from intensely frightening or painful experiences. All these ‘evolved systems underpin the ‘goods’ identified in the good lives model (Durrant, 2017, Jones 2022)

Objectification as common denominator in victim perpetrator link: being treated as an object and treating others as objects

A unified framework for thinking about both offending and trauma can be based on the concept of objectification, or being forced by circumstances or other people to experience oneself in a way that denies one’s humanity. When objectification is used by other people this is construed as a process linked with offending behaviour. Under this framework trauma and relating to others in a way that inflicts social oppression in the form of racism, sexism, homophobia, ableism, classism, ageism, and poverty are highlighted as having the same underlying dynamic of objectification as offending or offensive behaviour. Offending is behaviour that results in dehumanising another person, denying, or depriving them of their rights to basic goods in a variety of ways. Harm can be brought about, through a process of objectification, by denying people’s autonomy, agency, boundary integrity, by owning people in the way one might own an object, denying people’s experiences and feelings or denying that they deserve to have their feelings and experiences taken into account, just identifying people with their bodies or parts of their bodies or their body colour, just defining people by ‘how they look’ or appear to the senses and not allowing people to have a voice or to silence them (Langton 2009; Nussbaum, 1995). See also Goldstein’s (1999) work and exploration of ‘low level aggressive behaviour’.

This framework can be used to explore offence paralleling behaviour, positive alternative behaviour, positive alternative behaviour scaffolding contexts, and offence paralleling contexts (see Table 2). It can be argued that offence focussed work is, at its core, work on objectification behaviours of all kinds and that any evidence of **in treatment objectification behaviours** are the focus of work, or, to frame this in a strengths focused way (see Jones 2010a, 2020) any evidence of not objectifying and reacting in an opposing prosocial humanity acknowledging manner, to resource loss and adversity is formulated, rewarded and celebrated. This approach follows Goldstein’s (1999) model whereby one works with small, ‘low level’ examples of the behaviour being focussed on, i.e., in his work on violence working on teasing, bullying, verbal abuse and non-offending abusive behaviour as a way of preventing the escalation to more severe offending. However in addition to this, small examples of positive prosocial alternative behaviour; e.g., helping, supporting, empathising, being compassionate, offering restoration in restorative justice contexts.

* Insert Table 2 here

Formulations hypothesising about both risk factors, strengths and risk protective and precipitating contexts allow us to identify offence paralleling behaviours and positive alternative behaviours. This permits us to clarify both offence protective alternative ways of responding to adversity and resource loss/deprivation or privation and contextual factors that mitigate against offending. Assessment of offence paralleling contexts is highlighted as a central task for clinical practitioners. Thereby enabling them to give voice to the extent to which people released from custody are being placed in traumatising, depriving and oppressive contexts which can ‘set them up to ‘fail’. People who have offended are seen as having to contended with both a history of mostly unreported and un-convicted victim experiences and a future where they are placed in what are in effect abusive and depriving situations. This core experience of accumulating unrecognised and unvoiced injustice is seen as being at the heart of many offending processes.

*Normal Waking consciousness (NWC) Trauma related Altered States of Consciousness (TRASC Frewen & Lanius 2015, Lanius, 2015) and Offence related altered states of consciousness (ORASC): their relevance to working with OPB/PAB*

It is not just Thoughts, Feelings and Behaviours – as suggested by standard CBT approaches - that were evident at the time of the offence that are useful for understanding offending and the ways in which individuals cope with being triggered into moving along an offending trajectory. Similarly, the idea of ‘modes’ in schema therapy does not capture the full picture as it focusses on emotional states, “…as well as a person’s cognitions and behaviour at a particular point in time” (Keulen-de Vos, 2016, p58) as opposed to the broader idea of states of consciousness. Jones (2021, 2022) has argued that *states of consciousness* and the vicissitudes of *felt agency* are also critical. In a rehabilitative context, it is important to monitor Offence Related Altered States of Consciousness. These states are often linked with triggered trauma and Trauma Related Altered Sates of Consciousness (TRASC: Frewen & Lanius, 2015). Moskowitz’s (2004) paper highlights the role of trauma derived dissociation in much violent offending. Kruppa (1991) and Gray (2022) have highlighted and explored empirically the ways in which people who commit serious offences often report being traumatised by their own offending behaviour – which is trauma triggered and consequently a combination of past trauma being triggered and then being exacerbated by current violent reactions which then become the subject of troubling flashback and reliving experiences.

Exploring dissociative experiences linked with sexual arousal is also important when working with people who have offended sexually. People who have offended sexually who have personal histories of having been sexually abused themselves often report experiences of watching themselves offend or not feeling as if they are in control of the offending process – described in the past as “ passive accounts” where experiences of agency are denied or avoided. This kind of account however fits well with the literature on people who have been sexually abused reporting dissociative experiences during sexual behaviour (see Hansen, Brown et al. 2012 work using the dissociative experiences during sexual behaviour questionnaire, and Rosenthal & Freyd, 2017). Arousal related emotional numbing (Stappenbeck et al., 2016) is another account, possibly linked with dissociation, of shifts in state that are relevant to offending; emotional numbing (see Kashdan et al., 2006 on numbing and anhedonia) inevitably this will impact on being able to ‘feel for’ the pain and distress that other people are experiencing. States involving sexual compulsivity or sexual arousal problems (Jones 2022) are other examples of altered states that can be relevant to offending.

Frewen and Lanius’ (2015) work on describing and articulating different domains of trauma derived dissociation is useful in finding a language and a framework for exploring offence related dissociation (see Table 3). There are two ways in which the word dissociation is used in the trauma literature. Both are linked and co-occur often. One use of the word denotes the way in which some people become ‘fragmented’ following traumatic experiences – they develop different parts of themselves that operate as if they are separate people, and the individual can sometimes not remember things that they have done when they have shifted into one of these separate part-identities. The other use of the word is to describe shifts in state of consciousness that people can have when they have had a traumatic experience. These can be around at the time of the offence and then later when they are ‘triggered’ into different kinds of repetition or reliving experiences. It is this second sense of the word that Frewen and Lanius try to capture with their 4D model of Trauma Related Altered States of Consciousness (TRASC). Jones (2016, 2019) argued that these states are relevant to offending behaviour and proposed that we examine Offence Related Altered States of Consciousness (ORASC) as part of understanding offending processes. Incorporating states into formulations is significant because in the past the focus of interventions has been on ‘cognitions’ or thoughts and these are difficult to address when people are in certain states.

* Insert Table 3 here

Additional domains suggested by Churchill (2012) as areas to explore when analysing lived experience (See Table 4)

*Manic and hypomanic states*

“Manic” states also sometimes linked with ‘sexual disinhibition’ are also relevant to offending behaviour. In psychiatric literature ‘manic’ states are seen as states where the individual is unusually aroused, showing ‘pressure of speech’, often disinhibited, more impulsive, socially interacting in an overbearing manner. Mansell et al. (2007) developed a cognitive behavioural model whereby manic states are seen as being generated or sought after through behaviours described as ‘ascent behaviours’, behaviours designed to make the person more ’manic’. As with the concept of ‘sex as coping’ suggested by Cortoni and Marshall (2001), ascent behaviour is often used as a way of escaping from aversive feelings such as depression, feelings of emptiness/numbness/meaninglessness or anxiety. Some kinds of substance misuse result in more manic presentations also and can be part of the pattern of ascent behaviours used by an individual. Descent behaviours are behaviours that result in lowering of mood. Manic states are, then, more than ‘a mood’, they are a way of acting involving trying to escape from/survive a painful, often trauma related, set of problems and associated states. Dynamic shifts in neuro-functioning, (e.g., cognitive abeyance) and capacity for agency (Jones 2022), associated with shifts in state, are critical for developing an understanding of the way in which behaviour develops over time in a way that might be similar to what happened at the time of the offence.

*Positive mental states and prosocial alternative behaviour*

Woldgabreal and Day (2022) highlighted the importance of the positive psychology perspective. They cite the work of Sin and Lyubomurski (2009) that highlighted seeking to promote, through activities, positive psychological states such as gratitude, forgiveness, savouring, hope, optimism, mindfulness and kindness are effective in increasing wellbeing and decreasing depression. This is a healthy version of ascent behaviour described above.

*Relational view of states*

Looking at these states through an interpersonal lens we can see that they are all states that have a strong social or interpersonal aspect. Ratcliffe (2022) indicated that hope and trust are fundamentally inter-related. Hope is a kind of trust that the future will be more rewarding or less painful. Optimism also has this aspect to it, it is a trusting in the future. The literature on relationships and returning to offending is clear about the role of relationship and social connection in offending (Berghuis et al., 2022). From a formulation perspective, all states are usefully construed as social at heart. Gergen (2011) suggests that we could “…argue that assigning powers and abilities to an individual person is … a “fallacy?” On the relational view, there are no truly individual actors; we are always already constituents of relationship. To say that “I decided” is to misappropriate for the self what more properly is an outcome of relationship” (Gergen, 2011 p.318). Jones (2004) highlighted the way that relational crises like loss, abandonment or rejection are common precursors to offence processes. Looking for protective lifestyles, then, means monitoring the ways in which these core aspects of relationally embedded wellbeing are being entertained by an individual. Jones (2010, 2020) proposed the use of the solution focussed approach to addressing offending behaviour; essentially arguing that people explore the ways in which they are **not** meeting their needs through offending most of the time and think about **what they are doing right** as a way of developing a personalised what works that they can then attempt to use the solution focussed maxim of ‘if it has worked well in the past then do more of it’. This requires two processes. Firstly, the therapist/individual collaboration to develop formulations of what has worked in the past. Focussing on times when the individual managed to successfully stop a process that looked ‘risky’ from resulting in offending behaviour. But secondly it requires them to identify core set of states of wellbeing that make an interest in offending less likely to emerge and feel attractive in the first place.

*Condemnation narratives and narration about ‘existential feelings’*

Ratcliffe (2015), writing about depression, highlights a common theme in depressed people’s narratives of being on a journey that has a sense of inevitability about it. He construes this as a way of experiencing that has lost a key dimension of being oriented towards future possibilities. A kind of closed-mindedness. He locates this experience not in the way that people choose to narrate their lives but as a deep-seated emotional experience. The option to see the world in a particular way is not a simple choice, it is a choice made in the context of felt-experience of the world that has had some aspect of felt-possibilities removed from it.

Jones (2022) suggested that a range of ways of experiencing the world linked with traumatic experiences are adaptive in so far as they are adaptations to ‘fast environments’ where considerations of possible futures of different kinds may not be as useful when the priority is to survive in the here-and-now. Kerig also describes states of ‘futurelessness’ in people who have trauma histories who have offended. Often the expectation with people undertaking rehabilitation projects is that they develop ways of holding back ways of responding that do not involve a sense of the future possibilities (interpersonal and intrapersonal) in adverse contexts where these ways of experiencing the world are triggered. The skill that is required is to go against the grain of experience and felt expectation (triggered by current adversity or reminders of past adversity/trauma) and imagine future possibilities and ways of impacting on other people that are not harmful. This is relevant to working with OPB in that it becomes an internal contextual variable for the development of an offending process and/or a process of acting in a prosocial alternative way.

*Altered states and objectification*

Jones (2022) linked a range of intrusive experiences with different human evolved systems. For example, the fear system linked with intrusive, behaviours and experiences not ‘chosen’ by an agentic self, fight flight freeze, fawn and dissociation; attachment system linked with seeking proximity to caregiver; sexual system linked with ‘mate selection’ and engaging in sexual behaviour. When in these states offending can result as a consequence of the inhibition or deactivation of the capacity and willingness to mentalise (e.g., Bateman & Fonagy 2016). The ability to be concerned about and imagine others’ experiences and feel an ongoing sense of their humanity can be put in abeyance. Blair (1995) highlighted the idea of a violence inhibition mechanism, a response to the other that involves a recognition of facial and other kinds of expression of distress that results in an increased propensity to offend if this inhibition process is not absent. Dissociation involving emotional numbing can have a similar result. Indeed, Jones (2022) suggested that activation of each of these evolved systems can result in some degree of loss of capacity to see the other as ‘a human’ – i.e. not seeing them as human and seeing them more as an object (objectification). .

We need, then, to monitor (as unobtrusively as possible) how the individual talks about and relates to people. To what extent are they objectifying? When? Why? When do they not do this and respect their humanity? why? One way of describing states is to use a Markov transition probability matrix (see Table 5 and Figure 5 below). This captures the ways in which an individual changes states and, should change over time during interventions aimed at reducing the chances of getting into states that leave the individual vulnerable to offending.

* Insert Table 5 and Figure 5 here

Example (fictional account) Paul

*Offence*

As a child Paul felt unwanted and rejected by his family. His attachment stye was Insecure. As an adult he was often triggered into assaultive behaviour by fears that his relationship was coming to an end; aimed at preventing abandonment and expressing vengeful feelings. Relationship ended and spent time alone. Lost job. Increase in substance misuse and time spent with pornography online. Reported, looking back, that he had become withdrawn and felt ‘as if I was in a bubble’. Seeking to kill off feelings of hurt linked with isolation using sex and drugs. Felt as if he was on the outside looking in at people around him enviously and angrily.

Left home one night he went out drinking alone ‘hoping to meet somebody’. Drank a lot and was ‘rebuffed’ by woman he approached in a bar. Became very angry and left the pub and followed victim. Grabbed her in an alleyway and attempted to rape her but was not able to become sexually aroused. Assaulted her violently and left her. After the assault and attempted rape, he left the scene attempting to avoid CCTV and witnesses. He reported that later he experienced strong feelings of shame and fears of getting caught for several days. He dealt with these feelings by further substance misuse.

*Developmental sequence for two offences*

In this table (Table 6) the developmental sequence of events leading up to an offence – deriving from a sequential formulation (e.g. Jones 2004) - is parsed based on key turning points in the developmental formulation for the offence. This is an initial hypothesis that is in effect a ‘pattern’ or constellation of predictions that are tested out in a process akin to ‘pattern matching’ (Campbell 1966; Trochim, 1989; Yin, 1984). Whilst there isn’t room in this chapter to illustrate hypothesis revision, if a pattern or sequence does not stand up to testing it is revised (see the account of ‘retroduction’ above and Jones 2010b on the algorithm for testing OPB formulations). Seeing offences as a diachronic temporal process means often that there are a series of different but sequential motivational moments in a chain of events, each feeding into the next (Jones, 2004).

* Insert table 6 here

*Themes explored across two offences identifying common developmental features*

The diachronic task is to look for themes that are evident across two different developmental formulations (see table 6). This involves looking for parallel themes in the developmental process evident in two or more offences. The thematic analysis is one in which it is the developmental process that is explored for themes and, as such, does not require that the same offence or outcome is evident. In this illustrative account two offences, one attempted rape and violent assault and the other a violent assault are used to evidence a similar developmental process. This kind of analysis across offences helps to test out whether the sequence observed is unique or capable of being replayed in other contexts (in its entirety or in parts). It is a version of seeking inductive warranty for a formulation. The more times the pattern of offending has been repeated, the greater the degree of confidence in it as a hypothesis.

*Hypothesised psychological mechanisms involved in each stage of the developmental formulation*

In this table (see table 7) the psychological process driving the process at each of the stages in the developmental formulation are specified. This process is involving a cascade of shifts in triggers and states. Jones (2004) suggested that these might be described using Markov chains. Descriptions of the set of states an individual has (i.e. a repertoire) and the probability that these will develop, shift, or be triggered into any other state. The Daffern model highlights the importance of identifying ‘high risk states’ in working with possibilities of finding alternatives to institutional violence as a way of problem solving. This kind of analysis helps to identify what these could be for each case. As well as what triggers and precipitating processes need to be attended to.

* Insert table 7 here

*Analysis of developmental drivers that are the origins of sequential processes of offending*

In this table (see table 7) a childhood event (but a number of childhood events can also be explored), obtained through careful interviewing, avoiding suggestive or confirmatory bias as far as possible, are examined to look at earlier experiences of the patterns identified in the context of offending. And to identify processes using a range of analytic approaches. This can offer an opportunity to revise the pattern or sequence.

*Example of racist trauma in background contributing to developmental process*

The incremental impact of racism as trauma can be mapped out in a similar way (see table 10)

* Insert table 8 here

*Example of clinically relevant behaviour (OPB) recapitulating themes in offence and Prosocial/’positive’ alternative behaviour*

This table (see table 9) illustrates the way in which the developmental process can be recapitulated in the context of a custodial setting.

* Insert table 9 here

In his table (see second row of table 9) an example of prosocial alternative behaviour is identified.

*Looking at the Offence Paralleling Contexts in Custodial Setting Linked with Themes*

In this table (see table 10) the significance of offence paralleling contexts is explored. Formulation of contextual contributions to the process can help with making recommendations of settings where the individual will be ‘set up to fail’ or, conversely, supported.

* Insert table 10 here

Assessment of things like the extent to which hostel staff are aware of issues that might be triggering e.g., ongoing exposure to racism and a range of other trauma triggers is critical. Responsibility for avoiding offending lies with both the individual and those in the context the person is released into. Interventions can be addressed to contexts as well as individuals.

*Offence paralleling context after release*

Offence paralleling contexts can also be identified post release (see table 11)

* Insert Table 11 here

ConclusionS

To summarise, risk assessment formulations and formulations of positive alternative behaviour are given a greater degree of warranty if they are subjected to tests. Evidence for any of the following are suggestive of a greater degree of confidence in the risk-process identified in the formulation:

1. The individual’s demographic profile and context matches those evidenced in the large *n* studies that are being used to evidence a particular factor as being evidence of increased risk
2. Past similar processes in the individual’s history, suggesting that it is a recurrent process
3. Evidence in the current context that the individual has struggled to deal with the same process being precipitated by in-treatment precipitants that parallel those evident at the time of the offence.

Instruments ‘measuring risk’ and ways of evidencing change developed using reconviction as an outcome are potentially biased and consequently other approaches to evaluating risk, safety and change need to be employed. In this chapter it has been argued that for risk and safety assessment to be effective the practitioner needs to move away from assessing individuals and look at individuals in contexts. Offence paralleling behaviour and offence paralleling contexts have been highlighted as clinically useful approaches to working with risk and strengths-based processes. Looking at the ways in which contexts precipitate offence related altered states and associated processes resulting in objectification of people as well as processes whereby an individual manages to treat others in a humane way in spite of being triggered in different ways can be clinically useful when working towards a rewarding non-offending lifestyle.

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Figure 1 Nomothetic, inductive and predictive warranty for hypotheses in formulations

**Nomothetic Evidential warranty** deriving from nomothetic pattern matching, (Yin) i.e. the pattern of relevant features in the individual case matches the pattern of defining features that has been supported in large N studies as correlating with RTO.

Prediction of future behaviour based on past behaviour (formulation)

**Predictive warranty**

Predictions based on the formulation that have survived test through prediction

**Inductive warranty**

Thematic review, looking for repetitions, of past patterns of behaviour deriving warranty from the extent to which the pattern has been repeated

Figure 2. Risk Contexts and Risk processes

Figure 3 Overlap between personal and contextual factors in current setting and at the time of the offence

**Custodial** **setting Offence settings**

Personal

and

Contextual

Factors

Evident in

both

the

custodial

and

offence

 setting

 Personal

 and

 Contextual

 Factors

 Unique to

 The

 offence

 setting

 Personal

 and

 Contextual

Factors

Unique to

 The

 custodial

 setting

Table 1 COR resource qualities and ‘good lives’

|  |  |
| --- | --- |
| **COR qualities of resources** | **Good Lives interpretation** |
| 1. The amount of resources or ‘resource reservoir’ prior to the stressor(s).
 | Contextual capacity to deliver and support acquisition of goods in sustained way. |
| 1. The ‘Shelf life’ of the resource; will it last or lose its usefulness.
 | Availability of a particular approach to obtaining goods over time. |
| 1. The ‘Potency of the resource; how strongly does it offset the harmful effects of the stressor.
 | The extent to which a particular ‘good’ meets the need previously met by offending. |
| 1. The ‘robustness’ of the resource; does this resource impact on a limited number of stressful events or is it effective for a range of different kinds of stressor?
 | The extent to which acquisition of the good meets a range of needs as opposed to just a few. |
| 1. The ‘transportability’ of the resource; would the resource still be there if the individual moved to a different location?
 | Transportability of goods acquisition processes. |
| 1. The ‘durability’ of the resource; if the resource was used repeatedly for a long time would it still be accessible or would it wear out quickly?
 | The durability of a particular approach to acquiring ‘goods’ . |
| 1. The ‘replenishability’ of the resource; how easily can the resource be replenished if it is depleted?
 | The extent to which a means of acquiring goods can be replenished if depleted. |
| 1. The ‘accessibility’ of the resource; is the resource accessible when it is needed?
 | The ease with which a good can be accessed when it is needed. |
| 1. The ‘efficiency’ of the resource; does the coping strategy require a high level of effort and resources?
 | The extent to which a good does not require other resources in order for it to be actualised. |
| 1. The ‘facilitative effect’ of the resource; how well does the resource facilitate, catalyse or support other resources?
 | The extent to which acquisition of a good facilitates the acquisition of other significant goods. |
| 1. The ‘generative capacity’ of the resource; does the resource create new resource (a kind of meta-resource).
 | The extent to which the obtaining of a good creates new opportunities for needs to be met with other goods. |

Table 2. Offending, Paralleling behaviour and Objectification

|  |  |  |  |
| --- | --- | --- | --- |
| Offence | Nature of objectification | Examples of Offence Paralleling states and beliefs  | Examples of Prosocial Alternative Behaviour |
| Violent offence | Denial of personal impact of violenceDenial of others’ rights to choose/agency, Denial of dignity | Supportive of others’ violence as a way of problem solving,Other kinds of abuse – e.g. emotional – that involve minimising others’ dignity (e.g. name calling,) deception.Dissociative statesManic sates (if in the past these states associated with violence) | Challenging others expressing belief in violence as a solution.Expression of anger or distress linked with loss of status in non-violent manner (e.g., making complaints, expressing concerns to authorities in nonviolent manner) |
| Sexual offending | Seeing people in terms of their bodies or parts of their bodies and losing sight of them as feeling peopleSimilar objectification to that evident in violent behaviour | Evidence of sexual interests associated with lack of appreciation of other as sentient choosing agent - in reality or in fantasy.Sexual dissociation (linked with trauma histories) | Healthy expression of sexuality.Expressing concerns for other.Challenging misogynistic behaviour.Awareness of shifts in state and skills in grounding self. |
| Theft | Not recognising impact of theft psychologically e.g. distress | Failure to recognise distress of others when taking their things, behaviours like queue jumping and not returning borrowed things | Showing concern for others property. |

Table 3 Normal Waking and Trauma Related states of Consciousness (Based on Frewen and Lanius 2015)

|  |  |  |
| --- | --- | --- |
|  | **Domains of consciousness** | **Correlates and causes** |
| **Time** | **Thought** | **Body** | **Emotion** | **Frequency**  | **Dissociation** | **Extent of developmental trauma experiences** |
| **Normal Waking Consciousness** | Intrusive recall,Reminder distress | Negative Self-Other-Referential thinking | Physiological Hyperarousal | General negative affect  | Frequent | Less dissociative  | Lower levels of developmental trauma |
| **Trauma Related Altered States of Consciousness** | Flashbacks,Reliving, Fragmentation | Voice hearing | Depersonalisation | Emotional numbing, compartmentalised emotion | Infrequent | More dissociative | High levels of repeated developmental trauma |

Table 4 States of consciousness and relationship to the world and to others

|  |  |
| --- | --- |
|  | **Domains of consciousness** |
| **Relationship to world** | **Relation to others** |
| **Normal Waking Consciousness** | Aware of and responsive to world | Attend and care about others mental states |
| **Trauma Related Altered States of Consciousness** | Detached, distracted, ‘in a bubble’, or hypervigilant,Anticipating attackProfound sense of the world being unsafe | Objectification of others,Unfeeling, not caring orDemonising, pleading desperation.Or deeply preoccupied with alleviating distress and looking after other |

Table 5 State transition probability matrix

Percentage figure indicates the percentage of occasions that the prior state shifts into the follow-on state.

|  |  |
| --- | --- |
|  |  **Prior state (t1)** |
| Everyday relaxed | Scared Hypervigilant‘Looking for trouble’ | Dissociated ‘spaced out’ | Agitated ‘as if I’m trying to get away from scared feeling by being angry, but it just gets worse’ |
| **Follow on state (t2)** |
| Everyday relaxed (range of different ‘everyday’ states) | 85 % | 20% | 60% | 50% |
| Scared hypervigilant. ‘Looking for trouble’ | 5 % | 50% | 10% | 10% |
| Dissociated‘Spaced out’ | 10% | 20% | 10% | 20% |
| Agitated ‘as if I’m trying to get away from scared feeling by being angry, but it just gets worse’ | 0% | 10% | 20% | 20% |

Figure 5 Diagrammatic version of Markov chain illustrating chances of shifting from one state to another.

50%

85%

Everyday relaxed

Scared hypervigilant

20%

30%

50%

20%

30%

Dissociated

‘Spaced out’

Agitated ‘as if I’m trying to get away from scared feeling by being angry, but it just gets worse’

20%

20%

30%

20%

Example (fictional accounts)

Table 6 Index offence stages and similar themes in another offence

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught****Feelings of shame and guilt** |
| **Attempted rape and violent assault** | 36 | Split up with partner after assaulting them whilst fearing rejection and became increasingly isolated | Reports that he was using drink, drugs and pornography to kill pain | Increasingly experienced self as being ‘in a bubble’ and cut off from people | Says he was “watching from the outside” | Seeks to meet somebody in a bar and is rebuffed becomes angry and rejection is triggered | Attempts to rape stranger | Reports sense of satisfaction about what happened initially | Attempted to use DES and later experienced both shame and fears of getting caught |
| **Violent assault** | 25 | Working away from home. Partner is at home. Begins to express feelings of jealousy towards her. | Increased use of drink drugs and pornography | Works hard and becomes increasingly cut off from others | Feels his colleagues are talking about him and does not feel part of the team | Told he must work on a Friday night; feels picked on and rejected by his manager | Goes into town the next day and gets into an argument and assaults shop attendant | No account of how he felt | Lies to police saying that he had been assaulted first. Retrospectively reports feelings of shame and fears of getting charged. |

Table 7 Psychological processes at different stages of offence and developmental antecedents

Trigger or precipitating process

Rejection sensitivity

Attachment trauma events

Sex and drugs as coping

ASC

Socially triggered shifts in mental state

Social alienation and envious feelings

Rejection crisis: rapid shift from intense pain to vengeful rage

Triumphant feelings

Acknowledgement of consequences as shift back to NWC

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught****Feelings of shame and guilt** |
| **Childhood conduct difficulties** | 7 | Taken into care after accounts of being assaulted by both parents | Reports of sexual behaviour with peers in care setting. Also reports of episodes of early experimentation with alcohol | Increasingly experienced self as being ‘a loner’ in care. Also angry about lost family and being abandoned by parents | Episode where he stole from fellow pupils at school. Reported that he was jealous of what they had | Seeks friendships at school but then reacts badly when he believes that he is being rejected or unwanted. | Fights at school | Reports of feeling good about attacking people and expressing revenge | Attempted to use DES and felt shame about his behaviour and ‘not being like other people’ |
| **Behavioural****Conservation of Resources theory** | Massive loss of safety, attachment, belonging  | Double reward: getting rid of bad feelings and gaining ‘good’ ones | Ongoing loss of social reinforcementSetting events for anger becoming more reinforcing |  | Trauma reminders trigger reactions partly linked with earlier learning |  | Finds angry attack rewarding | Satiation of anger-based urges reveals underlying feelings of shame and fear of getting caught |
| **Systemic** | Abusive family dynamics | Lack of boundaries in care setting | Dislocation from social networks | Possibly scapegoating? | Possibly replaying family dynamics |  |  |  |
| **Schema** | Rejection and abandonment schema | Detached protector mode | Detached protector mode? |  | Rejection schema | Bully attack mode |  | Defectiveness schema |
| **Neuropsychological** |  | Altered states linked with substance abuseReduction in intentional agentic states | State dependent shifts in frontal lobe engagement |  | Limbic emotional systems triggered | ORASC | ORASC | Capacity for thinking and planning re-established |

Table 8 Illustration of analysis of incremental impact of racist trauma

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught****Feelings of shame and guilt** |
| **Childhood conduct difficulties** | 7 | Taken into care after accounts of being assaulted by both parents | Reports of sexual behaviour with peers in care setting. Also reports of episodes of early experimentation with drugs alcohol | Increasingly experienced self as being ‘a loner’ in care. Also angry about lost family and being abandoned by parents | Episode where he stole from fellow pupils at school. Reported that he was jealous of what they had | Seeks friendships at school but then reacts badly when he believes that he is being rejected or unwanted. | Fights at school | Reports of feeling good about attacking people and expressing revenge | Attempted to use DES and felt shame about his behaviour and ‘not being like other people’ |
| **Racism**  | Taken into care by white people | Links in with other people of colour in care system  | Being the only person of colour in his school left him feeling very alone | Envious anger at being subjected  | Accumulating microaggressionsAnd then repeated experiences of racism and rejection; all experienced as triggering | Bullying and attempts to restore a sense of justice in an unjust world | Initial sense of retribution | Longer term internalisation of oppressive processesShame and guilt.  |

Table 9 Offence paralleling behaviour (OPB) Prosocial alternative behaviour (PAB) meeting same needs as those evident in index offence

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught****Feelings of shame and guilt** |
| **Attempted rape and violent assault** | 36 | Split up with partner after assaulting them whilst fearing rejection and became increasingly isolated | Reports that he was using drink, drugs and pornography to kill pain | Increasingly experienced self as being ‘in a bubble’ and cut off from people | Says he was “watching from the outside” | Seeks to meet somebody in a bar and is rebuffed becomes angry and rejection is triggered | Attempts to rape stranger | Reports sense of satisfaction about what happened initially | Attempted to use DES and later experienced both shame and fears of getting caught |
| **In custody OPB** | 39 | Mother stopped visiting and then died after protracted illness | Drugs swapping, positive urine tests, and evidence of pornography use in custody | Spending lots of time in cell; reports becoming isolated | Envious of other offenders with shorter sentences | Tries to go to education because there is something on there that he wants to attend, but not permitted to attend | Assaults another inmate who was attending | Reports that this was immediately a relief | Attempts to avoid cctv by doing this in a blind spot.Feels shame and fears retribution and consequences for parole |
| **In custody PAB** | 39 | Long term therapy came to an end | Used DBT skills to ‘self-soothe’ and later used staff relationships to get support in coping with reactions to this | Started to isolate, noticed this, and explored this with staff. Actively sought out social contact | Began to feel envious. Challenged thinking about this. Also sought out contexts where he could ‘belong’ | Staff refuse to get something from property box | Has an argument with staff. Uses ‘time out’ when he feels he might become violent |  | Goes back and apologises to staff for arguing with them in the way he did, Offers some form of reparation. |

Table 10 Looking at offence paralleling contexts linked with themes

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught.****Feelings of shame and guilt** |
| **Attempted rape and violent assault** | 36 | Split up with partner after assaulting them whilst fearing rejection and became increasingly isolated | Reports that he was using drink, drugs and pornography to kill pain | Increasingly experienced self as being ‘in a bubble’ and cut off from people | Says he was “watching from the outside” | Seeks to meet somebody in a bar and is rebuffed becomes angry and rejection is triggered | Attempts to rape stranger | Reports sense of satisfaction about what happened initially | Attempted to use DES and later experienced both shame and fears of getting caught |
| **In custody****Contextual factors** | 39 | Mother stopped visiting and then died after protracted illness | Drugs swapping, positive urine tests, and evidence of pornography use in custody | Spending lots of time in cell; reports becoming isolated | Envious of other offenders with shorter sentences | Tries to go to education because there is something on there that he wants to attend, but not permitted to attend | Assaults another inmate who was attending | Reports that this was immediately a relief | Attempts to avoid cctv by doing this in a blind spot.Feels shame and fears retribution and consequences for parole |
| **Offence Paralleling Context** |  | Deprivation of belonging needs, secure base (?) lost. Ongoing racism and insensitivity to trauma and diversity  | Exposed to others using drugs and pornography in a culture where these play a significant role | Neglected by prison; lack of understanding of this as a trauma reaction and a state requiring intervention | Exposure to others having resources he believes he does not have and this triggering envy and a sense of injustice | Lack of social capital and opportunity to meet self-regulation needs by engaging in discussion with caring other | Inattentive context where staff don’t understand risk processes at play |  | Lack of trusting relationships. Ongoing lack of resources. |

Table 11 Offence paralleling contexts after release

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Incident** | **Age** | **Relationship ending**  | **Substance misuse and using pornography to manage hurt** | **Prolonged Isolation avoiding contact** | **Envious and “looking in”** | **Interprets being ‘rebuffed’ as rejection** | **Attacks stranger**  | **Reports revenge satisfied** | **Escapes****Fears getting caught****Feelings of shame and guilt** |
| **Attempted rape and violent assault** | 36 | Split up with partner after assaulting them whilst fearing rejection and became increasingly isolated | Reports that he was using drink, drugs and pornography to kill pain | Increasingly experienced self as being ‘in a bubble’ and cut off from people | Says he was “watching from the outside” | Seeks to meet somebody in a bar and is rebuffed becomes angry and rejection is triggered | Attempts to rape stranger | Reports sense of satisfaction about what happened initially | Attempted to use DES and later experienced both shame and fears of getting caught |
| **Outside after release** | 39 | Forms new relationship and she reports that he has become very ‘possessive’ and threatening at times. Relationship comes to an end. | Tells probation officer that he had been drinking heavily and reports using pornography | Stays at home stops going out to look for work, slowly does less and less  | Reports feeling like an outsider | Attempts to form a relationship with somebody he had met in gym, but they do not want this | Visits former partner and threatens her with assault | Reports that this was a release of pent up emotion | Begs her not to tell probation or police that he has done this. Experiences shame and fear of recall |
| **Offence paralleling context after release** | Hostel staff or probation staff do not have the trauma informed perspective to enable them to recognise crisis and support/scaffold coping with ongoing racism and adversity. | Lack of resources needed to help manage emotional distress e.g. support, activity scheduling, employment, leisure activity.  | Neglect from staff who could have recognised the pattern and supported the individual to get through it. Lack of trauma awareness. | Lack of social capital and opportunities to feel as if belongs. Lack of understanding of the significance of connection or lack of it  | No alternative relationships. No space to work on what has been triggered both by current rejection and past rejection and exposure to racism, homophobia, sexism etc | Lack of monitoring.  |  | Lack of support and trusting relationships |