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Abstract

Background: Increasing attention is focussing on the role of environments in the rehabilitation of offenders, with a range of reported outcomes in the literature. This systematic review aims to explore forensic environments and the outcomes and changes that result, in order to assess the current knowledge in this area and to inform current and future practice.

Method: Using a systematic review approach with an extensive literature search and robust application of appraisal methods, nine studies were identified. The studies included one mixed method study (n=1), qualitative methods (n= 4) that utilised Thematic Analysis, Interpretative Phenomenological Analysis (IPA) and Foucauldian Discourse Analysis (FDA) and quantitative methods (n = 4) that utilised the responses to psychometric measures including the EssenCES and CIES to assess the quality and outcomes associated with environments in forensic settings.

Findings: Three superordinate themes were identified 1) Factors required for successful environments, 2) Factors that influence successful environments and 3) Factors affected by successful environments.

Implications for practice: In addition to outcomes, this review found factors required for forensic environments that are consistent with previous literature within the field, and factors that might influence how successful environments can be. Further research would be beneficial around motivation, as it appears to influence the success of environments and be a potential outcome of environments. Further research might usefully explore the ideal time in service, for optimal outcomes in order to advise those currently commissioning services of this nature.

Keywords: Enabling Environment, Therapeutic, Milieu, Forensic, Rehabilitation.
**Introduction**

**Background**

Environmental factors in forensic settings are receiving increasing levels of attention to help understand custodial behaviour and contribute towards a rehabilitative agenda for offenders both within custody and after release. “Where” rehabilitation work occurs, for example, prisons, hospitals etc., and the impact that it can have, is perhaps the least researched principle of models of rehabilitation that focus on “what works” and “how” (e.g. Risk, Need and Responsivity model: Andrews, Bonta & Hoge, 1990; Andrews & Bonta, 2010). By examining ‘where’ rehabilitation occurs, understanding the mechanisms at work and associated outcomes, we can contribute to the broader agenda of rehabilitation and risk reduction for offenders.

Research has identified a number of outcomes linked to modifiable factors within environments. In non-forensic settings, environmental distraction e.g. noise, was found to link to individuals making more extreme, stronger judgements about other people when they were exposed to noisy and distracting environments (when a more neutral judgement would be more appropriate) compared to individuals in quieter, less distracting environments (Siegel and Steele, 1980). In addition, Spreat, Lamina, Jefferys, Axelrod, Murphy, and McGuffin (1990) found that high noise levels suppressed the social interactions of patients with lower cognitive functioning. Baron (1990) found that participants exposed to positive stimuli (in this case, scent) set higher goals in a coding task and were more likely to adopt an efficient strategy for performing the task. Males also reported high self-effacy, and set higher monetary goals and were more amenable during face-to-face
negotiations. Finally, participants reported weaker preferences for handling future conflicts through avoidance and competition. Whilst not specifically focused on forensic settings, it is reasonable to assume that there would be similar effects of environments within forensic settings.

In forensic settings, research shows similar links between setting conditions and outcomes. For example, Ryan and Deci (2000) highlighted that if the individuals’ experience of autonomy, competence and relatedness are unsupported in the social environment, there would be a detrimental impact on motivation and engagement in activities such as performance, persistence and creativity. McNeill (2012) comments that harsh prison environments impact on the rehabilitative function of prisons.

In order to establish what contributes to environments such as forensic environments, being successful, it is important to consider the variety of aims of such environments. These typically include increased health and/or well-being and rehabilitation from a range of difficulties. Haigh (2013) describes these difficulties as resulting from problems in early life and deficits in primary emotional development. Haigh (2013) discussed five components: attachment, containment, communication, inclusion and agency (See Table 1), which are necessary for primary emotional development. He suggests the implementation of these components in a therapeutic environment can facilitate secondary emotional development. Secondary emotional development can help to tackle the previously highlighted difficulties (such as the aims mentioned above). Therefore, if the environment can offer the conditions that meet these emotional needs, the desired outcomes (e.g. positive shift in health and wellbeing) are achievable. This provides the underlying rationale for the conception of Enabling Environments (EE) in the UK and the application of EE to prison rehabilitation.
Table 1

Core Components for Primary Emotional Development, Adapted from Haigh (2013)

A brief review of research exploring the five components described by Haigh (2013) follows, to enhance the understanding of the links between these components and environmental outcomes.

Attachment

Rollinson (2012) found that certain features of leadership ensure the continuity of a healthy therapeutic environment, such as ensuring that beginnings and endings for those within the environment receive attention. Taxman and Ainsworth (2009) highlight the importance of the correctional environment in delivering rehabilitative programs and of directing efforts toward a milieu where therapeutic alliance and other positive relationships develop to achieve better outcomes. Factors that contribute to a positive therapeutic alliance include family involvement, collaboration, and the creation of a non-blaming environment (Church, 2008). Some outcomes from positive relationships could include those summarized by Hearty, Wincup, and Wright, (2016) from two process evaluations that investigated the role that prison Drug Recovery Wings (DRW) play in supporting recovery. The findings relating to attachment are the crucial nature of the relationships between prisoners and staff in building recovery capital; participants reported a more relaxed environment with less bullying. Other outcomes as a result of positive attachments include increased intrinsic motivation found by Gendreau, Listwan, Kuhns, and Exum (2014), and the role that positive

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1 Drug Recovery Wings (DRW) adopt a similar focus on the environmental aspects to support recovery of offenders who have substance misuse problems in UK prisons.
social environments play in supporting individuals to experience a shift in perspective regarding their confidence to cope and commitment to non-violence (Ellis and Bowen, 2017).

**Containment**

Schalast, Redies, Collins, Stacey, and Howells (2008) have proposed that the key characteristics of a social climate in a forensic setting relate to the extent to which 1) the perception of the climate as supportive of therapy and therapeutic change, 2) whether mutual support is present, and 3) the level of tension and perceived threat of aggression and violence that exists. Rollinson (2012) linked the continuity that leadership provides, to similar findings. In relation to containment, this included 1) emotional containment and ‘holding in mind’, 2) “holding the line” and 3) tolerating uncertainty.

**Communication**

Psychologically Informed Planned Environments (PIPEs) offer residents with complex needs such as personality disorder, a more contained, psychologically informed environment to support the progress made in prior interventions. Brown (2014) reports clinical observations that offenders who successfully engage in PIPE environments appear more able to talk about their feelings, address conflict and more appropriately seek help. Preston (2015) refers to the process of having a culture of enquiry within PIPEs, which helps staff to facilitate communication for residents, giving them the chance to explore what they are feeling when they “act out” to support them to get to the point where they can “talk out”. An emphasis on openness within communication links to literature on the therapeutic alliance (Guthrie, Smillie, McKeown & Bainbridge, 2017) within therapeutic relationships (see attachment section).
Inclusion

In relation to inclusion, Hearty et al (2016) found that staff and prisoners perceived the DRW as a community, there was an emphasis on support from prisoners and the majority of prisoners felt that their peers were supportive and encouraging to a greater degree than they had experienced previously.

Agency

Hartmann, Meterko, Rosen, Zhao, Shokeen, Singer, and Gaba (2009) report that when leaders create a strong entrepreneurial culture which promotes 1) initiative taking, 2) group learning and 3) innovative approaches to problem solving, this culture informs action in dealing with patient safety issues. Hasselrot and Fielding (2010) reinforced this, suggesting that the approach and attitudes of staff influences the culture of a forensic setting, in not allowing it to become destructive, and Senker (2015) who identified the importance of having choice to make decisions, and how this can help foster an encouraging environment.

Some of the identified problems associated with establishing and maintaining positive environments in forensic settings come from the conflicting aims that are associated with custodial environments. Taxman and Ainsworth (2009) highlight the conflicting goals (sentence vs. treatment) or operational goals (security vs. treatment) and the impact this can have on therapeutic work offered to offenders, and the negative effect this can have on support for rehabilitative efforts. For example, Ross (2008) points out how a therapist might encourage and foster a therapeutic and calm environment in the therapy room that can be undone out in the exercise yard in a single confrontation with a custodial officer. Hearty et al (2016) also suggested a disparity in the role wherein prison officers felt caught between the care and discipline aspects of their roles.
Enabling Environments (EE) in the UK

Johnson and Haigh (2011) describe the development of the Enabling Environments initiative in the UK, which commenced when the Royal College of Psychiatrists identified a need to capture work that was occurring in environments not within the scope of existing frameworks such as those underpinning the work within Therapeutic Communities (Paget, Thorne & Das, 2015). The project developed to produce a set of comparable core principles and standards applicable in non-TC settings. The EE principles derived from the experiences of ordinary individuals on what it is that bind communities together, thus generating a series of considered principles for environments. Enabling Environments in the UK, as defined by the Royal College of Psychiatrists (RCP, 2013) are:

- Places where positive relationships promote well-being for all participants.
- Places where people experience a sense of belonging.
- Places where all people involved contribute to the growth and well-being of others.
- Places where people can learn new ways of relating.
- Places that recognise and respect the contributions of all parties in helping relationships.

Ten core standards (see Table 2) were developed (See Appendix A for the complete framework) that work together to foster an Enabling Environment.

Table 2

The Enabling Environment Standards

**INSERT TABLE 2**

The Enabling Environments award in the UK arose from the idea that some agencies may wish to pursue and demonstrate service improvement by being objectively assessed leading
to formal accreditation and an award of Enabling Environment status. The award is based on a portfolio of evidence, assessment visit and discussions with service users, staff and stakeholders for external verification (Johnson & Haigh, 2011).

**Aims of the Current Review**

The objective of this review is to identify the impact of enabling and/or therapeutic environments in forensic settings on well-being, desistance, mental health and relationships for patients and staff living and working with these environments.

**Method**

**Search Strategy and Terms**

The search strategy aimed to find both published and unpublished studies. Various databases and journals (PsychINFO, PsychEXTRA, Web of Science, Criminal Justice Abstracts and SCOPUS) were explored for relevant publications relating to environments in forensic settings. Search terms and combinations are depicted within Table 3.

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**Inclusion and Exclusion Criteria**

The inclusion and exclusion criteria were chosen to enable the researcher to capture and review the most relevant published empirical studies, focusing purely on factors relating to enabling and/or therapeutic environments within forensic settings. Inclusion criteria are:
Studies exploring the experiences of residents within enabling/therapeutic environments.

- Outcome studies for improved relationships, wellbeing, mental health, or desistance linked to the therapeutic environment / climate.
  - Studies using validated tools measuring therapeutic environments / climates.
  - International studies included.
  - Adult males over 18 years.
  - Published after 2008.

Exclusion criteria are:

- Not English language.
- Not peer reviewed.
- Book chapters.
- Not a forensic setting.
- Focus on therapeutic communities.

Figure 1 presents a detailed flow diagram illustrating the search and screen-out pathway.

**INSERT FIGURE 1**

**Figure 1:** Search and screen pathway.

The remaining 15 studies were appraised using the following protocol. Qualitative studies were appraised using the National Centre for Social Research, Quality in Qualitative Evaluation framework (Spencer, Ritchie, Lewis and Dillon, 2008) see appendix B). Eighteen
quality indicators are considered and rated as present or absent\(^2\). Quantitative studies were appraised using the Effective Public Health Practice project quality assessment tool (EPHPP: see appendix C). From applying the above, six studies were excluded based on weak ratings (Quantitative, n=5) or low number of quality indicators (Qualitative, n=1). Nine studies remaining for inclusion in the systematic review.

**Synthesis of Data**

To facilitate comparison and synthesis of data across studies, information was gathered using a data extraction tool (Jones, 2007) as shown in Appendix D, before being tabulated (see Appendix E and F). The nine papers were scrutinised to present general similarities and comparisons in order to present an overview. Following this, key themes were identified.

**Results**

**Description of Studies**

**Methods breakdown.**

Four of the studies were quantitative and four were qualitative. One design was mixed methods. The qualitative methods utilised were:

- Thematic Analysis
- Interpretative Phenomenological Analysis (IPA)
- Foucauldian Discourse Analysis (FDA)
- Observational / field notes

\(^2\) No guidance is given to overall strength of the studies or categorising studies according to numbers of indicators, it was concluded that studies with the number of indicators as six or less would be considered weak and therefore excluded.
The mixed method study utilised a Convergent mixed methods approach with Thematic Analysis for the qualitative component.

The quantitative study designs were:

- 2 x 2 between groups design (n=1)
- Case Control study (n=2)
- Cohort study (n=1, one group pre + post (before and after))

**Contextual information.**

Three of the qualitative studies focussed on Psychologically Informed Planned Environments (PIPEs) in UK custodial environments (Bennett, 2014; Bond & Gemmell, 2014; Preston, 2015). The remaining qualitative study took place in a UK prison where the focus was on rehabilitation of sexual offenders (Collins & Nee, 2010). The quantitative studies took place in a variety of therapeutic and rehabilitative focussed establishments. These included establishments focussed on the needs of violent offenders (Casey, Day, & Reynolds, 2016; Day, Casey, Vess, & Huisy, 2012) sexual and violent offenders (Woessner & Schwedler, 2014) and offenders with substance abuse treatment needs (Kubiak, 2009). The mixed method study took place in an establishment focussed on the treatment of sexual offenders (Blagden, Winder, & Hames, 2016).

**Geographical location and study focus.**

All qualitative studies took place within the UK. The three studies that occurred within Psychologically Informed Planned Environments (PIPEs) focussed on the experiences of staff (Bond & Gemmell, 2014) and the hopes / expectations / experiences of residents in these
environments (Bennett, 2014; Preston, 2015). The remaining qualitative study focussed on the factors influencing change in sex offender treatment from the perspective of facilitators (Collins & Nee, 2010).

The quantitative studies were more internationally focussed, with studies occurring in Australia (Casey et al., 2016; Day et al., 2012), Germany (Woessner & Schwedler, 2014), and the US (Kubiak, 2009). The focus of the studies was on factors that could influence the quality of environments (e.g. incarceration length, protective custody status, treatment units vs. non-treatment units) and the influence of environments on other factors (e.g. risk of reoffending). The mixed method study (Blagden et al., 2016) took place in a prison in Europe and focussed on the experiences of prisoners and staff at a therapeutically orientated sexual offenders’ prison to understand whether the prison environment was conducive to rehabilitation.

**Participant characteristics.**

Six studies focussed exclusively on offender participants (Qualitative n=3; quantitative n=3). One study focussed exclusively on staff participants (qualitative n = 1). Two studies focussed on offender and staff participants (mixed method n=1; quantitative n=1). Offender participants within the studies were selected from a range of security categories of prison (high to medium) and secure units. All offender participants were male, with the exception of a larger scale quantitative study that had a female participant group³ (Kubiak, 2009). All offender participants within the studies had committed offences of a serious sexual or violent nature. Some offenders across the studies had completed treatment and some had

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³ The specific findings for the female participant group were excluded from the themes from this review due to being an exclusion criterion.
not. Other demographic data consistently collected across the studies included details of sentence length, and age. Some variability was observed with data pertaining to treatment needs and personality factors.

Staff participants were mixed male and female. The roles captured within the staff participant categories (e.g. Blagden et al., 2016) ranged from discipline staff, psychological staff, senior managers and other grades (e.g. librarian). The majority of studies reported the length of time staff had been in post. All studies reported the age range of staff participants.

Themes from the Review

From reviewing the papers, three superordinate themes were identified, with sub-themes within them, described in Table 4.

Table 4

Themes from the review
INSERT TABLE 4

Factors required for successful environments.

This superordinate theme consists of themes of purpose and shared identity, safety, relationships, and autonomy.

Purpose and shared identity.

Blagden et al. (2016) highlight the importance of purpose and shared identity for those residing in enabling environments, but also for the establishment itself, suggesting that purpose and shared identity is an institutional consideration as well as an individual one.
The interaction between the offender participants and the environment is important but not exclusively related to positive outcomes. Participants have to want to change or engage, meaning individual motivation is significant and the environment can help to encourage this desire to change. They discuss how the establishment where they conducted their study focussed on treatment of sexual offenders, which supported the development of the culture of rehabilitation as integrated into all aspects of the prison culture rather than viewing the treatment in isolation. It stands to reason therefore, that for better outcomes, establishments need to have a clearly defined purpose and set of goals that are integrated and pervasive throughout the establishment and culture, to help to support those residing within it to develop their own purpose and identity which would ideally replicate that of the establishment, e.g. rehabilitation, desistance etc.

**Safety.**

Safety was found to be a core component in establishing a successful environment (Blagden et al., 2016) and furthermore, the attitudes of staff towards residents was linked to the perception of the environment as ‘safe’ by those residing within the environment, thus suggesting that the more positive the staff attitude the more safe residents felt.

**Relationships.**

Relationships between staff and residents within environments is identified in a number of the studies as a key requisite for environments to be perceived as positive and successful against their primary aims. Relationships consist of the attachments and connections that staff and residents make (Bond & Gemmell, 2014) and should be characterised by supportive, constructive, open and genuine interactions (Bladgen et al., 2016; Day et al.,
2012). These relationships link to positive outcomes (Bond & Gemmell, 2014) which could include the ability of residents to set goals, recognise and express emotions (Preston, 2015).

Kubiak (2009) identified that a key difference in the ratings of environments (treatment vs. non-treatment) were residents’ perceptions of the staff who worked within the units. Participants in enabling environments consistently rated discipline staff more positively than their counterparts in comparable units did, on characteristics associated with a therapeutic milieu (e.g., accepting, understanding).

**Autonomy.**

Wossner and Schwedler (2014) identified that perceptions of restrictions in autonomy are important to consider in positive environments. Lack of, or restriction of autonomy relates to the extent to which offenders feel patronized and restricted during imprisonment, which is arguably common in forensic environments. However, the authors do not comment on possible reasons for autonomy being important when creating positive environments. Other literature in this area suggests that allowing choice and input into decisions, i.e. facilitating autonomy, helps to foster a positive, safe environment, although staff and establishments can be fearful of this approach particularly in custodial settings where there is a strong emphasis on hierarchy, rules, policies and control. Arguably, these aspects can inhibit a positive climate for safety due to fear of negative outcomes and blame for reporting safety-related problems (Hartmann et al., 2009; Senker, 2015).

**Factors that impact on successful environments.**

The themes within this superordinate theme are *motivation, staff roles and perception from within.*
Motivation.

Bennett (2014) highlights the importance of considering motivation of clients when reviewing referrals to the PIPE service studied. The aim of Progression PIPEs is to consolidate and generalise learning, to contribute to the overall OPD pathway aim to reduce risk. However, some offender participants in the study focused more on the risk reduction aims of the service. Bennett hypothesises that outcomes could be different for an offender who was motivated intrinsically by the desire to generalise their skills and achieve pro-social goals, compared to an individual who is extrinsically motivated to reduce their risk. Although not mutually exclusive, it is not possible to identify whether the participants in this study were intrinsically motivated, extrinsically motivated, or a combination and therefore, whether there is an impact on the data. However, research (Clarke, 2010) suggests that individuals who participate in qualitative research are likely to do so because of subjective interest, enjoyment, curiosity, introspective interest, social comparison, and therapeutic / material / economic interest. These characteristics could be more congruent with individuals motivated to engage generally for internal reasons (self-development) rather than external reasons (perceptions of risk), which could mean the data is more reflective of outcomes specific for this group of individuals. In my opinion, if participants are intrinsically motivated they may be more likely to view their environments positively and derive the benefits they can from residing within them.

Staff roles.

Staff roles was highlighted by Bond and Gemmell (2014) who explored the experiences of prison officers working in a PIPE designed for Life sentence prisoners. The theme ‘role conflict’ identified by Bond and Gemmell relates to the ‘staff roles’ theme identified in this
review and it explains the conflict between rehabilitation and punishment. Throughout the
analysis, there is a sense of what it means to be a prison officer and how the type of work
they are completing affects this; leading officers to development of a type of hybrid role
working on a PIPE. The rejection of aspects of their past role can lead to peers rejecting the
staff that have adopted this new way of working. In my opinion, this paper evidences a
common process that appears to occur for PIPE staff. Specifically, the way they are learning
about themselves, developing skills to understand others, viewing themselves, their identity
and the work they are doing differently and adapting their behaviour according to the needs
of the residents and the PIPE. This could equally influence the environment in a negative
way if the staff do not adopt the appropriate balance.

Collins and Nee (2010) identified a similar theme in their research labelled ‘operational
cflict’. Traditional prison culture and/or values view the security role as paramount, over
and above any rehabilitative effort and is dominated by risk-avoidance emanating from
political pressure to avoid making mistakes. Participants believe this cultural dynamic
featured negatively in the interactions between non-treatment staff and group participants.
For example, non-treatment staff undermining the rehabilitative effort made by individual
offenders and potentially undermining any rehabilitative culture developed during
treatment. Participants felt the behaviour by non-treatment staff affected the relationships
with authority generally, and may affect the successfulness (or lack of) of the intervention in
question.

Perception from within.

This theme reflects factors that can influence the participants’ perception of the
environment and may influence the success of environments. Casey et al. (2016) found that
the longer individuals resided in a specific environment, the more positive their assessment of the environment was. In the same study, individuals who were located in protective custody rated the environment more positively than individuals’ not in protective custody. The features felt to distinguish the environments (protective vs. non-protective\(^4\)) from one another were the more positive, supportive relationships between residents and staff, and with each other. This theme links to the *relationships* theme identified within the Superordinate Theme: Factors Required for Successful Environments; perhaps in order to develop the relationships required for successful environments, there is a need to consider the length of time required in the facilitation of these relationships.

**Factors affected by successful environments.**

This superordinate theme consists of the themes of *skills consolidation, belonging, identity, treatment readiness / readiness to change and change and growth.*

**Skills consolidation.**

Preston’s (2015) paper applies narrative identity theory (McAdams, 1994) to the experiences of men in a high security PIPE [HMP Frankland], using observational and anecdotal methods to try to make sense of the experiences and processes occurring. Preston highlights the perception of residents - they feel the environment is safe enough to try new skills and goes on to describe the process as a “pendulum swing” whereby residents try out different skills and behaviours, at times over or under compensating before achieving the appropriate balance of skill application. She also highlights the process of

\(^4\) Protective custody prisoners are separated from the mainstream prison population by either segregation or protection, within a rehabilitation-focused treatment facility. Non-protective custody prisoners were housed in small living units that focused on treatment for violence or substance misuse.
feedback as being central to the process of skill consolidation. Preston comments that the safe environment allows the participants to reconnect with their emotions, and identify and manage these in different, more contained ways. It is reasonable to assume that residents would not feel able to try their new skills in an environment that is not safe. This supports the previously identified sub-theme “safety” as an important factor in successful environments, and a possible causal link between the components of safety and skills consolidation.

Bennett (2014) explored the experiences of services users within a high security PIPE [HMP Frankland]. The study is small (n=5) and is limited to high security. As previously highlighted, the shared understanding of one function of Progression PIPEs is consolidation and generalisation. The theme ‘progression’ identified by Bennett, describes the interpretation of a process for consolidation and generalisation that could be occurring within PIPEs. The process illustrates the importance of residents identifying the skills they have developed and need to consolidate, actively consolidating their skills, recognising and being recognised by staff for skills generalisation, and ultimately progressing through their sentence. It is not clear from the data whether this process occurred with the residents sampled or if this was hoped/expected to occur but fits broadly with the hypothesis made by Preston (2015).

Belonging.

Bennett’s (2014) second theme “being part of a community” could link to the Enabling Environment process and is a conceptual argument for the process that residents may go through to achieve one of the core standards of “belonging”. It is hypothesised by Bennett that residents need to focus on “intrapersonal self-development which would enable participants to pro-socially interact with others on the PIPE” (p. 223) thus contributing to a
sense of belonging. This contributes to positive environments by the value that residents
derive from belonging to a community and the value the community gains by its residents’
increases in confidence, autonomy and participation. However, it is not clear from the
analysis that the process reported occurs in the order described for the residents sampled.

**Identity.**

Blagden et al. (2016) highlights the role the environment plays in the identity of those within
it, i.e. that residents can be themselves rather than portray an identity that could help them
to “survive”. This is reflected in the safety participants felt in their environment. Similar
thinking around the impact that environments have on identity is reported by Preston
(2015) who suggests that residents feel safe to try new ways of being, which can lead to the
identification and encouragement of narrative shifts between institutional and empowered
narratives. The institutional narrative is characterised by themes of negativity, pessimism,
disillusionment and blaming. The focus is often on the past, with little hope for the future. A
preoccupation with a ‘system approach’ dominates; individuals have no agency over their
own decision-making and that they exist as part of as system, rather than in their own right
as an individual. The empowered narrative includes positivity, hope, motivational
statements, and personal goals. It focuses on an individualised approach with responsibility
taking being a thread that runs throughout. It includes recognition of choices and
opportunities and is future focused. Ellis and Bowen (2017) suggest that positive social
environments can contribute to internal shifts, perhaps reflecting the shifts identified above
by Preston (2015) and this has important implications for desistance research.

**Treatment readiness / readiness to change.**
Blagden et al. (2016) found that prison climate predicted readiness for treatment and correlates with beliefs that offenders can change. The authors highlight that staff belief in the possibility of change in offenders contributes to the positive environment rating. Staff perception of the prisoners’ internal readiness to change also contributes to the positive environment, however, prisoners’ belief in the possibility of change does not contribute to the positive environment rating. It is unclear why there is this distinction but the authors suggest environments alone are not sufficient for change; individuals have to be motivated to change. This is consistent with the previously identified theme of motivation (Bennett, 2014).

Based on the data analysed, Day et al. (2012) reported that staff and prisoners in the specialist treatment prison, rated the social climate of the prison as more conducive to rehabilitation when compared to the mainstream prison comparison group, although the differences in the ratings of the environment were less pronounced for prisoners. The authors note that for those prisons that have adopted a specific treatment focus, it seems reasonable to suggest that social climates characterized by high level of social cohesion, mutual support, and safety are those that are likely to be successful in rehabilitating offenders which concurs with research previously discussed above (Blagden, 2016).

**Change and growth.**

Blagden et al. (2016) found the climate was rated positively and, in particular, participants had very high ratings of “experienced safety”, which appeared important for allowing individuals the space to deal with their problems, engage in treatment programmes and also grow and develop in personally meaningful ways, e.g. focussing on their offending behaviour, thinking about the self and future self.
Bond and Gemmell (2014) identified a theme from staff interviews entitled ‘growth’.
Arguably similar to the residents’ experiences, this theme reflects the personal journey that
staff take as they become more psychologically aware about themselves and the residents
they are working with. It includes a deeper understanding of the residents they are working
with, personal learning, and reflective skills.

Wossner and Schwedler (2014) found that treatment gains related to a more favourable
rating of prison climate. They found medium-sized prosocial changes to the dynamic risk
factors of pro-criminal attitudes and anxiety/neuroticism in all offenders, although antisocial
personality patterns only decreased among violent offenders. With the exception of
empathy, psychometric change correlated with ratings of prison climate, with prosocial
changes relating to more positive climate ratings.

Kubiak (2009) found the long-term outcome evaluation of the Residential Substance Abuse
Treatment (RSAT) programs studied have yielded findings that indicate less recidivism and
relapse than matched comparison groups but it is unclear whether this can be attributed to
the environment, programme or a combination of both components.

Discussion and Conclusion

This review has sought to identify the outcomes for residents and staff living and working in
forensic environments. A trio of themes illustrates some factors required for successful
environments, factors that can affect the success of these environments, and provisional
outcomes attributed to the environments.
The focus of developing environments that empower and heal those that reside within them is not new, and the application within custodial settings is no different, with therapeutic environments being created as early as 1942 at the Northfield secure Military Hospital in Birmingham (Bridger, 1990), and HMP Grendon in 1962. The more recent developments in awareness within HMPPS of the importance of therapeutic environments more widely within custodial settings, illustrate a shift in thinking; that therapeutic environments do not have to be isolated from the rest of the establishment or system. They can and should be integrated into establishment / system ethos, to the enhancement of desired outcomes e.g. reduced levels of violence and self-harm. This is evident within theme one, emphasising the importance of such environments not being isolated from the whole, that the culture of an establishment requires a shared identity and focus. Also emphasised within this theme is the importance of the staff interactions. This highlights an ongoing conflict in the perception of the role of the prison officer between more traditional perspectives of a security and punishment focus to a more rehabilitative, psychologically informed focus (Guthrie, Smillie, McKeown & Bainbridge, 2017), a similar process to that which is occurring within the system as a whole. This is supported by subtheme ‘staff roles’ within Theme 2. Therefore, the expectation that staff should work in this more rehabilitative style has to occur in conjunction with similar overall cultural shifts, in order that staff feel supported and confident to work in this way, to contribute to successful environments and subsequent outcomes.

Theme 2 also identifies other factors that may influence how successful environments will be, which may have relevance to those currently working within such environments. This theme is perhaps the least understood within the literature given the challenges associated with distinguishing what is underlying the factors identified. For example, Casey et al. (2016)
indicate that length of time within an environment is related to perceptions of that environment, but a number of factors might be effected by time; for example, perceptions of safety, depth of relating to others, confidence etc. An individual offender’s motivation is a factor that might influence the success of therapeutic environments, but can be an outcome of engagement in such environments (theme 3). Conceptually this is extremely challenging, as ultimately, incarcerated is not something that individuals are typically motivated to be. Conversely, they may be motivated to not be incarcerated, and view engagement in these environments as a means to achieve this goal. Therefore, considering motivation more generally and how to promote this in a population that is perhaps less inclined is an ongoing area for research.

Less research has focussed on the possible outcomes of environmental interventions, due partly to the difficulty in attributing change to environmental conditions or other interventions offered. This review has highlighted some provisional findings that could directly relate to the environment, which investigation through further research could develop. One such area might be in the area of insight. Within the majority of the subthemes identified, there is an element of personal insight noted, including 1) individual identification of need to focus on a particular area (Bennett, 2014; Preston, 2015), 2) recognition of personal identity (Blagden et al 2016) and 3) staff development and growth (Bond and Gemmell, 2014).

**Strengths and Limitations of the Current Review**

The use of the systematic review method is a more robust way to review the specific question outlined, and the use of appraisal methods through classifying the quality and characteristics of studies against standardised criteria allows a more critical review of the
studies and therefore prioritises empirical evidence over preconceived knowledge.

However, the evaluation of qualitative studies is also more open to interpretation than quantitative studies. Within this review utilised the method developed by Spencer et al (2008). After assessing the presence of key indicators, the method does not provide an overall categorical way of deciding how methodologically robust a study is. I opted therefore to consider the higher number of present indicators being indicative of a higher level of methodological quality for the purposes of categorising the studies within this review. Other methods could be consider the indicators with a higher degree of priority (rather than just numbers) in relation to the research question, in order to assess the methodological strengths and weaknesses of the qualitative studies within this review. This may have influenced the outcome of the review in the inclusion / exclusion of studies that may or may not have had utility in answering the research question.

The inclusion and exclusion criteria may also influence the quality of this review. Restricting articles for inclusion to those written in English is a limitation because of potentially missing additional studies. There is some lack of generalisability of the review to female and young people (although some of the underlying principles may apply); and this is an area for further exploration. The year of publication also may have resulted in the exclusion of relevant studies; however, the importance of having up-to-date knowledge and evidence negates this somewhat.

**Strengths and Weaknesses of the Studies**

The challenge of comparing studies within this review is the lack of consistent method to assess the presence or absence of key environmental factors. One area where comparisons
are robust is through the application of a consistent set of standards, such as those described within the Enabling Environment framework, present within some studies in this review (Bennett, 2014; Bond & Gemmell, 2014; Preston, 2015). This adds a degree of consistency to comparisons between these studies, but not to international studies included in the review. Comparisons between therapeutic environments with different quality standards may therefore influence the outcomes of this review in emphasising the importance of some factors or not noticing factors that may be important. Completing distinct reviews wherein a criterion regarding the application of the accredited Enabling Environment’s award or other standard measure of environments (e.g. Community of Communities) may yield relevant findings to further understanding of the factors associated with environments in forensic settings.

The way in which social climates are assessed within the studies in this review presents some points for discussion. Of the quantitative studies, three (Day et al, 2012; Blagden et al, 2016; Day et al, 2016) utilised the EssenCES, with one study (Kubiak, 2009) using the Correctional Institution Environment Scale (CIES, Moos, 1987) and one utilising an adapted measure (Woessner, & Schwedler, 2014) from the work of Ortmann (1987). The concepts assessed by these measures are similar but differ in some areas, and this can make meaningful comparisons of outcomes in a review of this nature challenging.

Implications for Practice and Future Research

Understanding what might be an optimal length of time for individuals within supportive forensic environments is challenging and, at present, services do have minimum and maximum time limits, although how much this relates to outcomes as opposed to service
requirements for spaces is unclear. The findings from this review suggest that a longer period may be beneficial, and further investigation into this issue might be of use.

The nature and type of motivation individuals have for engaging within supportive forensic environments is an area for further exploration. For current services, a more structured assessment of motivation might be a useful addition to assessment procedures, in order to understand and address individual’s needs. Motivation was a factor thought to influence successful environments, but also as an outcome of successful environments. It may be useful therefore for further research to explore types of motivation and the impact on successful environments, and subsequent outcomes for individuals.

In conclusion, this review has sought to explore forensic environments, with focus on the outcomes attributable to the environment. This has been achieved, with additional findings supporting the requirements for successful environments and areas that may influence environments. Going forward, it is anticipated that supportive forensic environments is an area that will continue to expand and result in further research to continue to make improvements to environments and those within them.
References


http://www.rcpsych.ac.uk/pdf/Service%20Standards%20for%20Therapeutic%20Communities%209th%20Ed%20FINAL%20-%20For%20%20Website%20-%20Copy.pdf


<table>
<thead>
<tr>
<th><strong>Attachment</strong></th>
<th>The first priority is attachment and this needs to happen in a culture where people feel like they belong. Attention should be paid to the process by which individuals join and leave.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Containment</strong></td>
<td>This is the safety of knowing what is and is not possible and permitted achieved through the task of enforcing boundaries. Support systems are important in providing a way in which disturbance is tolerated and distress is held.</td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td>In order for communication to be successful, then attachment and containment need to be in place securely, and then the intangible quality of safety needs to be present in the atmosphere so that people experience some certainty that the community will accept and digest what they have to say. The defining characteristic is the expectation and demand that communication is more open, more profound and more honest than happens in everyday situations.</td>
</tr>
<tr>
<td><strong>Inclusion</strong></td>
<td>Everything that happens in the community can be used to therapeutic effect. This goes beyond openness, in that it requires the sum of the experience of all the members all the time to bear in understanding ourselves in relation to the human environment.</td>
</tr>
<tr>
<td><strong>Agency</strong></td>
<td>Authority is fluid and questionable, not fixed but negotiated. The culture is one in which responsibility for all that happens within specific limits is shared; members are empowered to take whatever action is decided.</td>
</tr>
<tr>
<td>Standard</td>
<td>Description</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Belonging</td>
<td>The nature and quality of relationships are of primary importance</td>
</tr>
<tr>
<td>Boundaries</td>
<td>There are expectations of behaviour and processes to maintain and review them</td>
</tr>
<tr>
<td>Communication</td>
<td>It is recognised that people communicate in different ways</td>
</tr>
<tr>
<td>Development</td>
<td>There are opportunities to be spontaneous and try new things</td>
</tr>
<tr>
<td>Involvement</td>
<td>Everyone shares responsibility for the environment</td>
</tr>
<tr>
<td>Safety</td>
<td>Support is available for everyone</td>
</tr>
<tr>
<td>Structure</td>
<td>Engagement and purposeful activity is actively encouraged</td>
</tr>
<tr>
<td>Empowerment</td>
<td>Power and authority are open to discussion</td>
</tr>
<tr>
<td>Leadership</td>
<td>Leadership takes responsibility for the environment being enabling</td>
</tr>
<tr>
<td>Openness</td>
<td>External relationships are sought and valued</td>
</tr>
<tr>
<td>ENABLING</td>
<td>OR</td>
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<tr>
<td>AND</td>
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<tr>
<td>ENVIRONMENT</td>
<td>OR</td>
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<td>AND</td>
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<tr>
<td>FORENSIC</td>
<td>OR</td>
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<td>[CORRECTIONS / CORRECTIONAL]</td>
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<tr>
<td>AND</td>
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<tr>
<td>OFFENDER</td>
<td>OR</td>
</tr>
<tr>
<td>[PRISONS / PRISONERS]</td>
<td></td>
</tr>
</tbody>
</table>
573 identified from search
138 studies excluded - duplicates
435 remain
228 studies excluded - before 2008
207 remain
50 studies excluded - books or book chapters
157 remain
28 studies excluded - focus on Therapeutic Communities
129 remain
5 studies excluded - not focussed on forensic settings
124 remain
2 studies excluded - not English Language
122 remain
15 studies excluded - focus on females
107 remain
12 studies excluded - focus on juveniles
95 remain
26 studies excluded - title does not contain environmental focus
69 remain
37 studies excluded - abstract does not contain environmental focus
32 remain
32 studies reviewed. 17 studies excluded a) focus on TC's (n=5) b) insufficient environmental focus (n= 4) c) text unavailable (n=1) treatment focus (n=4) e) lack of outcomes (n=3)
15 remain
15 studies progressed to the next stage [appraisal] of the systematic review.
<table>
<thead>
<tr>
<th>Factors required for successful environments</th>
<th>Factors that impact successful environments</th>
<th>Factors affected by successful environments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purpose and shared identity (Blagden et al, 2016).</td>
<td>Intrinsic or extrinsic motivation (Bennett, 2014)</td>
<td>Skills consolidation (Preston 2015; Bennett, 2014)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Change and growth (Collins &amp; Nee, 2010; Blagden et al, 2016; Bond &amp; Gemmell, 2014; Wossner &amp; Schwedler, 2014; Kubiak, 2009).</td>
</tr>
</tbody>
</table>
Appendix A: Enabling Environment Standards

Standard 1: Belonging

The nature and quality of relationships are of primary importance

1.1 Rs and Ps support newcomers to get involved with others

1.2 There are opportunities for Rs and Ps to get to know each other

1.3 There are ways to mark people leaving

1.4 Rs and Ps are learning about building relationships

Standard 2: Boundaries

There are expectations of behaviour and processes to maintain and review them

2.1 Rs and Ps can describe the expectations and how they are maintained

2.2 There is a consistent approach to implementing these expectations

2.3 There is an open process to review expectations which includes Rs and Ps

Standard 3: Communication

It is recognised that people communicate in different ways

3.1 Rs and Ps are supported to communicate effectively

3.2 There are opportunities for Rs and Ps to discuss the feelings behind the way people act

3.3 Rs and Ps are encouraged to use a variety of ways to communicate

3.4 Ps recognise how the way people act is a form of communication

Standard 4: Development

There are opportunities to be spontaneous and try new things

4.1 There is management support for spontaneity

4.2 Rs and Ps are able to try new things

4.3 Rs and Ps are supported to understand risk and risky behaviour

Standard 5: Involvement

Everyone shares responsibility for the environment

5.1 Rs and Ps take a variety of roles and responsibilities within the environment
5.2 Rs and Ps are involved in planning their own development
5.3 Rs and Ps are involved in contributing to the development of others
5.4 Rs and Ps are involved in making decisions about the environment

Standard 6: Safety

Support is available for everyone
6.1 It is acceptable for anyone to feel vulnerable and receive the emotional support they need
6.2 Rs and Ps feel listened to and understood by others around them
6.3 Ps have regular reflective supervision with a consistent supervisor
6.4 Peer support is recognised valued and encouraged

Standard 7: Structure

Engagement and purposeful activity is actively encouraged
7.1 There is a consistent structure or daily routine
7.2 There are regular meetings or groups that include significant numbers of both Rs and Ps
7.3 There are spontaneous activities that involve R and Ps

Standard 8: Empowerment

Power and authority are open to discussion
8.1 Rs and Ps are able to challenge decisions and ask questions
8.2 Rs and Ps feel supported by those in authority
8.3 Rs and Ps are able to have their ideas implemented

Standard 9: Leadership

Leadership takes responsibility for the environment being enabling
9.1 There are clear management structures which include opportunities for involvement from Rs and Ps
9.2 The leadership ensures that the environment is the right place for the people within it
9.3 People with a leadership role are active participants in the life of the community
9.4 There is continuity of staff
Standard 10: Openness

*External relationships are sought and valued*

10.1 The environment is welcoming to visitors

10.2 Everyone is supported to participate in activities outside the environment

10.3 Everyone is open and responsive to evaluation and learning
INSERT APPENDIX B
Appendix C: Quality Assessment Tool for Quantitative Studies

COMPONENT RATINGS

A) SELECTION BIAS

(Q1) Are the individuals selected to participate in the study likely to be representative of the target population?
- Very likely
- Somewhat likely
- Not likely
- Can’t tell

(Q2) What percentage of selected individuals agreed to participate?
- 80 - 100% agreement
- 60 – 79% agreement
- less than 60% agreement
- Not applicable
- Can’t tell

RATE THIS SECTION

<table>
<thead>
<tr>
<th>STRONG</th>
<th>MODERATE</th>
<th>WEAK</th>
</tr>
</thead>
<tbody>
<tr>
<td>See dictionary</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

B) STUDY DESIGN

Indicate the study design
- Randomized controlled trial
- Controlled clinical trial
- Cohort analytic (two group pre + post)
- Case-control
- Cohort (one group pre + post (before and after))
- Interrupted time series
- Other specify ____________________________
- Can’t tell

Was the study described as randomized? If NO, go to Component C.
- No  Yes

If Yes, was the method of randomization described? (See dictionary)
- No  Yes

If Yes, was the method appropriate? (See dictionary)

RATE THIS SECTION

<table>
<thead>
<tr>
<th>STRONG</th>
<th>MODERATE</th>
<th>WEAK</th>
</tr>
</thead>
<tbody>
<tr>
<td>See dictionary</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

C) CONFOUNDERS

(Q1) Were there important differences between groups prior to the intervention?
- Yes
- No
The following are examples of confounders:
- Race
- Sex
- Marital status/family
- Age
- SES (income or class)
- Education
- Health status
- Pre-intervention score on outcome measure

(Q2) If yes, indicate the percentage of relevant confounders that were controlled (either in the design (e.g. stratification, matching) or analysis)?
- 80 – 100% (most)
- 60 – 79% (some)
- Less than 60% (few or none)
- Can’t Tell

D) BLINDING

(Q1) Was (were) the outcome assessor(s) aware of the intervention or exposure status of participants?
- Yes
- No
- Can’t tell

(Q2) Were the study participants aware of the research question?
- Yes
- No
- Can’t tell

E) DATA COLLECTION METHODS

(Q1) Were data collection tools shown to be valid?
- Yes
- No
- Can’t tell

(Q2) Were data collection tools shown to be reliable?
- Yes
F) WITHDRAWALS AND DROP-OUTS

(Q1) Were withdrawals and drop-outs reported in terms of numbers and/or reasons per group?
   Yes
   No
   Can’t tell
   Not Applicable (i.e. one time surveys or interviews)

(Q2) Indicate the percentage of participants completing the study. (If the percentage differs by
   groups, record the lowest).
   80 -100%
   60 - 79%
   less than 60%
   Can’t tell
   Not Applicable (i.e. Retrospective case-control)

G) INTERVENTION INTEGRITY

(Q1) What percentage of participants received the allocated intervention or exposure of interest?
   80 -100%
   60 - 79%
   less than 60%
   Can’t tell

(Q2) Was the consistency of the intervention measured?
   Yes
   No
   Can’t tell

(Q3) Is it likely that subjects received an unintended intervention (contamination or co-
   intervention) that may influence the results?
   Yes
   No
   Can’t tell

H) ANALYSES

(Q1) Indicate the unit of allocation (circle one)
Community organization/institution practice/office individual

(Q2) Indicate the unit of analysis (circle one)
Community organization/institution practice/office individual

(Q3) Are the statistical methods appropriate for the study design?
Yes
No
Can’t tell

(Q4) Is the analysis performed by intervention allocation status (i.e. intention to treat) rather than the actual intervention received?
Yes
No
Can’t tell

GLOBAL RATING

COMPONENT RATINGS Please transcribe the information from the grey boxes on pages 1-4 onto this page. See dictionary on how to rate this section.

A SELECTION BIAS STRONG MODERATE WEAK
1 2 3

B STUDY DESIGN STRONG MODERATE WEAK
1 2 3

C CONFOUNDERS STRONG MODERATE WEAK
1 2 3

D BLINDING STRONG MODERATE WEAK
1 2 3

E DATA COLLECTION STRONG MODERATE WEAK
1 2 3

F WITHDRAWALS STRONG MODERATE WEAK
1 2 3 Not Applicable

GLOBAL RATING FOR THIS PAPER (circle one):
1 STRONG (no WEAK ratings)
2 MODERATE (one WEAK rating)
3 WEAK (two or more WEAK ratings)

With both reviewers discussing the ratings:
Is there a discrepancy between the two reviewers with respect to the component (A-F) ratings?

No  Yes

If yes, indicate the reason for the discrepancy

1 Oversight
2 Differences in interpretation of criteria
3 Differences in interpretation of study

Final decision of both reviewers (circle one):
1 STRONG
2 MODERATE
3 WEAK
INSERT APPENDIX D
INSERT APPENDIX E
## Appendix B: Quality in qualitative evaluation framework

<table>
<thead>
<tr>
<th>a) Appraisal questions</th>
<th>b) Quality indicators (possible features for consideration)</th>
<th>c) Notes on study being appraised</th>
</tr>
</thead>
<tbody>
<tr>
<td>How credible are the findings?</td>
<td>Findings/conclusions are supported by data/study evidence (<em>i.e. the reader can see how the researcher arrived at his/her conclusions; the 'building blocks' of analysis and interpretation are evident</em>)</td>
<td></td>
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<tr>
<td></td>
<td>Findings/conclusions ‘make sense’/have a coherent logic</td>
<td></td>
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<tr>
<td></td>
<td>Findings/conclusions are resonant with other knowledge and experience (<em>this might include peer or member review</em>)</td>
<td></td>
</tr>
<tr>
<td>Findings</td>
<td>Use of corroborating evidence to support or refine findings (i.e. other data sources have been used to examine phenomena; other research evidence has been evaluated: see also Q14)</td>
<td></td>
</tr>
<tr>
<td>How has knowledge/understanding been extended by the research?</td>
<td>Literature review (where appropriate) summarising knowledge to date/key issues raised by previous research</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Aims and design of study set in the context of existing knowledge/understanding; identifies new areas for investigation (<em>for example, in relation to policy/practice/substantive theory</em>)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Credible/clear discussion of how findings have contributed to knowledge and understanding (<em>e.g. of the policy, programme or theory being reviewed</em>); might be applied to new policy developments, practice or theory</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Findings presented or conceptualised in a way that offers new insights/alternative ways of thinking</td>
<td></td>
</tr>
<tr>
<td>Findings</td>
<td>Discussion of limitations of evidence and what remains unknown/unclear or what further information/research is needed</td>
<td></td>
</tr>
</tbody>
</table>
### Findings

<table>
<thead>
<tr>
<th>a) Appraisal questions</th>
<th>b) Quality indicators (possible features for consideration)</th>
<th>c) Notes on study being appraised</th>
</tr>
</thead>
<tbody>
<tr>
<td>How well does the evaluation address its original aims and purpose?</td>
<td>Clear statement of study aims and objectives; reasons for any changes in objectives</td>
<td></td>
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<tr>
<td></td>
<td>Findings clearly linked to the purposes of the study—and to the initiative or policy being studied</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Summary or conclusions directed towards aims of study</td>
<td></td>
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<tr>
<td></td>
<td>Discussion of limitations of study in meeting aims (<em>e.g.</em> are there limitations because of restricted access to study settings or participants, gaps in the sample coverage, missed or unresolved areas of questioning; incomplete analysis; time constraints?)</td>
<td></td>
</tr>
<tr>
<td>Findings</td>
<td>Scope for drawing wider inference—how well is this explained?</td>
<td>Discussion of what can be generalised to wider population from which sample is drawn/case selection has been made</td>
</tr>
<tr>
<td></td>
<td>Detailed description of the contexts in which the study was conducted to allow applicability to other settings/contextual generalities to be assessed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussion of how hypotheses/propositions/findings may relate to wider theory; consideration of rival explanations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence supplied to support claims for wider inference (<em>either from study or from corroborating sources</em>)</td>
<td></td>
</tr>
<tr>
<td>Findings</td>
<td>How clear is the basis of evaluative appraisal?</td>
<td>Discussion of how assessments of effectiveness/evaluative judgements have been reached (<em>i.e.</em> whose judgements are they and on what basis have they been reached?)</td>
</tr>
<tr>
<td></td>
<td>Description of any formalised appraisal criteria used, when generated and how and by whom they have been applied</td>
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<tr>
<td></td>
<td>Discussion of the nature and source of any divergence in evaluative appraisals</td>
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<tr>
<td></td>
<td>Discussion of any unintended consequences of intervention, their impact and why they arose</td>
<td></td>
</tr>
<tr>
<td>a) Appraisal questions</td>
<td>b) Quality indicators (possible features for consideration)</td>
<td>c) Notes on study being appraised</td>
</tr>
<tr>
<td>------------------------</td>
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</tr>
<tr>
<td>How defensible is the research design?</td>
<td>Discussion of how overall research strategy was designed to meet aims of study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussion of rationale for study design</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Convincing argument for different features of research design (e.g. reasons given for different components or stages of research; purpose of particular methods or data sources, multiple methods, time frames etc.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Use of different features of design/data sources evident in findings presented</td>
<td></td>
</tr>
<tr>
<td>Design</td>
<td>Discussion of limitations of research design and their implications for the study evidence</td>
<td></td>
</tr>
<tr>
<td>How well defended is the sample design/target selection of cases/documents?</td>
<td>Description of study locations/areas and how and why chosen</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description of population of interest and how sample selection relates to it (e.g. typical, extreme case, diverse constituencies etc.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rationale for basis of selection of target sample/settings/documents (e.g. characteristics/features of target sample/settings/documents, basis for inclusions and exclusions, discussion of sample size/number of cases/settings selected etc.)</td>
<td></td>
</tr>
<tr>
<td>Sample</td>
<td>Discussion of how sample/selections allowed required comparisons to be made</td>
<td></td>
</tr>
<tr>
<td>a) Appraisal questions</td>
<td>b) Quality indicators (possible features for consideration)</td>
<td>c) Notes on study being appraised</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>Sample composition/case inclusion – how well is the eventual coverage described?</td>
<td>Detailed profile of achieved sample/case coverage</td>
<td>Maximising inclusion (e.g. language matching or translation; specialised recruitment; organised transport for group attendance)</td>
</tr>
<tr>
<td>How well was the data collection carried out?</td>
<td>Discussion of: who conducted data collection, procedures/documents used for collection/recording, checks on origin/status/authorship of documents</td>
<td>Discussion of any missing coverage in achieved samples/cases and implications for study evidence (e.g. through comparison of target and achieved samples, comparison with population etc.)</td>
</tr>
<tr>
<td>Data Collection</td>
<td></td>
<td>Discussion of access and methods of approach and how these might have affected participation/coverage</td>
</tr>
<tr>
<td></td>
<td>Audio or video recording of interviews/discussions/conversations (if not recorded, were justifiable reasons given?)</td>
<td>Discussion of access and methods of approach and how these might have affected participation/coverage</td>
</tr>
<tr>
<td></td>
<td>Description of conventions for taking Field notes (e.g. to identify what form of observations were required/to distinguish description from researcher commentary/analysis)</td>
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</tr>
<tr>
<td></td>
<td>Discussion of how fieldwork methods or settings may have influenced data collected</td>
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<tr>
<td></td>
<td>Demonstration, through portrayal and use of data, that depth, detail and richness were achieved in collection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a) Appraisal questions</td>
<td>b) Quality indicators (possible features for consideration)</td>
</tr>
<tr>
<td>---</td>
<td>------------------------</td>
<td>-----------------------------------------------------------</td>
</tr>
<tr>
<td>10</td>
<td>How well has the approach to, and formulation of, the analysis been conveyed?</td>
<td>Description of form of original data (e.g. use of verbatim transcripts, observation or interview notes, documents, etc.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clear rationale for choice of data management method/tool/package</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Evidence of how descriptive analytic categories, classes, labels etc. have been generated and used (i.e. either through explicit discussion or portrayal in the commentary)</td>
</tr>
<tr>
<td>Analysis</td>
<td></td>
<td>Discussion, with examples, of how any constructed analytic concepts/typologies etc. have been devised and applied</td>
</tr>
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<td>11</td>
<td>Contexts of data sources – how well are they retained and portrayed?</td>
<td>Description of background or historical developments and social/organisational characteristics of study sites or settings</td>
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<td></td>
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<td>Participants’ perspectives/observations placed in personal context (e.g. use of case studies/vignettes/individual profiles, textual extracts annotated with details of contributors)</td>
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<td></td>
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<td>Explanation of origins/history of written documents</td>
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<tr>
<td>Analysis</td>
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<td>Use of data management methods that preserve context (i.e. facilitate within case description and analysis)</td>
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<td>12</td>
<td>How well has diversity of perspective and content been explored?</td>
<td>Discussion of contribution of sample design/case selection in generating diversity</td>
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<td>Description and illumination of diversity/multiple perspectives/alternative positions in the evidence displayed</td>
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<td>Evidence of attention to negative cases, outliers or exceptions</td>
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<td>Typologies/models of variation derived and discussed</td>
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<td>Examination of origins/influences on opposing or differing positions</td>
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<td>Analysis</td>
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<td>Identification of patterns of association/linkages with divergent positions/groups</td>
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<td>a) Appraisal questions</td>
<td>b) Quality indicators (possible features for consideration)</td>
<td>c) Notes on study being appraised</td>
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<tr>
<td>How well has detail, depth and complexity (i.e. richness) of the data been conveyed?</td>
<td>Use and exploration of contributors’ terms, concepts and meanings</td>
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<td>Unpacking and portrayal of nuance/subtlety/intricacy within data</td>
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<td>Discussion of explicit and implicit explanations</td>
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<td>Detection of underlying factors/influences</td>
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<td>Identification and discussion of patterns of association/conceptual linkages within data</td>
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<td>Presentation of illuminating textual extracts/observations</td>
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<tr>
<td>Analysis</td>
<td>Clear conceptual links between analytic commentary and presentations of original data <em>(i.e. commentary and cited data relate; there is an analytic context to cited data, not simply repeated description)</em></td>
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<tr>
<td>How clear are the links between data, interpretation and conclusions – i.e. how well can the route to any conclusions be seen?</td>
<td>Discussion of how/why particular interpretation/significance is assigned to specific aspects of data – with illustrative extracts of original data</td>
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<td>Discussion of how explanations/theories/conclusions were derived – and how they relate to interpretations and content of original data <em>(i.e. how warranted)</em>; whether alternative explanations explored</td>
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<td>Display of negative cases and how they lie outside main proposition/theory/hypothesis etc.; or how proposition etc. revised to include them</td>
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<td>Reporting</td>
<td>Demonstrates link to aims of study/research questions</td>
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<td>How clear and coherent is the reporting?</td>
<td>Provides a narrative/story or clearly constructed thematic account</td>
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<td>Has structure and signposting that usefully guide reader through the commentary</td>
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<td>Key messages highlighted or summarised</td>
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<td>a) Appraisal questions</td>
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<td>How clear are the assumptions/theoretical perspectives/values that have shaped the form and output of the evaluation?</td>
<td>Discussion/evidence of the main assumptions/hypotheses/theoretical ideas on which the evaluation was based and how these affected the form, coverage or output of the evaluation (<em>the assumption here is that no research is undertaken without some underlying assumptions or theoretical ideas</em>).</td>
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<td>Discussion/evidence of the ideological perspectives/values/philosophies of research team and their impact on the methodological or substantive content of the evaluation (<em>again, may not be explicitly stated</em>).</td>
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<td>Evidence of openness to new/alternative ways of viewing subject/theories/assumptions (<em>e.g. discussion of learning/concepts/constructions that have emerged from the data; refinement restatement of hypotheses/theories in light of emergent findings; evidence that alternative claims have been examined</em>).</td>
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<td>Discussion of how error or bias may have arisen in design/data collection/analysis and how addressed, if at all.</td>
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<td>Reflections on the impact of the researcher on the research process.</td>
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<td>a) Appraisal questions</td>
<td>b) Quality indicators (possible features for consideration)</td>
<td>c) Notes on study being appraised</td>
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<td>What evidence is there of attention to ethical issues?</td>
<td>Evidence of thoughtfulness/sensitivity about research contexts and participants</td>
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<td>Documentation of how research was presented in study settings/to participants <em>(including, where relevant, any possible consequences of taking part)</em></td>
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<td>Documentation of consent procedures and information provided to participants</td>
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<td>Discussion of confidentiality of data and procedures for protecting</td>
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<td>Discussion of how anonymity of participants/sources was protected</td>
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<td>Discussion of any measures to offer information/advice/services etc. at end of study <em>(i.e. where participation exposed the need for these)</em></td>
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<td>Ethics</td>
<td>Discussion of potential harm or difficulty through participation, and how avoided</td>
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<td>How adequately has the research process been documented?</td>
<td>Discussion of strengths and weaknesses of data sources and methods</td>
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<td>Documentation of changes made to design and reasons; implications for study coverage</td>
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<td>Documentation and reasons for changes in sample coverage/data collection/analytic approach; implications</td>
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<tr>
<td>AUDITABILITY</td>
<td>Reproduction of main study documents <em>(e.g. letters of approach, topic guides, observation templates, data management frameworks etc.)</em></td>
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## Appendix D: Data Extraction Tool (Jones, 2007)

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### Appendix E Table 1: Qualitative studies

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<th>Number</th>
<th>Reference</th>
<th>Study design, study method and tools utilised</th>
<th>Participant / context information</th>
<th>Outcomes / key findings</th>
<th>Limitations</th>
<th>Appraisal rating</th>
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<tr>
<td>1</td>
<td>Bennett, A. L. (2014). Service users’ initial hopes, expectations and experiences of a high security psychologically informed planned environment (PIPE) Journal of Forensic Practice, 16(3), 216-227.</td>
<td>Qualitative: Semi Structured Interviews explored the hopes and expectations of participants. Transcripts were transcribed and Thematic Analysis was utilised.</td>
<td>Five male category A life sentence prisoners located on a High-secure PIPE unit. (aged between 29 and 63, mean 42.40 years). Four serving life sentences and one serving an Indeterminate Sentence for Public Protection. Tariff lengths between six and 17 years (m= 12.20 years). Index offences included both violent and sexual convictions. Treatment completed varied and included programmes targeting thinking skills, sexual offending, anger management and the DSPD programme. Opportunity sampling was used. Participants were selected on the basis that they had been located on the PIPE unit for less than four weeks.</td>
<td>Themes entitled ‘progression’ and ‘being part of a community’ were identified. <strong>Progression</strong> Describes the interpretation of a process for consolidation and generalisation that could be occurring within PIPEs. <strong>Being part of a community</strong> Devises a conceptual argument for the process that residents may go through to achieve “belonging”. It is hypothesised that residents need to focus on “intrapersonal self-development which would enable participants to pro-socially interact with others on the PIPE” thus contributing to a sense of belonging. <strong>Risk reduction</strong> The author links the data to the intended PIPE model outcomes and identifies an incongruent aim that residents have regarding the PIPEs’ ability to reduce risk. <strong>Motivation</strong> The author highlights the importance of considering motivation when reviewing referrals to the PIPE due to differences in motivation. For example, outcomes could be different for someone motivated intrinsically by the desire to generalise their skills and achieve pro-social goals, to an individual who is extrinsically motivated to reduce their risk.</td>
<td>The study is small (n=5) and is limited to high security. It is not clear from the data whether the process of consolidation and generalisation occurred with the residents sampled or if this were what they hoped/expected would occur. It is not clear from the analysis that the process to become part of a community reported occurs in the order described for the residents sampled. This is suggestive of a limitation to the model, if residents believe risk reduction to be a core feature of PIPEs. It is not possible to identify whether the participants within this study were intrinsically or extrinsically motivated and therefore whether there is an impact on the data.</td>
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<td>Number</td>
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<td>2</td>
<td>Blagden, N., Winder, B., &amp; Hames, C. (2016). <em>&quot;They treat us like human beings&quot; experiencing a therapeutic sex offender’s prison: Impact on prisoners and staff and implications for treatment.</em> International Journal of Offender Therapy and Comparative Criminology, 60(4), 371-396.</td>
<td>Mixed Method: Qualitative Semi-structured interviews were conducted focused on the following areas: •Purpose of the prison, experience of prison life, relationships in the prison, and the regime; •Rehabilitative ideals/orientation of the prison; and •Opportunities for personal development and access to constructive outlets for prisoners. Data were analysed using thematic analysis and second coded to add inter-rater reliability.</td>
<td>This study was conducted at one of Europe’s largest sex offender treatment prisons. The site was chosen for this research due to its focus on rehabilitative programmes, its specialisation in sex offender treatment, and because the prison only accommodates sexual offenders. 31 interviews including prisoner (n = 15 containing untreated n = 6 and treated n = 9 sex offenders) and staff (n = 16) interviews. The final staff sample included senior management (n = 3), psychologist (n = 3), prison officer (n = 5), group therapist/trainee psychologist (n = 4), and prison librarian (n = 1). Purposeful sampling was utilised for staff and snowball sampling for prisoners.</td>
<td>Reported themes Superordinate Purpose and purposefulness [rehabilitation/change] - Purpose and meaning in prison. - Facilitating change Reflecting the purpose and shared identity of the prison and prisoners located there, namely rehabilitation and shared direction towards desistance. Positive, constructive and safe environment - Friendly relaxed, relief - Headspace and ‘being’ - Experienced safety Reflecting the role the environment plays in the identity of those within it. I.e. that residents can be themselves rather than portray an identity that could help them to “survive”. This is reflected in the safety participants felt in their environment. Constructive and meaningful relationships - Supportive and constructive relationships - Honesty - Trusting and respectful relationships Reflecting the role that relationships play. The importance of staff being genuine in their interactions, and constructive. Research relating to the way that pro-social identity can be reflected from those the residents interact with and how this relates to desistance. Components felt to support change in offenders were:</td>
<td>There is no reference in the paper whether location at this establishment is mandated or voluntary and the possible effect this might have on the outcome or themes identified. The use of snowball sampling could be reflecting a more motivated and engaged population and neglecting others. Population is exclusively sexual offenders and the nature / dynamic of this population could be argued to be very different to other offence types e.g. perception of sexual offenders being more compliant, less hostile and hold less anti-authority attitudes, thus contributing to the environment and the relationships – ultimately lacks the generalisability to non-sexual offender populations. There is also a lack of control group to compare the experiences.</td>
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<td>Mixed Method: Quantitative</td>
<td>Total of 400 questionnaires were distributed to prisoners around the different wings of the prison and 112 were returned (28% response rate).</td>
<td>The qualitative analysis revealed positive prisoner views toward staff relationships, with most participants articulating that the prison and its staff had contributed to positive change in prisoners.</td>
<td>Lack of control group to compare the outcomes.</td>
<td>Moderate</td>
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<td>Measures including: *Essences</td>
<td>The final sample comprised prisoners (n = 112) and prison staff (n = 48).</td>
<td>Environment The environment was perceived as safe and allowed prisoners “headspace” to work through problems and contemplate change.</td>
<td>The age of offenders is in a specific range that limits generalisability to younger offenders.</td>
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<td>*Attitude Towards Sex offenders (ATS)</td>
<td>The final sample comprised prisoners (n = 112) and prison staff (n = 48).</td>
<td>Environment The climate was rated positively and, in particular, participants had very high ratings of “experienced safety”, which appeared important for allowing individuals the headspace to deal with their problems, engage in treatment programmes and also grow and develop in personally meaningful ways.</td>
<td>It is unclear whether staff were selected for this role within the establishment and whether they had any specific training or screening prior to working in this environment.</td>
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<td>*Individual Theories of Offending Behaviour (Self and Other)</td>
<td>The final sample comprised prisoners (n = 112) and prison staff (n = 48).</td>
<td>The results suggested that staff felt the environment was more positive than offenders (however both results were suggestive of positive views on this).</td>
<td>No method was given to ascertain the reliability of reporting. Staff reporting reliably that they hold a negative view towards sex offenders could have extreme consequences. Whilst anonymity was given, there may still be a socially desirable responding issue.</td>
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<td>*Corrections Victoria Treatment Readiness Scale (CVTRS)</td>
<td>The mean age for prisoners was 48.87 (SD = 14.15, range = 23-80) and the mean age for prison staff was 39.77 (SD = 12.02, range = 24-58).</td>
<td>The results found that prison climate predicted readiness for treatment and was correlated with beliefs that offenders can change. Prison climate helps to foster treatment readiness and readiness to change.</td>
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<td>All participants had to have been at the prison for more than 6 months; the range of years at the prison was 2 to 18 years.</td>
<td>Attitudes Staff had significantly less positive attitudes towards sex offenders than the offenders did, although the scores were still suggestive of mainly positive attitudes and high beliefs that offenders could change. Results suggesting a link between the attitude of staff and the experienced safety of the residents.</td>
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<td>3</td>
<td>Bond, N., &amp; Gemmell, L. (2014). Experiences of prison officers on a lifer psychologically informed planned environment. Therapeutic Communities, 35(3), 84-94.</td>
<td>Qualitative: Semi structured interviews were conducted and results analysed using Interpretative Phenomenological Analysis (IPA). The context is a 60 bed PIPE situated in a large Lifer prison with an operational capacity of 707. The PIPE had been open for two years at the time of the research. Residents are Life sentenced prisoners, the majority of which have been convicted of murder or violent offences. Residents have self-referred after completion of offending behaviour programmes aimed to reduce their risk of violent re-offending with a view to receive continued support and consolidate progress made. Five prison officers working on a PIPE in a Lifer prison were selected for participation in the research. All 12 PIPE officers were provided with a research</td>
<td>The themes identified were labelled: - ‘role conflict’ [staff characteristics] Reflecting what it means to be a prison officer and how this is affected by the type of work they are completing [rehabilitation vs. punishment] and thus developing a type of hybrid role working on a PIPE. - ‘growth’ [rehabilitation / change] Arguably similar to the experience that residents may go through; this theme reflects the personal journey that staff take as they become more psychologically aware about themselves and the residents they are working with. - ‘relationships’ and This theme is about the connection the officers achieve with PIPE residents and each other and the outcome of those connections. It includes the rewards that come from developing relationships and being able to help, dealing with the occasions where their help is not recognised, and being a secure base from which the residents can try their new skills, receive feedback and observe development of the resident’s strengths for the future.</td>
<td>Limitations include the small number of participants, limited focus of the researchers, both Forensic Psychologists, and the uniqueness of the context, a Lifer prison. No information is given as to the status of the PIPE at the time of the research in terms of environment, and whether the PIPE is awarded the EE status. More information about the background of the participants would have offered insight into their specific pathway to PIPE, training and experiences and thus offered some insight into their answers within context.</td>
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<td>Collins, S., &amp; Nee, C. (2010). Factors influencing the process of change in sex offender interventions: Therapists' experiences and perceptions. <em>Journal of Sexual Aggression</em>, 16(3), 311-331.</td>
<td>Qualitative: Semi Structured interviews were completed and analysed using Foucauldian Discourse Analysis (FDA)</td>
<td>Opportunity sample Two male and two female therapists who had had current experience in facilitating SOTPs within prison (an average of 5.75 years’ experience, range 4-7 years). Ages ranged from 25 to 44 years. Both the male participants were serving prison officers. The two female participants were prison-based forensic Psychologists in training.</td>
<td>The themes were:  - the sex offender identity;  Two themes arose under this category, which explored the heterogeneity of sexual offenders and the identity they present, both of which appeared to influence the change process within Treatment.  - Therapists role [staff characteristics]  This section explores the role of the therapist working as a facilitator of change; as a collaborator within a therapeutic group-work setting; and as a social controller.  - Situational moderators of change [environment]  Here the influence of situational variables as moderators of change is explored comprising operational conflict, conditional attendance of SOTP and that prison is a testing environment.</td>
<td>One participant reflects that the prison environment</td>
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<td>Study design, study method and tools utilised</td>
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<td>Preston, N. (2015). Psychologically informed planned environments (PIPEs): Empowering the institutionalised prisoner Forensic Update, 117, 8.</td>
<td>Qualitative: Observational / field notes recorded during weekly sessions. The comments are clustered within three themes, described by McAdams (personality traits, goals and strategies, and narrative identity).</td>
<td>The unit at HMP Frankland is specifically for Category A prisoners that have completed some form of intensive offence focused work and need to be supported through a period of consolidation to support and enhance treatment gains. 16 offenders participated in the research.</td>
<td>Rehabilitation: Focusing on the desistance of crime is helping to positively empower a historically institutionalised and disillusioned offender group. Concept that the “traits” of the participants remain the same, it is the targeting of “goals and strategies” and “self-narratives” that allows participants to stabilise residents to support them to move forward.  The institutional narrative appears to include negativity, pessimism, disillusionment and blaming themes. It is often focused on the past, with little hope for the future. It is also dominated by a preoccupation with a ‘system approach’; that the individual has no agency over their own decision making and that they exist as part of as system, rather than exist in their own right as an individual.</td>
<td>Limited attention is given to the method of analysing the data offered by the participants, or the manner in which it is recorded and subsequently analysed. It is not possible to discern what the participants initial narrative was and how or if this changed for them individually, rather the focus is on collective shifts.</td>
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generally is a safe place for them to practice their skills and rehearse new learned behaviours prior to release, but she does recognise this to be a false environment.

The influence of the prison environment was seen as constraining change; inevitably the external setting will become integrated into therapeutic milieu (Jones, 2007a).

- The process of change [rehabilitation] Considers the process of change and its impact on clients and the therapists themselves.

Whilst it seems that change is always likely to be significantly more effective and enduring if the situational and support factors are in place to support it further research is needed to define accurately the processes involved within change.

Limited attention is given to the method of analysing the data offered by the participants, or the manner in which it is recorded and subsequently analysed.
The empowered narrative includes positivity, hope, motivational statements, and personal goals. It is focused on an individualised approach with responsibility taking being a thread that runs throughout. The narrative includes recognition of choices and opportunities and is future focused.

Environment
One observation has been noted with the skills consolidation process; prisoners report that the unit is ‘safe’, and, therefore, ‘safe enough’ to try out new skills, and new ways of being.

Relationships
An additional observation relates to the development of strategies that are congruent with reattaching to a range of feelings, and expressing difficult or intense emotional experiences to others. Setting and achieving goals in understanding emotions, and developing personal strategies relating to expressing emotions with others, appears to be related to the relationship the prisoners have with staff on the unit and the supportive ‘coaching’ environment.

Table 2: Quantitative studies

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<td>6</td>
<td>Casey, S., Day, A., &amp; Reynolds, J. (2016). The</td>
<td>Quantitative: 2 (incarceration length) x 2 (custody)</td>
<td>Participants in the study were 76 male, volunteer, medium security prisoners of whom 49 were housed in non-protective</td>
<td>Environment The overall interaction shows that short-term protective custody prisoners perceive the social climate to be significantly poorer than all other</td>
<td>The stated philosophy of the establishment is to create an environment that is characterized by shared</td>
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<td><strong>influence of incarceration length and protection status on perceptions of prison social climate.</strong> Criminal Justice and Behavior, 43(2), 285-296.</td>
<td>type) between groups design. The first aim is to examine whether differences in perceived social climate exist between protective custody and non-protective custody prisoners. Second, whether incarceration length systematically influences perceptions of the social climate. Measures utilised: - EssenCES custody facilities and 27 housed in protective custody in a rehabilitation-focused treatment facility. The total sample ranged in age from 21 to 66 years ((M = 5.17; SD = 9.45)). Mean length of incarceration was 289.84 days ((SD = 276.62)) and ranged from 28 days to 1,680 days.</td>
<td>groups (protective custody long-term prisoners scored the social climate most positively). Incarceration length was found to be associated with higher ratings on the EssenCES measure, irrespective of security level. Regardless of where inmates were housed, these data suggest that those who have been imprisoned for a period longer than 6 months rate the overall social climate significantly more positively than those who have been imprisoned for a shorter period. <strong>Relationships</strong> Short-term protective custody prisoners reported lower levels of social cohesion between inmates (again, protective custody long-term prisoners rated this as particularly high). By contrast, those who had been in prison longer rated levels of therapeutic support as significantly higher than all other groups. Long-term inmates in protective custody report that staff display interest in and support for inmates (Hold and Support), and there is a level of support and caring between prisoners (Social Cohesion and Mutual Support). Irrespective of custody rating, participants serving more than 6 months reported experiencing a greater level of support and decision-making, the provision of clear boundaries, and a sense of belonging, and reflects the rights and responsibilities in the broader community as much as possible. Accordingly, all staff are expected to work toward creating an environment in which prisoners feel that there is concern for their welfare and dignity, and that personal issues are dealt with. Therefore, how surprising is it that the findings were congruent with this? While there were no direct benefits to those who participated, the opinions of those who responded to the survey may not represent all prisoners or, indeed, those housed in other prisons in other jurisdictions. Another limitation is the small sample size. In addition, the decision to compare groups with less than or more than 6 months</td>
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<td>Day, A., Casey, S., Vess, J., &amp; Huisy, G. (2012). <em>Assessing the therapeutic climate of prisons.</em> <em>Criminal Justice and Behavior, 39</em>(2), 156-168.</td>
<td>Quantitative: This study examined perceptions of the prison social climate in two Australian prisons from the perspective of both prison staff and prisoners. EssenCES was administered to all participants.</td>
<td>Ratings of social climate were compared between a specialist treatment prison that provides intensive rehabilitation programs to violent, sexual, and substance-using offenders and a mainstream prison that does not specialize in offender rehabilitation. Participants in the study were drawn from two correctional settings based in one Australian state. Participation was voluntary, and a total of 144 prisoners and 109 staff members from both prisons participated in the research. Both prisons house only male prisoners.</td>
<td>Environment When prisoner and prison staff views are considered together, the social climate of the therapeutic prison was not rated as safer, more supportive, or more therapeutic than that of the mainstream prison. The moderate effect size reported above does represent a trend for prisoners in the rehabilitation prison to report a more positive social climate than their mainstream counterparts. The therapeutic prison staff rated the overall prison social climate significantly more positively than their counterparts from the mainstream prison did. Relationships Significant between-group differences were observed on two of the three EssenCES subscales; staff at the therapeutic prison rated both the level of staff interest and support for inmates and level of support and caring between prisoners as significantly higher than did staff at the mainstream prison. These staff ratings suggest that the social climate of the prison was rated more positively by prison staff than by prisoners.</td>
<td>Incarceration was made on pragmatic grounds and is, therefore, somewhat arbitrary. This highlights a need to examine whether these findings also hold for those serving longer sentences. The self-selecting nature of the sample. It may be that those who volunteered to take part had different experiences or perceptions of the prison environment than those who did not. No attempt was made to control for socially desirable responding, and although there were no benefits to taking part in the research, some participants may have provided ratings that did not reflect their real views. Some variety between groups had to be controlled for during analysis. Offender participants from the mainstream prison had access to rehabilitative courses. The percentage of respondents involved with</td>
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### Participant / context information

Inmates in therapeutic units had significantly more positive perceptions of the environment, as well as both staff groups, than inmates within the same prison in non-therapeutic units. Results reveal that prisoners did perceive the treatment units, as well as corrections staff, significantly different from the non-treatment units across all three facilities. Across the three prisons, that residents living in RSAT units felt much more positive about their living environments than those in non-treatment units within the same prison did.

### Outcomes / key findings

Therapeutic prison was perceived as more conducive to rehabilitative needs than that of a mainstream prison.

### Limitations

These courses was not reported or controlled. The effect of their engagement in these courses is therefore not accounted for when assessing the environment, their experiences may be different to those in the mainstream who have not engaged in such rehabilitative work.

### Appraisal rating

Another limitation may be the instrument used to assess the therapeutic climate. Researchers have obtained differing number of factors when analysing the CIES and it has been criticized for its ability to measure environmental climate (Wright & Boudouris, 1982). While the creation of the continuous rating scale on the CIES items improved the variance within this sample,
To assess whether combining the two divergent staff groups within a prison setting created a therapeutic hybrid, the author assessed perceptions of the environment and staff, comparing treatment and non-treatment units, using a measure of environmental climate and an index of staff personality characteristic.

Measures used:
- Correctional Institution Environment Scale (CIES)
- Characteristic Checklist
- Descriptive statistics and independent samples t-tests

Three different prisons – two male (n=830) and one female (n=200).

Prisoners voluntarily engaged in the RSAT program (n=701) if they met eligibility criteria: minimum-security status, substance dependence (as demonstrated by the Substance Abuse Subtle Screening Inventory [Miller, 1997] and/or a clinical interview), and within 18 months of their earliest prison release date.

Non-RSAT participants (n=329) had access to other substance abuse treatment modalities within the prison (education and therapeutic or support groups).

Since all other features in the comparison units were constant (e.g., setting, architecture, budget, corrections policy and procedures, etc.), the catalyst for the dissimilarity in responses can be attributed to the influx of treatment staff and the therapeutic milieu.

**Staff characteristics**
Regression analyses suggest specific staff characteristics are associated with these positive feelings and are different for each staff group.

Prisoners perceived the treatment staff as significantly different from corrections staff on the treatment units, thereby differentiating staff roles while retaining a positive perception of the treatment environment.

However, there were specific characteristics of each staff group that were more predictive of these positive feelings about the treatment unit.

Corrections staff involvement with RSAT did not diminish their authoritative standing with prisoners. Ratings between treatment and non-treatment units did not differ on characteristics that suggest control (e.g., powerful). However, RSAT participants consistently rated corrections staff more positively than their counterparts in comparable units on characteristics associated with a therapeutic milieu (e.g., accepting,

- it precluded the authors from comparing the findings from the RSAT units with other published reports on the CIES. In other words, while treatment and non-treatment units significantly differed within this particular prison system, the modification precludes comparison to other studies of prison-based programs to further assess the therapeutic environment.

- Finally, variability across programs, facility and staff may have contributed to differences that were unable to test. For example, assessing staff educational levels, gender, time on the job, etc., may have made our comparisons more precise.
were used to analyse between group differences (RSAT vs. non-treatment units) within each institution, and to compare treatment and corrections staff within treatment units. Linear regression was used to examine how staff characteristics may contribute to environmental perceptions.

Treatment staff was rated higher than corrections staff – in all three programs – on characteristics associated with therapeutic interventions. The characteristics most predictive of how positive the participant feels about the unit may be a characteristic not often associated with the particular role of the staff group. For instance, while ‘kindness’ is usually not associated with corrections staff it was valued by treatment participants of both genders. Similarly, ‘hard’ may not frequently be associated with descriptors of treatment staff, but may reflect the prisoners desire for help, and as such, a desire not to be able to manipulate or ‘con’ treatment staff.

Rehabilitation
Although the anonymity of the survey limited the ability to test the relationship between individual change and environmental perceptions, the long-term outcome evaluation of these RSAT programs have yielded findings that indicate less recidivism and relapse than matched comparison groups (See Boyd et al., 2003).

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<td>Woessner, G., &amp; Schwedler, A. (2014).</td>
<td>Quantitative: The aim was to measure whether the environment created by the prison staff aligns with the participant's expectations of a therapeutic environment</td>
<td>In Germany, correctional treatment primarily takes place in social-therapeutic facilities.</td>
<td>Rehabilitation: Treatment gains were substantially related to a more favourable rating of prison climate. This finding supports the idea that the prison environment can be a significant factor in the success of rehabilitation programs.</td>
<td>Despite this accordance with other results, we should be cautious about generalising these findings.</td>
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<td>Correctional treatment of sexual and violent offenders: Therapeutic change, prison climate, and recidivism. <em>Criminal Justice and Behavior, 41</em>(7), 862-879.</td>
<td>examine the relationship between perceived prison climate and changes in psychometrically measured risk factors, as well as the relationship between those within-treatment changes and recidivism in a sample of treated violent and sexual offenders. Participants completed psychometric tests on dynamic risk factors (pro-criminal attitudes, antisocial personality patterns, empathy, anxiety/neuroticism) and perceived prison climate before and after correctional treatment (length: $M = 32$ months) in these are either structurally independent prison units or separate wards inside a mainstream prison.</td>
<td>Social-therapeutic treatment is an integrative treatment approach that encompasses vocational and educational training, as well as work opportunities inside prison, leisure therapy, psychotherapy, social work, and milieu therapy that is comparable with a therapeutic community. A crucial aspect of the treatment rationale is that the social-therapeutic facility is to ensure a supportive climate that encourages prosocial behaviour and the transfer of treatment gains to the day-to-day interpersonal relations in the social-therapeutic milieu.</td>
<td>supports the notion that effective treatment can only take place in a safe and supportive environment (Schalast et al., 2008; Tonkin et al., 2012).</td>
<td>interpreting this relationship causally in the way that a positive prison climate leads to more prosocial treatment gain. A general negative response bias might have affected both prison climate ratings and psychometric measures and thus could, at least partially, account for these associations. Query regarding the categorisation of offenders with concurrent convictions for violent and sexual offences as “sexual offenders” and the rationale for this. Differences in offence specific changes could be accounted for at least partly, by the voluntary placement of violent offenders and the mandatory placement of sexual offenders.</td>
<td>medium-sized prosocial changes to the dynamic risk factors of pro-criminal attitudes and anxiety/neuroticism in all offenders were found, while antisocial personality patterns only decreased among violent offenders. Positive ratings of different aspects of prison climate significantly correlated with prosocial changes in all dynamic risk factors except empathy. Environment In addition to the three scales (fear of inmates, hostile attitude against prison staff, and non-supportive prison climate) that are comparable with the prison climate dimensions defined by Schalast et al. (2008), the research also showed that perceived autonomy restrictions are of similar importance. Psychometric change was, again except for empathy, consistently correlated to ratings of prison climate, with prosocial changes relating to more positive climate ratings.</td>
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<td>a social-therapeutic facility. Recidivism data were available for 92 participants with a follow-up of $M = 4$ years.</td>
<td>offense (homicide, aggravated assault, bodily harm, robbery), 45 subjects (24%) were convicted of rape, and 79 subjects (43%) were convicted of sexual abuse of children.</td>
<td>Offenders with a concurrent conviction of a violent and a sexual offense were categorized as sexual offenders.</td>
<td>issues.</td>
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<td>Prison climate</td>
<td>The social-therapeutic treatment facility was assessed with four scales from an instrument developed by Ortmann (1987).</td>
<td>The scales to measure prison climate and pro-criminal attitudes have not been validated so far, although they have been used in different studies.</td>
<td>The dropout rate at the second time of data collection was quite high and data on recidivism were only available for a smaller subsample, thus restricting them from analysing different offender types separately.</td>
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