

# Pathways to Stability: Past and Present

## CARL Research Project

in collaboration with

## Churchfield Community Trust



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- provide their services on an affordable basis;
- promote and support public access to and influence on science and technology;
- create equitable and supportive partnerships with civil society organisations;
- enhance understanding among policymakers and education and research institutions of the research and education needs of civil society, and
- enhance the transferrable skills and knowledge of students, community representatives and researchers ([www.livingknowledge.org](http://www.livingknowledge.org)).

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# Abstract

The rise in prison committals is leading to an increased number of people with complex needs returning to their communities in need of reintegration support. There is much debate in Ireland today over the increasing problematic drug and alcohol use amongst our younger generations. The link between substance misuse and crime rates has been well documented. However, there is a void in the research on the use of community initiatives to support people in substance misuse recovery and desistance. There are a number of community-based initiatives funded by the Department of Justice and Equality that endeavour to support ex-prisoners to reintegrate into society successfully and reduce their risk of re-offending, one such initiative is Churchfield Community Trust (CCT). This study aims to contribute to the research available to learn from the founding members and past participants of CCT on what interventions and supports are beneficial to supporting people in their transitional journey. CCT hope to use these findings to determine how they could better support the reintegration process and the desistance from crime.

# Chapter One: Introduction and Background

## 1.1 Introduction

This group project endeavours to provide an insight into the experience of gaining stability of former users of Churchfield Community Trust while also exploring the thoughts and views of founding members of the organisation. It is a community-based research project undertaken in collaboration with CCT through the Community Academic Research Links initiative. This was a group project conducted by three Master of Social Work students, however, in line with UCC's examination policy; we were required to produce three separate dissertations. This report is an attempt to combine the work of all three students to present to Churchfield Community Trust and CARL. As a result, three different writing styles and views may be apparent throughout this paper.

This chapter aims to introduce the reader to the following project by providing a background to the research and the community organisation involved. It explores the student's rationale for choosing to undertake this study before presenting the eight research questions.

## 1.2 Research Title

Pathways to Stability: Past and Present

## 1.3 Background to Research

According to the Irish Prison Service's (2016) annual report, 2015 saw an overall increase in the number of adults that were committed to prison. The most recent national statistics on recidivism rates in Ireland was published by the Central Statistics Office (2016) and is based on the statistics of re-offending behaviour or 'recidivism' in 2010 in Ireland. For the purpose of this report recidivism was defined by the CSO (2015, p. 8) as "offenders with a recorded offence within three years from exiting prison". This definition will be used throughout this paper.

In addition to offending and recidivism, this paper also looks at substance and alcohol misuse in Ireland, specifically amongst the offender population. A relevant study undertaken by the Irish Probation Service in 2012 examined the drug trends within their adult services. This study consisted of a sample population of 2,963 adult offenders, men and women under probation supervision. The results showed that 89% of offenders had experience of misusing alcohol and/or drugs, either currently or in the past. Substance misuse is also a longstanding issue of Irish prisons. In 2008, Longe undertook a study on substance availability in prisons nationwide. The results provided evidence, through a urine sample, that illicit and prescription drugs were heavily available in prisons in Ireland. Recent statistics reveal the number of prisoners held in Irish prisons with a history of substance misuse issues greatly outnumber those without (Drummond *et al.*, 2014).

This growing trend in alcohol and drug consumption among the offender population is having a negative impact on Ireland's criminal justice system and becoming a major cause for concern. Meanwhile, prison committals are on the increase leading to overcrowding and a dramatic rise in the use of temporary release (The Irish Prison Service, 2016). As a result, more people with complex needs are returning to their communities in need of reintegration support. There are a number of community-based re-integration initiatives funded by the Irish Probation Service that are aimed towards reducing an individual's risk of re-offending through social and educational development. They work on the premise of prevention by addressing an individual's criminogenic needs.

## 1.4 Agency Profile

### 1.4.1 The History of CCT

Churchfield Community Trust (CCT) is a community-based organisation funded predominantly by the Irish Probation Service. It was originally established in 1994 by members of three local religious congregations; The Presentation Brothers, The Presentation Sisters and The Christian Brothers. While it was the first ever collaboration of these three congregations, they all shared the same aim of wanting to provide a safe and supportive environment for young people at risk in their area. They endeavoured to implement the ethos of their orders' founding spirits, Nano Nagle and Edmond Rice and began the project in the north side of Cork City. The young people they supported were predominantly early school leavers who were identified as being at risk of becoming involved in criminality. Through

applying the SERVOL model as a framework they aspired to help these young individuals desist from crime. The SERVOL mission statement is summarised as;

“An organisation of weak, frail, ordinary, imperfect yet hope filled and committed people, seeking to help weak, frail, ordinary, imperfect, hope drained people become agents of attitudinal and social change in a journey which leads to total human development” (Pantin, 1992, cited in Lavia *et al.*, 2010, p. 38).

While the organisations underlying caring philosophy remains the same, over the last twenty years the service it provides has changed and grown considerably (O’Brien, 2015). Today, the organisation provides support to men over the age of eighteen who have a history of engaging in offending behaviour and substance misuse issues. CCT strives to help these men desist from crime and change unhelpful beliefs and behaviours by offering training and education opportunities and other forms of therapy and intervention (Churchfield Community Trust, 2009).

Since 1994, there have been significant developments in CCT, including the purchasing of their main building, a change in project workers and extensive expansion in relation to the facilities and supports provided. However, the most substantial difference is the change clientele. This variation was organic and consistent with their orders’ ethos of supporting people who were the most vulnerable within the area. In 1994, there were a total of eight young people engaged in the service. In 2014, the project supported a total of sixty-four local men (O’Keeffe, 2015).

#### *1.4.2 What Does CCT Look Like Now?*

CCT continues to base its ethos on the SERVOL model involving intervention through a process of empowerment and development, with a clear emphasis on trust and active listening (Morley, 2003). CCT places a strong emphasis on adult reintegration through ‘training and experiential learning’ (O’Donnell, 2015, p. 3). CCT provide service users with opportunities to complete FETAC (Further Education and Training Awards Council) modules in areas such as woodwork, art, horticulture, computers and personal development (O’Donnell, 2015).

CCT has developed significantly in recent years, through funding from The Probation Service, the Young Peoples’ Facilities Fund, Cork City Council, Health Service Executive and the Trustees of the project. This funding has aided expansion in the training and

enterprise skills available to service users, including opening the ‘Garden Café’ training centre in 2008. The cafe employs several past and present clients through the Community Employment Scheme (Presentation Sisters Union North East, 2015), while providing a ‘viable progression route into employment’ (O’Donnell, 2015, p. 3). The further development of two workshops has increased CCT’s ability to promote reintegration through learning and the improvement of practical skills.

## 1.5 Rationale

CCT requested that this study be carried out as the number of people using their service has grown dramatically in the last two years and the needs of their clientele are changing. CCT wanted to develop a better understanding of the experiences of both those who have used their service in order to determine whether the interventions they offer are appropriately meeting the needs of the client group they support. They also wanted to interview the founding members of the organisation to learn about the original vision for the project and gather their thoughts and views on the future direction of CCT.

Initially, our interest in undertaking this particular project stemmed from the fact that all three researchers had completed student placements in The Probation Service and consequentially were aware of CCT. Through this placement and additional relevant experiences, the researchers developed a keen interest in how community-based organisations could better support vulnerable people in a local community setting.

This project is an example of community-based research (CBR) as it involves a community organisation proposing a research topic that has emerged as a direct result of their day-to-day practice (Munck *et al.*, 2014). As social workers in training, we are encouraged to promote empowerment, collaboration and participation in our work, all of which are core components of CBR (Shaw and Holland, 2014). CBR requires various parties working together for the purpose of developing an action plan that will benefit the CSO involved (McIlrath *et al.*, 2014). Participatory research values local community knowledge and is built on the belief that community members have the knowledge and expertise in their own area. In essence, participatory research involves combining academic knowledge with the wisdom of community members (Munck *et al.*, 2014). We were all attracted to doing a CARL project as we liked the idea of being able to help a small community group through our research and potentially contribute to some level of social change. The prospect of working in partnership

with a community organisation, carrying out primary research and developing our research skills were also an appeal. It is our hope that this research will support CCT and other community organisations in promoting change in the lives of its members.

## 1.6 Research Questions

1. What were the founding members' experiences of grassroots activism and their original vision when initiating CCT?
2. What were the motivations, values and principles that underpinned the founders' expectations for the project?
3. What are the founders' reflections on the future direction of CCT?
4. What factors do former users of CCT services identify as contributing to the cessation of their offending behaviour and initiating their pathway to stability?
5. What difficulties, challenges or needs do former users of CCT services identify as having during the initial stages of their pathway to stability?
6. What factors, interventions or services do former users of CCT identify as significant while on their pathway to stability?
7. How has substance and/or alcohol abuse affected the lives of past participants of CCT's service?
8. What role did CCT play in supporting them on their road to recovery?

## 1.7 Conclusion

On concluding chapter one, the reader should have a good understanding of how this study came about and what it aims to achieve. It has provided a background to both the research area and the community organisation involved. It has outlined the rationale for choosing to undertake a community-based research project and explained where our interest in the topic stems from. It has clearly stated the aims and objectives of the research and presented the accompanying research questions.

# Chapter Two: Research Design

## 2.1 Introduction

This research is based on both the experiences of past participants of Churchfield Community Trust who are now considered to be in a stable period of their lives and the founding members of CCT. Chapter two will present the research paradigm and outline the theoretical framework which informed this research project. Additionally, the sample criteria will be discussed. Next, the ethical considerations, limitations and boundaries of undertaking a community-based research project will be put to the reader.

This is a combined report therefore the sampling methods and ethical considerations of both parts of the study will be presented in this chapter.

## 2.2 Theoretical Underpinnings

The foundation of any research project is the research design. This is comprised of ontology, epistemology, methodology and research methods. Daly (2003, p. 193) describes this as a ‘recipe’ that leads a research project. Carey (2013) writes that this research ‘recipe’ should combine together and work simultaneously to produce the final report.

### 2.2.1 Constructivism

Constructivism looks at the ‘social reality’ and how the individual processes and relates to this and attaches their own meaning to their experience (Holstein *et* Gubrium, 2008). This is the ontological stance throughout this project. Rubin *et* Babbie (2010) writes that unlike its counterpart the positivist paradigm, which aims for objectivism in our understanding of reality, constructivism theory suggests that there is no definitive understanding, that each experience, or shared experience, can have multiple realities. In its most extreme form, postmodernism, it is argued that objectivity cannot exist in social constructivist research (Rubin *et* Babbie, 2010). Cooper (2001, p. 721) argues that social work needs to rely more heavily on ‘co-constructing’ and utilising service user participation to promote “*anti-oppressive and participative professionalism*”. The aim was to interview past participants



and learn from their individual experience of the service they received from CCT, thus adapting a social constructivist approach.

### *2.2.2 Interpretive Approach*

Carey (2012) identifies interpretive theory as a means of understanding one's personal experiences or significant times in people's lives, as well as how they make sense of them. This research will utilise an interpretive theory approach as it is felt that it can be closely linked to key social work values such as empathy and person-centred practice. This approach is consistent with the researcher's beliefs that interviewing the founding members of CCT will provide an description of the grassroots development of CCT. Utilising an interpretive approach informed the use of qualitative research.

## 2.3 Theoretical Perspectives

### *2.3.1 Interpretive Phenomenological Analysis Theory*

Interpretive theory is an epistemological approach in qualitative research. Carey (2012) suggests that interpretive theory looks to understand a person's individualised meaning of their experiences of a time or event in their lives. Furthermore, Carey (2012) puts forward that the researcher will empathise with the participants to understand their view of the world around them and their place within it. Padgett (2013) reveals that phenomenological theory reflects on the lived in experience of a time or event in a person's life. It differs from other experiential methods, such as the grounding method, as it uses more of a reflective approach and allows the participant and researcher to re-visit these events as opposed to discussing them as they are unfolding. The combination of both theories led to Smith's (Smith, *et al.*, 2009) interpretive phenomenological analysis (IPA) theory. Biggertsaff *et al* (2008) writes that the theoretical influence of IPA follows an epistemological approach which believes that the participant's account of an experience is the most prevalent concern in the research but requires an interpretive analysis. IPA was considered the most applicable epistemological approach as this research requires understanding of the past participant's experiences of CCT through a method that values their lived experiences.

### 2.3.2 Empowerment Theory

Empowerment theory research, as described by Maschi (2016), is an approach to research that works with individuals and communities to increase their “*political power*” within their own society to encourage positive change. Empowerment theory research compliments Munck *et al* (2014) description of community based research as:

“people in the community, once subject to classification, experimentation, and regulation, are now viewed as owners of skills, knowledge and expertise that may be useful to researchers and policy makers” (Munck, *et al.*, 2014, p. 11).

Complimentary to the epistemological and ontological approach, the development of this research was heavily influenced by empowerment theory. We believed as researchers that past participants of CCT held vital knowledge on the impact of services, interventions and support available from CCT. By exploring past participant’s experiences of CCT, we aimed to use this knowledge to provide CCT with a final report with the hope it could used to develop future policies and practices. As CCT is a community-based organisation, the consideration and implementation of past participant’s recommendations increases political power within a service that is designed to support and guide members.

## 2.4 Community-based Research

Effectively, in community-based research, the researcher takes on the role of a facilitator “whose responsibility is not to produce knowledge but to help participants produce knowledge about themselves” (Liston, 2014, p.29). CBR differs from traditional approaches to research in that the research questions are generated by the community with the explicit goal of contributing to some level of social change (Munck, 2014). CBR is consistent with many of social work’s core values as it is also guided by philosophies of education, empowerment, social justice, collective action, collaboration and participation (Ife, 1998). Collaboration was a core principle of this study and was employed in all stages of the research process. As a community-based researcher, essentially you are being contracted by a community organisation to find out something they want to know. Although you are involved in the research process, unlike other individual research projects, there is a high level of involvement from your community partner and no decisions can be made without their approval (Shaw and Holland, 2014). We collaborated with CCT throughout the research

process; however, they were primarily involved during the design stage of the study. They helped to create the information pack and were responsible for recruiting the potential interview candidates. In order to protect the anonymity of participants and to allow for more truthful responses, CCT were not involved in the data collection or analysis stages. This was a group project and while we each produced our own final written piece, it involved working together and liaising with each other throughout.

## 2.5 Participatory Research

Community-based research has an end goal of developing an action plan that helps to improve the quality of life in the community that is being researched (Hawtin and Percy-Smith, 2007). Skinner (1997) proposes that in order to create a reliable action plan, the research process should include the participation of its own community members at some level; this is known as participatory research. Participants were not heavily involved in the research process of this study; however, it is still considered participatory research as it involved the participation of community members for the purpose of contributing to social change. It provided participants with the opportunity to offer their opinion and directly contribute to the organisation's future (Humphreys, 2008). A participatory method of research was chosen for this project as CCT value the experiences and views of former users of their service and believe they hold the knowledge and expertise in their own area. In essence, participatory research involves combining academic knowledge with the wisdom of community members (Munck *et al.*, 2014).

## 2.6 Methodology

### 2.6.1 Narrative

Urek (2006) believes “social reality is something that people construct together” that the truth of the story is not relevant to the participant but rather their experience of it. He suggests that the narrative approach in social work research allows for the researcher to use a participant's account of an experience.

## 2.7 Methods

### 2.7.1 Sampling Method of Founder's Project

The participants for this research project were identified using a purposive sampling approach. Kumar (2014) outlines this process as seeking out groups of individuals where the required information being researched is most likely to occur. Purposive sampling is most useful when a construction of historical reality is desired (ibid). This sample was identified in collaboration with the co-ordinators of CCT. The sample identified was small scale as there were a limited number of people involved in the founding of CCT. The director of CCT invited the founders to a celebratory anniversary lunch. This enabled me to inform them of the research plan and to invite them to participate. Each founder was provided with an information sheet outlining the rationale and the process involved in the research. This occasion also allowed me the opportunity to arrange appropriate times to meet them for interviews.

### 2.7.2 Sampling Method of Past Participant's Study

The method used for recruiting this sample was purposive sampling. Carey (2013) writes that the priority of purposive sampling is to recruit enough research participants to gather sufficient data. Participants recruited for this research had to meet certain criteria that were agreed upon by CCT and us, the researchers. As previously mentioned, CCT is a community-based organisation that works with men who have a history of substance/alcohol abuse and/or engagement in criminal activity. As a result, all participants had to be over eighteen years of age and be former service users of CCT. Initially, CCT requested that we undertake this study with both past and present service users; however, through discussion it was decided that present service users were likely to be in a more vulnerable stage in their lives. It may have been harmful for them to re-visit certain times and therefore would render our research unethical. Due to this it was agreed that only past users of CCT would be eligible for this research.

Additionally, and considering the aforementioned ethical dilemma it was agreed that participants would be in a stable period of their lives. Through discussion with CCT and us we concluded that for a participant to be considered stable they must;

- a) Identify themselves as being in a stable period of their lives and
- b) Criminal activity and/or substance/alcohol misuse were no longer inhibiting their day to day lives.

While this did eliminate some possible candidates, it was necessary to implement these criteria in order to lower the risk of causing emotional distress or harm to research participants.

Lastly, participants would not have come into conflict with the law in the previous two years. This was to allow the participant adequate time to reflect retrospectively on their pathway to stability.

Once the criteria were established, it was agreed that CCT would approach 30 potential participants and furnish them with an information pack, developed by CCT and us. This included an information sheet about the study, a consent form and an interview question guide. Additionally, we organised an information evening where we were available to clarify any issues that may have arisen.

Once we were confident that all potential participants were adequately informed of the research, and they had given their consent to take part, we were responsible for choosing the final sample. We discussed all candidates and chose the participants that we believed offered the most diverse sample by considering age, length of time away from CCT and their stage of recovery. An overview of the final sample population will be provided in chapter four.

### 2.7.3 Data Collection

Initially, CCT suggested using an oral history interview technique to gather our data. However, one of our main priorities while undertaking this research was the safety and emotional wellbeing of the research participants and therefore agreed that this form of data collection would not be suitable as it often requires the interviewee to provide an in-depth narrative on their life (Yow, 2014). Additionally, Yow (2014) provides that the evidence gathered using an oral history technique is as a result of a specific questioning method by the interviewer. Consequentially, this method would not allow us to address any unforeseen issues or themes that may arise during the interview.

While the safety and emotional wellbeing of the participants remained the paramount concern when designing this research, given the purpose of this study it was not possible to completely avoid discussing some sensitive and personal experiences. Consequentially, it was decided that a semi-structured interview approach would be most appropriate.

Having decided on the interview format Lisa and Orla developed a shared interview question guide to maximise the data collected and hence strengthen our research. This was influenced

by a review of relevant literature on recidivism and substance/alcohol misuse in Ireland and by discussing these topics with CCT. Of the 30 potential candidates, eleven were deemed suitable to participate in the research. We undertook the first interview jointly and then each did five separately. The interviews were recorded onto a Dictaphone and then transcribed onto a word document for thematic analysis.

#### 2.7.4 Data Analysis

Orla and Lisa collected the data together and then analysed individual themes separately. Orla's themes focused on themes surrounding crime and offending behaviour and Lisa looked at themes focusing on substance and/or alcohol misuse. To facilitate the breakdown of the shared data we chose to analyse the data using a thematic analysis method. This allows the researcher "to classify and organise data according to key themes, concepts and emergent categories" (Ritchie et al., 2006, p. 220). Carey (2009) writes that it is not good enough for social research to merely collect, analyse and report data collected but should go further to critically examine pre-existing policies and practices. Therefore, once the themes have been established Orla and Lisa combined their findings and produced a report to present to CCT.

### 2.8 Ethical Considerations

In line with UCC's ethical procedures, for both studies, approval was sought from our research supervisor and by the School's Research Ethics Committee (REC) in December 2016. This was achieved by submitting a research ethical approval form and a draft copy of the information sheet and interview guide to the committee. This project was proposed by CCT and therefore had already been ethically approved by Mr. Paul O'Donnell, director of CCT, before becoming available on the CARL website. CCT advised that ethical approval from any other outside agency was unnecessary and that the university's approval process would be sufficient.

#### 2.8.1 Ethical Considerations of the Past Participant's study

When conducting primary research, especially research involving a potentially vulnerable population, it is important to carry out the task with care and vigilance to ensure no further harm is caused to those involved (Padgett, 1998). In participatory research, some would argue that the uniquely close and ongoing relationship between the researcher and participants

makes the ethical standards somewhat higher than that governing traditional research (Stoecker, 2005). One of the main concerns of this study was the sensitive nature of the topic being discussed. We attempted to reduce the possibility of especially vulnerable individuals taking part by maintaining specific exclusion criteria during the recruitment stage. As mentioned previously, CCT originally suggested that we interview both past and present users of the service; however, this was decided against during the initial stages of project due to the potential heightened vulnerability of those in early recovery. We also provided each participant with a copy of the information sheet and interview question guide in the weeks prior to being interviewed, thus ensuring all parties were fully informed of the research process.

### 2.8.2 Informed Consent

Butler 2002 (as cited by Carey, 2009) writes that participants should be fully informed of all aspects of the research and the researcher must respect the participant's right to refuse or withdraw from the study. For us this meant that we had to ensure that participants were fully aware of the content of the research, what we were asking of them, and what we planned to do with the information they gave us. In order to achieve this Orla and Lisa wrote a detailed information sheet that was written in easy to understand language along with a clearly written informed consent sheet. This information sheet included details on their role in the study, why we were approaching them to participate, their rights throughout the process such as their right to anonymity, their right to withdraw from the study for a period of up to two weeks post interview and their right to terminate the interview if they felt they were unable to continue. Additionally, we facilitated an information evening with possible candidates to further explain the research and its process.

### 2.8.3 Confidentiality and Anonymity

One of the more prominent features of this research is the participant's account of their experience of CCT. CCT is located centrally in the community where many of our participants reside and thus the issues of confidentiality and autonomy had to be addressed with the participants prior to gaining their consent. The limits to confidentiality and the issue of disclosure were also carefully explained to all participants prior to their interview commencing. To protect the identity of the participant's, pseudonyms were used in lieu of their actual names. Additional efforts were made to ensure their anonymity throughout this paper and no identifiable features such as specific age or address were written into this report.

Additionally, from the founder's report perspective the small sample of participants used for this study was limited to the founders' of CCT, causing it to be unrealistic to assure full anonymity.

#### 2.8.4 Care of the Participants

As previously outlined, our most fundamental ethical concern as researchers was to avoid causing further harm to participants. Each individual was de-briefed after their interview; this was not recorded and was used as an opportunity to provide participants with information regarding available support services if necessary. CCT agreed that their counselling service would be made available to the participants if they wished to avail of them. Additionally, participants were informed that they were under no obligation to and could refuse to answer specific questions posed or terminate the interview entirely if they wished.

## 2.9 Limitations and Boundaries

#### 2.9.1 Limitations and Boundaries of Past Participants Study

Originally, this study was to include past and present members of CCT; however, due to the potential vulnerability of present clients it was agreed to omit present service users from the study. Further criteria suggested that research participants would have to self-identify as being in a stable period in their lives at the time of research. These criteria meant that research participants were likely to have benefitted positively from the supports available through CCT and other services. Thus, the research participants may have been positively biased towards CCT and data presented may lack a critical analysis of the service.

Furthermore, due to the scope of this research the sample interviewed is only a small sample of the much larger population of individuals who have successfully completed the CCT programme. Consequentially the data presented should be viewed by the reader as the views and opinions of this specific sample and not one of the entire past participation population.

#### 2.9.2 Limitations and Boundaries of Founder's Project

Due to the time constraints and scope of this dissertation, it was only feasible to carry out a small-scale study. This limited the ability to include all the significant themes discovered in the data. The most prominent themes were selected to examine the three research questions outlined by CCT in the initial phase of the research process.



## 2.10 Conclusion

On concluding this chapter, the hope is that the reader would have a good understanding of the process that was followed in order to achieve the research aims and objectives. It provided a comprehensive description of both community-based research and participatory research and discussed their relevance in the design of this study. It outlined the paradigm that informed our research methods and attempted to offer justification for choosing this approach. The chapter concluded by examining the ethical considerations, limitations and boundaries of conducting a community-based research project. The following chapter will explore existing literature relevant to all three research topics.

# Chapter Three: A Review of the Literature

This chapter will be presented in three separate parts in order to provide a comprehensive review of the literature relevant to each of the three research topics.

**Part One:** Katie's Morrissey's literature review on the subject of community.

**Part Two:** Orla Fogarty's summary on the literature surrounding the themes of crime and desistance.

**Part Three:** Lisa O'Connell's review on the topics of substance use and recovery.

## Part One

### 3.1 Introduction

Part one of this review will provide the reader with a background summary of some of the existing literature surrounding the topic of community. It will begin by defining the term community before going on to discuss the benefits of being part of a community and the role of the role of the community and voluntary sector in Ireland today. The role of religious orders within community organisations will also be examined, as will the practice models employed by CCT. Finally, reintegration services in Ireland will be discussed, in conjunction with relevant policies and frameworks in Irish society.

## 3.2 The Role of 'Community' and Perceived Benefits

“It (community) is an evocative idea conjuring up positive images and feelings of identity, belonging and understanding by all its members” (Doherty, 2007, p. 10).

Gilchrist *et al.* (2016, p. 52) acknowledges there are an infinite number of definitions of community, but all consider the involvement of social interaction, the common ties or bonds as being unanimously evident in the understanding of community. Similarly, Forde *et al.* (2015, p. 5) considers community as being “...popularly thought of as place, in geographical terms. It may also be understood in terms of bonds or ties between people”. According to Wilkinson (1991) being part of a community emphasises interpersonal bonds such as a shared territory, having a common life and mutual identity as well as including social interaction as a common denominator in all communities (cited in Marcus, 2006).

Wilkinson (1991) further believes that participation and interaction with community-based organisations promotes social interaction and the development of self-identity. Comparably, Croker *et al.* (1990) suggests that being part of a community can enhance an individual's self-esteem and social identity within their community (cited in Marcus, 2006).

Research carried out by Yerbury (2012, p. 196) on young people's attitudes to the meaning of community included “a sense of self, relationships with other people and belonging and social action”, suggesting community “begins with the individual” (cited in Forde *et al.*, 2015, p. 6).

## 3.3 The Community and Voluntary Sector (Third Sector) in Ireland

The community and voluntary sector, also described as the third sector, continues to play an important role in Irish society providing health, educational and social services. In 2015, it was estimated that there were more than 20,000 community organisations, with numbers continuing to rise; “new organisations continue to emerge in response to changing needs and social challenges” (Department of Housing, Planning, Community and Local Government, p. 10). Lee (2015) argues that this sector holds a pivotal role in Irish society, most pertinent in matters relating to education and health, housing and wellbeing (cited in Local and Community Development Working Group, 2015).

Powell (2013) describes the need for greater participation of the third sector through increased partnership in the welfare state where altruism can be displayed. Bridging this gap and increasing co-operation and partnership between communities and the state requires active citizenship and greater public participation. This is outlined in the *Irish White Paper, Supporting Voluntary Activity* (2000, p. 7) where active citizenship is defined as: “the active role of people, communities, and voluntary organisations in decision- making that directly affects them”. However, Lee (2015) argues that it is questionable whether there is any current Irish policy relating to the third sector, given that the above document is over fifteen years old.

### 3.4 The Role of Religious Orders in the Provision of Community Services

Prior to the late 1980s, the Catholic Church had been exceedingly influential in social policy and the provision of community services in Ireland. This was due to their teaching influences and the fact that the church existed as the main provider of social services at that time in Ireland (Fahy, 1998). According to Donoghue *et al.* (1999, p. 8),

“Health, education and social welfare have traditionally been the forte of voluntary activity in Ireland and predominantly the preserve of the Catholic religious orders...”

Since then, there has been increased separation relative to the Church and the State in relation to aspects of Irish society (Inglis, 2008). In 1991, the Catholic population in Ireland came in at just under 3.2 million with the Catholic Church responsible for 667 charitable institutions in 1997. This literature is significant as a decline in vocations of religious orders involved in voluntary organisations became evident around the instance of the grassroots of CCT. Faith communities in the Irish context include the Presentation Brothers, the Presentation Sisters and the Christian Brothers, all of which played a significant role in establishing CCT (O'Donnell, 2015). These congregations practiced under the ethos of both Edmund Rice (1762-1844) and Nano Nagle (1718- 1784).

Rice founded the Christian Brothers and the Presentation Brothers Congregations. His ambition was to provide free education for the underprivileged Catholic children in Ireland identifying this as an absent need within his community. He devoted his life to the spiritual and material interest of young people in Ireland (ERST, 2016). Similarly, Nagle founded the

Presentation Sisters congregation. Through observation of the poverty-stricken streets, Nagle defied the Penal Laws in Ireland and at her own expense, founded a school to enrich and educate the lives of young people in her community (Presentation Sisters Union, 2015, p. 1). Both founders had similar motivations and desires which included identifying the needs of the people and addressing them in a practical and non-judgemental way.

Since the modernisation of the Irish state in the late 1980's and 1990s, the role of the Catholic Church in Irish policy has been vastly diminished. This has led to the state becoming increasingly responsible for several welfare functions that were previously fulfilled by voluntary and religious orders (Acheson *et al.*, 2005). More recently, Ireland has been classified as '*post catholic*' (Martin, 2013, p. 324). Irrespective of this, CCT attempt to embrace their religious roots with many of the members of the congregations continuing to retain roles as trustees, members and directors of the board (O'Brien, 2015).

### 3.5 Models Underpinning CCT

There are several key models that can be considered when discussing community-based organisations, although it is unattainable to decide on an exact number of existing models (Poppo, 2015). Applying distinct models of community work assists in developing the theoretical understandings underpinning this work and thus enables 'categorising central approaches' (Poppo, 2015, p. 93) while gaining a more accurate understanding of the community activity that is being carried out (Forde, 2015). CCT utilises two key models within the project: the SERVOL approach and community development. Consequently, these models will be the focus of this review of literature.

#### 3.5.1 SERVOL Model

The SERVOL model is described as a 'service volunteered for all'. It is a "non-governmental, community-based organisation that stands as an expression of the imagination of a community that works for its self-determination" (Lavia *et al.*, 2010, p. 38). The SERVOL approach derives from the West Indies due to the depression of many young people being unemployed and 'hanging around idle'. The SERVOL model applies these three key philosophies:

- A philosophy of ignorance: when working with individuals it cannot be presumed we know what is best as everyone is individual and everyone leads different lives.

- Attentive listening: the need to listen attentively to what someone is telling you as their voice is central and crucial in their own development.
- Respectful intervention: when helping people, it should be done in a respectful manner with their full understanding (O’ Donnell, 2015).

SERVOL is used in several Caribbean communities enabling social change in disadvantaged areas. The Life Centre in Trinidad has been carrying out in-depth training programmes since 1983, so a variant of professionals from all over the world can engage in the in-house SERVOL training before returning to their respective countries and applying the approach to similar projects. Since then, the SERVOL model has been implemented in organisations including youth training centres, early childhood agencies, prisons and parent outreach programmes (Pantin, 1992).

Literature found on the effectiveness concerning the SERVOL model in community-based organisations or reintegration services was limited, particularly in an Irish context. Nonetheless, a study carried out by Griffith (2002) on past pupils in SERVOL life centres in Trinidad concluded that there were considerable improvements in the pupils behaviours, attitudes and lifestyles, along with giving them “greater confidence, self-awareness and self-esteem” (Griffith, 2002, p. 51). Similarly, an educational project designed for early school leavers in the north side of Cork City incorporate the SERVOL model in their daily routine, using it as their main approach to education (Healy, 2012). Healy (2012) concluded that there were positive effects in relation to the relationships between the students and the staff as they expressed how they felt their opinions were being heard and they were being treated with respect from the outset.

In 2015, CCT Director, Eileen O’Brien outlined addiction as a common denominator among the young men the project engaged with and highlighted how often many ex-offenders needed “rather than another sentence treatment”. Of the sixty-four clients engaged in the service in 2014, only two percent of them had had reoffended (cited in O’ Keeffe, 2015). O’Brien believes that employing the SERVOL model and applying a listening and non-judgmental approach, assists in maintaining low recidivism rates for young men in the project. In the years 2008- 2014, there were 162 clients working together with the project with a 2.5 percent recidivism rate (O’Brien, 2014). Regrettably, the writer was unable to find

any evaluations of the SERVOL model in other justice programmes in Ireland or internationally.

This approach differs from other models such as community action as it is constructed on the significance of relationships and the exclusive needs of individuals, rather than using conflict and direct action to relieve a single issue (Popple, 2015). The SERVOL model has been embedded in the project since 1994 and recidivism rates remain low each year (O'Brien, 2013). Community development is an alternative model used in community work with similar activities at its core.

### 3.5.2 Community Development

Community development (CD) remains to be a core element in Irish social inclusion policy and is positioned at the centre of several national development programmes and local development social exclusion programmes (Motherway, 2006), as a 'discourse of social action' (Geoghan *et al.*, 2005, p. 1, cited in Motherway, 2006). CD is a model of community work that is concerned with assisting groups of people in learning skills and gaining increased confidence to improve their quality of life and others in the community. Its focus is to facilitate members to engage in self-help by educating them to make positive changes in their own lives (Popple, 2015). Community development in Ireland employs activities of community work as a means of encouraging self-help and service provision in circumstances where there are growing social problems. These service provisions and initiatives are instigated by state agencies through a 'top down' approach (Forde *et al.*, 2015, p. 9). CD can be described as a 'preventative approach that anticipates issues and situations and seeks to address them before they turn into problems' (Forde *et al.*, 2015, p. 11), while 'improving the wellbeing of all community members' (Gamble *et al.*, 2013, p. 217).

Furthermore, Ife (2013) considers the necessity of valuing the knowledge of the local people within communities to engage successfully in the community development process. Ife believes that local people are more experienced in the knowledge of the community's needs and problems as well as its strengths and positives. The role of the community worker in community development is to "listen and learn from the community, not tell the community about its problems and needs" (Ife, 2013, p. 139). This is a similar approach that is applied in the SERVOL model through the implementation of their philosophy of ignorance and attentive listening.

In Chicago, CD was used in relation to reintegrating offenders into society through the implementation of educational projects. These projects educate offenders of the changes needed to successfully reintegrate into their respective communities and live crime free. This proved to be extremely effective with recidivism rates dropping by forty percent in the first two years (Jackson *et al.*, 2006).

Perkins (1982) describes three 'R's present in CD; relocation, redistribution and reconciliation. Relocation involves a community worker allocating to an area it aspires to facilitate change in. This allows them to subsequently develop shared and similar experiences with the local people. This can be an effective way of establishing the trust of the local community. Perkins described it as being a 'relocation of power back into the community' (cited in Tan, 2009, p. 9). Estes (1997) notes that oppressed communities often lack power and resources, proving redistribution of local power as being necessary to allow these communities to function independently (cited in Tan, 2009). Finally, reconciliation involves accounting for and acknowledging a person's past and present experiences of repression while implementing equality to overcome the disparities. The writer acknowledges this literature as being significantly dated, but felt it was crucial to include in this review as the three 'R's were fundamentally apparent in the grassroots of CCT. By using the above models within their practice, the project has naturally progressed from providing a safe place for early school leavers to a reintegration service for young men post prison release.

### 3.6 Reintegration Services for Men Post Prison Release

"The social reintegration of ex-prisoners is the support provided to them before, during and after their release. The preparation of prisoners for a return to society is something that should be envisaged and worked towards from the very beginning of a term of incarceration" (Casey et al., 2011, p. 4).

A study by King (2013) highlights the positive impact probation officers can have on desistance, but notes how probation officers are unable to address the socio-structural inequality often experienced by ex-prisoners. He concludes that these issues are most often dealt with by external agencies within the local community. The main objective of the justice system to prevent crime and incarceration along with protecting societies. Community-based projects are therefore developed in collaboration with justice systems to help offenders overcome the "stigma of a criminal conviction, the detrimental effects of incarceration and



the numerous obstacles they face in trying to reintegrate into the community” (United Nations Office on Drugs and Crime (UNODC), 2012, p. 2). In Ireland, many reintegration services are available to ex-offenders through statutory and community-based organisations such as the probation service and CCT.

This is achieved through the inclusion of several government agencies and stakeholders such as the prison service and the Irish Association for the Social Integration of Offenders (IASIO). Community-based reintegration services address dynamic risk factors through focusing on motivation, education, development of skills, employment and interpersonal relationships, assisted by strengths based approach (UNODC, 2012). Similarly, in Canada and Australia, offenders are offered reintegration community correction services regards re-entry management programmes in a bid to decrease desistance in crime within communities (UNODC, 2012).

In relation to reintegration services for ex-offenders, there have been little controlled evaluations carried out in terms of effectiveness and the reduction of recidivism rates (Visser, 2006; Petersilia, 2004, cited in Griffiths *et al.*, 2007). In contrast with this, there is some evidence that shows the positive outcomes that can be achieved when offenders physical and social needs are supported in a holistic way both in prison and post-prison release (Griffiths *et al.*, 2007). Notably, CCTs most recent review carried out from 2001-2003 found that “almost two thirds of clients from this period are currently crime free”, along with “over half of those who have completed the programme are currently in full time employment” (Morley, 2003, p. 11). International standards such as UN Standard Minimum Rules for the Treatment of Prisoners, Basic Principles for the Treatment of Prisoners and the UN Standard Minimum Rules for Non-Custodial Measures (Tokyo Rules), acknowledge the importance of rehabilitation of offenders and successful reintegration into society. Irish policy and frameworks addressing reintegration services will be explored below.

### 3.7 Irish Policy and Frameworks

This section will outline the policies and frameworks accessible in Ireland in relation to supporting reintegration services. This literature review outlines the efforts made to manage community organisations in an effective manner while acknowledging the absence of a predominant policy underpinning in community work in Ireland.

### 3.7.1 Recidivism and Reintegration

There is currently no national framework explicitly supporting recidivism and reintegration work (Martynowicz *et al.*, 2010) and so provisions and programmes can vary widely within committal areas (Pobal, 2008). The need for the development of such a framework is acknowledged by both the Irish Prison Service & Probation Service in their Joint Strategic Plan 2016-2018. The main objective of which is “providing safe and secure custody, dignity of care and rehabilitation to prisoners for safer communities” (Irish Prison Service, 2016, p. 9). Without a framework in place, responsibility for services and delivery are fragmented and no consistency or cohesiveness in interventions is being achieved (Williams, 2004). Part 3.4 of the above strategy plan acknowledges the wide range of departments, agencies and bodies the prison service work alongside including the Gardaí and The Probation Service.

The aim outlined in this section involves enhancing ‘communication, co-operation and collaboration’ amongst those involved, while also seeking to ‘expand the number of organisations with whom we co-operate with, particularly in the community and non-statutory sector’ (Irish Prison Service, 2016, p. 12). The statutory frameworks influencing the prison and justice context include; The Prisons Act 2007, The Criminal Justice Act 2007, The Prison Rules Amendment 2014 and the European Convention on Human Rights Act, 2003, none of which refer to the reintegration of prisoners post release.

Whilst the seamless collaboration of agencies both voluntary and statutory is not only desirable but crucial, it cannot be so without clear leadership. At present, there is no single body accountable for the success or failure of pre-and post-release support services. Comparably, governmental correctional agencies in Australia do not provide reintegration services to prisoners upon their release, unless they are under an intensive supervision order or a temporary release order (Bozick, 2003).

### 3.7.2 Community and Voluntary Sector

The policy called *Our Communities: A Framework Policy for Local and Community Development in Ireland* (Government of Ireland, 2015) outlines the absence of a predominant policy for local and community development. This framework proposes four core principles at the centre of practice. These include: engaging with communities, working with partners,

planning for local and community development as well as delivering, evaluating, monitoring and reviewing consistently while seeking to “achieve the vision of vibrant, sustainable and self-determining communities” (Department of the Environment, Community and Local Government, 2015, p. 17). Comparably, the Government of Ireland (2000) developed a ‘*White Paper on a Framework for Supporting Voluntary Activity and for Developing the relationship between the state and the Community and Voluntary Sector*’, outlining its commitment in achieving this collaborative work successfully to benefit individuals and wider society. Furthermore, section 42 of the Irish Human Rights and Equality Commission Act (2014) identifies a ‘positive duty’ on all public bodies to aim towards the elimination of discrimination while protecting human rights, achieving this through promoting equal opportunities for all and eliminating discrimination in our communities and society (cited in Department of the Environment, Community and Local Government, 2017, p. 14)

## Part Two

### 3.1 Introduction

Part two of this review aims to provide the reader with a background summary of some of the available literature surrounding crime and desistance. It will begin by outlining the implications arising as a result of the increase in prison numbers. It then goes on to reflect on some of the reasons why people engage in crime and looks at offending behaviour through the lens of a number of different social work theories. The topic of desistance will be explored in detail with reference made to various desistance theories. Recidivism is discussed at length, followed by an analysis of the justice model employed by Ireland. The difficulties associated with reintegration are considered with support from relevant literature. Following this, the criminogenic needs of offenders are explored with particular focus on substance misuse. Lastly, we will provide examples of both national and international community-based interventions and examine their effectiveness in practice.

### 3.2 The Current Situation

The prison population has doubled in Ireland in the last twenty years resulting in prison overcrowding and a dramatic rise in the use of temporary release (Irish Prison Service, 2010).

There were 17, 206 prison committals in 2015, this is an increase of 6.5% on the 2014 total (Irish Prison Service, 2016). With a growing number of prisoners comes a greater strain on resources. The cost endured by the state as a result of this rise is substantial. A study carried out by the Irish Penal Reform Trust in 2010 estimated it costs the Irish justice system an average of €92,717 per prisoner per year (Martynowicz and Quigley, 2010). Figures reveal there were approximately 3,812 people in prison custody at any one time in Ireland in 2015 therefore costing the state over 350 million on prison services alone (Irish Prison Service, 2016). However, the impact of the issue proves much greater than the cost endured by the state; underneath these figures are a multitude of individuals presenting with complex needs returning to our communities in need of reintegration support. If reintegration is to be the focus of our criminal justice system, it is in our best interests to develop an understanding of some of the needs of these individuals. This will allow us to create a system that both addresses these needs and supports the long term desistance from crime (Martynowicz and Quigley, 2010).

### 3.3 The Causes of Crime

Before exploring the concept of desistance and why people stop offending, it is important to first consider the reasons why people engage in criminal behaviour in the first place. When criminologists speak about the causes of crime they are referring to the social and psychological factors that play a role in the individual's offending behaviour (Pakes and Winstone, 2007). There are a number of leading theories which offer an explanation on the cause of crime. One such theory is Wolfgang and Ferracuti's (1967) subculture of violence theory which suggests that certain populations in some areas accept the use of violence as a means of resolving conflict. In these areas, not only is there a sub-cultural system that values harm towards others as a legitimate response, crime is a social norm (as cited in Estevez and Emler, 2011). While this theory supports the reality that there is a higher rate of crime in some areas over others, as a researcher it is useful to reflect on the issue from a number of different viewpoints. Looking at offending from more of a social-cognitive perspective, Bandura's (1977) Social Learning Theory suggests that learning is influenced by both psychological factors and through direct responses to environmental factors. He proposes that being exposed to certain behaviours from a young age may result in the individual learning particular ways of behaving (as cited Akers, 1998). The Social Learning Theory maintains that people learn their values and behaviours from others around them, therefore our social

environment has an influence on the risk of offending. This theory accepts the influence society has on individuals but also acknowledges the importance of childhood familial experiences (Akers and Jensen, 2003).

Another theory that recognises the significance of environmental factors in a child's development is Uri Bronfenbrenner's (1979) Ecological Systems Theory. This theory takes a holistic approach and looks at how five different contexts can impact on an individual's development. He proposed that a child's is primarily influenced by their family and friends; he refers to this as the micro-system (as cited in Bee and Boyd, 2009). A report published by Young Persons Probation in 2011 found that negative peers and family relationships were the primary causes of youth offending in Ireland (Redmond and Dack, 2011). There is a significant amount of research to support the idea that family factors are the most influential in a child's life (Green *et al.*, 2013). A child who experiences negative family relationship patterns is more likely to develop substance misuse issues and is at an increased risk of being involved in criminal activity later in life (Montgomery *et al.*, 2008; Smith and Thornberry, 1995). The link between parenting styles in childhood and anti-social behaviour in early adult-hood has been extensively studied (Barlow, 1999; Whyte, 2004). Whyte (2004) proposes that an individual is more likely to engage in offending behaviour if there is a family history of criminal activity or they received inadequate supervision as a child. Similar to Bandura's Social Learning Theory and Wolfgang and Ferracuti's Subculture of Violence Theory, Bronfenbrenner also accepts social norms and values as a contributing factor in a child's development; he calls this the macro-system (Bee and Boyd, 2009).

### 3.4 Desistance from Crime

One of the main aims of any criminal justice system is to reduce the level of crime, therefore while it is important to have knowledge of some of the theories behind why people start offending, it is equally valuable to acquire an understanding of why people stop offending (Laub and Sampson, 2001). In criminology, the term used to describe this concept is desistance. Desistance is defined as the "long term abstinence from criminal behaviour among those for who offending had become a pattern of behaviour" (McNeill *et al.*, 2012, p.3). Some criminologists define desistance as the permanent cessation of offending, while others are more flexible and accept the possibility that episodes of re-offending can occur (Laub and Sampson, 2001). Research on the process of desistance focuses more on the "dynamic interactions that helped individuals move away from criminal behaviours" rather

than the programmes that were useful along the way (Maruna et al., 2012, p.47). Encouraging desistance from crime is an explicit goal of much criminal justice policy and is the desired outcome of most interventions provided by criminal justice agencies. Understanding the process of desistance and why people cease offending has obvious value as it not only supports evidence-based practice, it also promotes the possibility that criminal justice policy can be designed in such a way to accurately facilitate desistance (McNeill *et al*, 2012).

### 3.4.1 Theories of Desistance

Desistance theory is a phenomenon within criminology which offers an explanation on how and why people stop offending. There is a number of existing theories on desistance; however, they all aspire to achieve an understanding of the process by which offenders come to live a life free of criminality. Desistance theories help criminal justice agencies identify possible targets for intervention and ways of reducing reoffending in the community (McNeill, 2006). Some of the earliest desistance theories, dating back to the early 1900's, concluded that desistance from crime was due to a natural or biological process. Many theorists today still consider a person's age to be the single best predictor of desistance (McNeill et al., 2012). However, our knowledge of desistance since then has advanced greatly. Clarke and Cornish (1985) were some of the first to claim that desistance is impacted by processes of volition and choice. They argued that factors such as not wanting to return to prison and the revaluation of what is important in life has a strong influence on an individual desisting from crime (as cited in McNeill *et al*, 2012). Cromwell *et al* (1991) went on to identify the importance of an individual coming to a realisation and making a decision they want to stop committing crime. They emphasise that this factor alone is not a sufficient predictor for desistance; however, it likely to have an impact. Sampson and Laub's (1993) theory on desistance examines the significance of the relationship between the individual and society. They argue that an individual's probability of desisting from crime is influenced by their emotional attachment to societal goals and the extent to which a person is committed to achieving these goals. In addition, they theorise, various formal and informal institutions help strengthen the relationship between the individual and society. However, it must also be noted that a change in this relationship can increase a person's likelihood of reoffending (as cited in Laub and Sampson, 2001). Lastly, Maruna (2001) maintains that in order to desist from crime, individuals must develop a pro-social identity. This belief stems from his

research that found that those who succeeded in desisting from crime had high levels of self-efficacy and had found purpose in their lives.

### 3.5 Recidivism

While desistance is our desired outcome, many continue to commit crime and enter a negative cycle of offending behaviour. Recidivism refers to the relapse of criminal behaviour (Fazel and Wolf, 2015). The Probation Service carried out a review of their supervision database in 2013. They examined figures over a five year period and found there to be an overall recidivism rate of 41% over three years. This report revealed the recidivism amongst young males was particularly high and stood at a rate of 62.3% (The Probation Service). A systematic review on worldwide recidivism found Scandinavian countries to have the lowest rate. Norway has a recidivism rate of 20%, the lowest in the world (Fazel and Wolf, 2015). Research suggests recidivism is generally highest among young males, those without formal education and the unemployed population (Martynowicz and Quigley, 2010; Willott and Griffen, 1999).

### 3.6 Models of Justice

In modern criminology, we evaluate the effectiveness of penal intervention by measuring the rate of recidivism and given the fact Ireland has a particularly high level would suggest our criminal justice system is in need of reform. Mary Rogan, a law lecturer in Dublin Institute of Technology and former chairperson of the Irish Penal Reform Trust, is a leading advocate for prison reform in Ireland. She maintains that Ireland has an especially punitive model of justice and considers the use of custodial sentencing in many cases disproportionate (Rogan, 2014). The average prison population in Ireland, on any given day, is similar to the European average; however, the number of yearly committals is much higher, leading to the conclusion that Ireland systematically overuses imprisonment as a form of punishment (Irish Penal Reform Trust, 2009). In 2015, there were 9,883 committals to Irish prisons for non-payment of fines, this is over half of the overall number of committals for the entire year. Rogan (2012) argues that in order for Ireland's criminal justice system to be more effective we need to adopt more of a restorative model of justice and use prisons only as a matter of last resort. Restorative justice focuses on resolving the harm arising from the committed offence while also 'facilitating offender rehabilitation and integration into society' (The Probation Service, 2013, p.2). Interestingly, many of the Nordic countries employ a restorative justice model.



Prisons in Norway are particularly focused on preparing prisoners for release. They offer training workshops, vocational programmes and teach life-skills in order to support the successful reintegration into society (Sterbenz, 2014).

### 3.7 Reintegrating into Society

Reintegrating into society after serving a lengthy sentence can be a daunting experience. Prison can lead to institutionalisation and can have a profound impact on a person's mental health and social functioning (Irish Penal Reform Trust, 2009). A study carried out in 2007 on the experiences of prisoners and their families following release, found there to be a concerning level of institutionalisation amongst prisoners who had served a lengthy sentence. Family members described their loved ones struggling to carry out simple daily tasks such as eating as they had become accustomed to eating alone in their cell (Bedford Row, 2007). Dependence on existing structures and regulations in prison can create a sense of disempowerment and result in an individual's self-regulation becoming muted (Maruna, 2001). This inability to self-regulate can develop the overwhelming need for structure on release (Haney, 2001). Given that the very nature of the prison environment fails to prepare individuals for release, many require intensive support to counter the effects of imprisonment in order to reintegrate into the community successfully. While measuring the national rate of recidivism is a useful method of assessing the effectiveness of post-release integration services, underneath these figures lie a multitude of individuals that present with complex needs. If reintegration is to be at the heart of our criminal justice system we must develop a co-ordinated system that both addresses these needs and supports the long term desistance from crime (Martynowicz and Quigley, 2010).

### 3.8 The Criminogenic Needs of the Offender Population

Criminal Justice agencies have implemented a number of different sanctions and approaches over the years to tackle offending; however, there seems to be no remarkable change in the national recidivism rate. As a researcher, this high recidivism rate nationally leads you to question Ireland's post release integration strategies and whether our punitive response to crime is effective. Research would suggest that using sanctions alone is ineffective for most offenders (Hollway *et al*, 2007). An intervention is more likely to have a lasting positive impact if it is curtailed to address the individual's risk factors that lead them to engaging in offending behaviour (McGuire, 2002). These risk factors are sometimes referred to as



criminogenic needs. Criminogenic needs are characteristics that directly contribute to a person's risk of offending but have the potential to change. They include factors such as negative peer group, homelessness, mental health, unemployment and substance abuse. Addressing these areas in a person's life and initiating a change is likely to reduce an individual's risk of offending, thus making useful targets for intervention (Farrow *et al.*, 2007). A person's criminogenic needs differ depending on their environment and circumstances; however, for the purpose of this study, substance misuse will be discussed in more detail.

### 3.8.1 Substance Misuse

The link between crime and substance misuse can be determined by the prevalence of addiction issues among the prison population (Fazel *et al.*, 2006). Substance misuse among prisoners is a longstanding feature of the Irish prison system. Research suggests that the number of people in Irish prisons with a history of substance misuse greatly outnumber those without (Drummond *et al.*, 2014; Longe, 2008). Substance misuse is not just a concern within the prison system as community-based reintegration services also report high prevalence levels amongst their clientele. A report published by The Probation Service in 2012 showed that 89% of adult offenders on probation supervision had experience of misusing alcohol and/or drugs, either currently or in the past (The Probation Service, 2012).

### 3.8.2 Substance-Related Offending

Substance-related offending encompasses a number of different crimes including theft, burglary, road traffic offences, the dealing and possession of drugs, public order offences, assault and in some cases even murder. In Ireland, the most commonly committed offences are theft related offences, followed by public order and other social code offences and then burglary (Central Statistics Office, 2017). The link between theft and addiction has been extensively researched by criminologists' worldwide and it is an accepted theory that theft is a common behaviour among people with addiction issues (Degenhardt *et al.*, 2013; O'Donnell, 1966). A report published by the National Health Service in the U.K suggests problem drug users are responsible for a large proportion of acquisitive crime. They speculate that their offending is linked to the rising cost of their drug use (National Treatment Agency for Substance Misuse, 2009).

### 3.8.3 Approaches used to tackle Substance-Related Offending

There are a number of different approaches used worldwide to tackle substance-related offending behaviour and curb overall imprisonment figures. Many of these interventions incorporate medical treatment, educational programmes and strategies to address the psychosocial needs of the client (Palmer *et al.*, 2011). Family focused therapy programmes are proven to be hugely successful in lowering substance abuse and criminal behaviour. Research suggests family involvement maximises client participation in programmes thus leading to better outcomes (Green *et al.*, 2013). Multi-systemic therapy (MST) is another form of effective treatment; this method is used particularly with youth offenders. MST takes more of an ecological approach to address offending behaviour and focuses on all of the environmental systems surrounding the individual including their family, friends, school and community. MST recognises that each system impacts on a child's behaviour in different ways, and therefore, has designed a programme around this (Farrington and Welsh, 1999). However, research suggests the most effective approach's to tackle substance-related offending and lower the rate of recidivism are community-based interventions as they work on the premise of prevention through social development (De Vries *et al.*, 2014). One such strategy is the Addressing Substance-Related Offending Programme (ASRO) used in England. The ASRO programme is a cognitive-behavioural intervention that seeks to enhance the individual's motivation to change, increase their self control and prevent relapse by encouraging them to change aspects of their lifestyle. An evaluation of the ASRO programme was completed in 2011 and found that those who completed the programme had a significantly lower rate of reconviction compared to those who started the programme but didn't complete it. 34% of those who completed the programme were re-convicted compared to 72% of those who failed to complete the programme (Palmer *et al.*, 2011). Similar to the ASRO programme, CCT is an example of a community-based programme that aims to lower an individual's risk of reoffending through social and educational development.

## 3.9 Churchfield Community Trust as a Reintegration Initiative

There are a number of community-based reintegration initiatives funded by the Irish Probation Service aimed towards reducing an individual's risk of reoffending. One such project is Churchfield Community Trust. CCT aims to promote the reintegration of persons who are marginalised in society through a process of social and educational development.

They aspire to support the long-term desistance from crime by addressing a person's criminogenic needs, namely substance misuse. Through a process of relationship building, they aim to bring about positive change in the lives of the people they work with by attempting to instil self-care strategies, coping skills and resilience (O'Donnell, 2015). CCT is a community project based on the philosophy of the Servol Model. The Servol model approach encompasses three key principles; 1) the use of respectful intervention in people's lives and situations 2) the philosophy of ignorance, meaning you should never assume you know the needs of the people you are working with 3) listening attentively to what people tell you and respond appropriately (O'Brien, 2014). CCT places an emphasis on providing a quality service that is not only true to the Servol philosophy but responsive to the needs of their cliental. They initiated this piece of research hoping to gain an insight into the experiences of former users of their service in order to be able to better support the long-term desistance from crime.

## Part Three

### 3.1 Introduction

Part three of this review will provide the reader with a background summary of some of the available literature surrounding drug and alcohol use and recovery. It will begin by outlining recidivism rates both nationally and internationally before going on to examine drug and alcohol trends in Ireland and abroad. It will finish by analyzing the different policies and practices surrounding reintegration and recovery.

### 3.2 Recidivism Rates from the Irish Probation Service

The most recent national statistics on recidivism rates in Ireland was published by the Central Statistics Office (CSO) (2016) and is based on the statistics of re-offending behaviour or 'recidivism' in 2010 in Ireland. For this report recidivism was defined by the CSO (2016, p1) as "offenders with a recorded offence within three years from exiting prison". It should be noted that most sex offences and offenders and many road traffic offenders are not taken into consideration for this study. These statistics are gathered from An Garda Síochána's Police Using Leading Systems Effectively (PULSE) system and

the Probation Service's Case Tracking System (CTS). A review carried out by the CSO also noted that not all offences that were reported to An Garda Síochána were recorded on PULSE, therefore adding a restraint to the exact accuracy of these results. It is difficult to discuss recidivism without discussing desistance. In line with The Irish Prison Service's definition (2013, p17) desistance in this paper refers to an "extended period of refraining from further offending".

The aforementioned study looked at offenders who were granted either a probation order or community service order and who had been convicted of their first crime in 2010. The figures showed that 37.5%, a marginal increase of .2% from the 2009 cohort, of offenders had re-offended within a three-year period. This percentage was then investigated further and broken down into different variables per gender, age, location, type of offence committed etc. For this paper, I will extract the data relevant to male offenders as this research is based upon male adult offenders who have attended CCT. Upon closer inspection, the CSO found several differences in statistics when cross referenced against these demographics.

The results relevant to adult male offender showed that males re-offended at a rate of 38.5% over a three-year period (CSO, 2016). Furthermore, the report puts forward that younger males, 18-24 years, have the highest recidivism rate of re-offending at a rate of 44.1% an increase on the previous year's cohort (41.6%). Additionally, 48% of male offenders over the age of eighteen re-offend within twelve of receiving a referral to the probation service (CSO, 2016). Considering the data from both 2009 and 2010 cohorts while there is a slight increase overall in recidivism typically recidivism rates have remained the same over the two years i.e. not increased >1%.

### 3.3 Recidivism Rates from the Irish Prison Service

The Irish Prison Service released data on recidivism rates of prisoners released from prisons in 2007. It was found that male prisoners had a total recidivism rate of 63% over a three-year period and 51% were convicted in the first twelve months. This is significantly higher overall than the Probation Service cohorts but similar in terms of when the reoffending occurs. The offender's age followed the same trend as within the probations service with the younger cohort of 18-24 year olds having a reoffending rate of 68% (Irish Prison Service, 2013).

While both studies are not directly comparable due to a difference in time data was collected, three key findings remain consistent across both agencies. These include

1. The rate of recidivism appears to decrease with age.
2. Males are more likely to re-offend than women.
3. Of those that did re-offend the majority did so within the first 12 months.

### 3.4 Recidivism Globally

To assess Ireland's recidivism rates, we must look at how we rank globally. Fazel *et al* Wolf (2015) in their review of worldwide recidivism rates put forward that it is not possible to get an exact comparable review. This is in part due to the differences of collecting data, whether data is collected by the country, what that country defines as recidivism and how regularly recidivism data is collected. For this comparison I will present data from Northern Ireland.

The Department of Justice (NI) carried out an investigation on recidivism rates from 2012 to 2013. The purpose for including Northern Ireland in this paper is their definition of recidivism as

“Offenders who received a non-custodial disposal at court, a diversionary disposal or were released from custody during” ([justice-ni.gov.uk](http://justice-ni.gov.uk), 2017)

As this definition is comparable to Ireland's definitions of recidivism it will be used to compare offending statistics. According to the Department of Justice 19% of adult males had reoffended within twelve months of the initial offence. This study combined both offenders in receipt of probation type orders and custodial sentences. However, the combined data remains much lower than the Irish comparative of 48% (CSO, 2016) and 68% (Irish Prison Service, 2013). Similarly, to Ireland, Northern Irish offenders being released from custodial sentences have the highest recidivism rates and similar trends of desistance with increasing age apply. The data across both studies suggest that custodial sentences are not conducive to promoting desistance.

### 3.5 Substance Misuse Trends in Ireland

It is widely accepted that drug use became a problem in Ireland in the late 1970s when the drug trends shifted towards a drug injecting culture (Quigley *et al*, 2013). Additionally, the drug culture appeared to be confined to lower-socioeconomic areas of Dublin before reaching other parts of Ireland (Health Research Board, 2016). A recent study was carried out by the National Advisory Committee on Drugs and Alcohol (NACDA, 2016) and Department of Health (NI) for the years 2014/2015. This study reported 30.7% of Ireland's adult population admit to using an illegal drug in their lifetime, 7.5% have used in the past year and 4% have used in the past month ([health.gov.ie](http://health.gov.ie), 2016). This is almost double the findings of the 2011/2011 survey carried out by the same agency which reported an 18.5% lifetime usage rate. These statistics suggest that drug use, while being prevalent for near fifty years, is growing rapidly in Ireland. Alcohol was the major substance used by Irish people with a reported 82.8% reported having consumed alcohol at some point in their life and a further 62.1% having had alcohol in the past month. These findings suggest that substances inclusive of alcohol are very much a part of Irish society and, much like recidivism trends, substance misuse is more frequent among the younger population (NACDA, 2016).

Heroin reported as having the smallest lifetime usage rate of 0.9% in 2014/2015, however, this is still a growing concern with nearly double the results found in the 2002/2003 survey (.5%). What should be noted is the much higher prevalence rate of 'any other opiate' which reports a 63.8% lifetime usage rate. The NACDA (2016) does not provide what constitutes as 'any other opiate' but does provide that the term includes products containing codeine. As products containing codeine are still available from pharmacies, without a prescription, it is not clear how much of this usage could be considered illicit.

The limitations of self-reported illicit drug use have long been established with the main limitations identified as the negative social stigma associated with illicit drug use and the difficulties in accessing illicit drug users to collect such data. This often results in underreporting of use, especially heroin, (Harrison *et al* Hughes, 1997).

While the NACDA's (2016) report found that heroin use only effects a small minority in Ireland, >1%, the 2015 statistics from the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) shows that Ireland has one of Europe's highest rates of overdoses (HSE.ie, 2017) with approximately one person dying from drug poisoning every day. Considering this comparison, it suggests that Ireland's illicit drug use is much higher and much more detrimental than what is reported in the NACDA 2016 report.

### 3.6 Alcohol Trends in Ireland

Alcohol consumption in Ireland has long been a topic for discussion. In 2016 the alcohol consumption per capita was 11.47 litres of pure alcohol in Ireland, an increase of 4.8% since 2015 (Long *et al.*, 2014). In 2015 the consumption per capita in terms of products available were broken down to 41 litres of vodka, 116 bottles of wine or 445 pints of beer (Long *et al.*, 2016). However, when you consider that one fifth of the Irish population report complete abstinence from alcohol (Long *et al.*, 2016) the actual consumption per person is much higher. The World Health Organisation defines harmful drinking as;

“as a pattern of alcohol use that is causing damage to health, and the damage may be physical (as in cases of liver cirrhosis) or mental (as in cases of depressive episodes secondary to heavy consumption of alcohol)” (World Health Organisation, 2014, P13)

More than half of adult Irish drinkers are considered harmful drinkers, that is a staggering 1.35 million people in Ireland and 6.9% of the drinking population scored positive for alcohol dependency in 2013 (Long *et Mongan*, 2014). Similarly, to Ireland's recidivism and substance misuse rates the younger population, of 18-24 years, were more at risk of developing a dependency as 14.7% of this age category were classified as alcohol dependant (Long *et al.*, 2014).

Heavy, or harmful, alcohol consumption is not just detrimental to the individual themselves i.e. increased physical and/or emotional consequences, but has a damaging effect to the other individuals and their wider society (Sacks *et al*, 2013).

The WHO (2014) put forward that harmful drinking effects the individual in three ways;

1. Damaging effects on organs and tissues i.e. damage to the person's health,
2. Intoxication which results in the person's behaviour, cognitive ability, consciousness and physical coordination being negatively affected and,
3. Dependence i.e. the individual is no longer in control of their alcohol consumption this may lead to impaired behaviour.

Harmful drinking can affect other individuals e.g. Families by using financial means to acquire alcohol. If the individual is responsible for the means of others this may diminish the availability of financial support being granted to other areas e.g. clothing, groceries etc (Schmidt et al., 2010; De Silva et al., 2011, as cited in WHO, 2014). Intoxication, withdrawals of and dependency often leads to performance impairment in "major social roles" such as work performance, parenting abilities and relationship roles. This can directly lead to relationship breakdown or separation or damage to the individual's mental health (Schmidt et al, 2010, as cited by WHO, 2014, P14).

The harmful use of alcohol has a significant effect on the larger society mainly by 'burden of disease' and the economic costs associated with it (WHO,2014). Burden of disease is defined as;

"the gap between current health status and an ideal situation in which everyone lives to old age free of disease and disability. Premature death, disability and risks that contribute to illness and injury are the causes of this health gap." (WHO, 2014, P17)

In 2013, alcohol related deaths accounted for three people every day, two of which were as a result of alcohol related illnesses or disease and a significant 25% of young person's (15-39years) deaths were attributed to alcohol (Alcohol Action Ireland, 2017).

In terms of economic costs, per the National Alcohol Survey 2013 reports unemployed people were twice as likely to be alcohol dependant and 1.4% admitted being let go from their employment as a direct result of their alcohol use. Mongan *et al* (2016) write that by applying that figure to the live register figure in November 2013 it is possible that up to 5,315



people were in receipt of social welfare as a direct result of losing their income due to alcohol use.

### 3.7 Reintegration and Recovery Policy in Ireland

To gain insight into how policy change can reduce the rate of re-offending in Ireland we must first consider why people initially offend. Considering the Irish research put forward it is fair to conclude that there is a significant link between substance misuse and offending behaviour and high recidivism rates. The Irish Penal Reform Trust (IPRT) in 2010 released a report entitled “*It’s like stepping on a landmine...*” a study on the reintegration of prisoners in Ireland. This report looks at key difficulties and struggles people being released from prison face in stabilising their lives and turning away from anti-social and unlawful behaviours. This study was undertaken over a five-month period and involved a literature review, interviews with statutory and non-statutory bodies, service providers across the nation undertook a questionnaire and two focus groups were carried out from ex-prisoners from the Dublin area.

In short the study found that there was no national or standard programme for preparing prisoners for release. The Irish Prison’s Integrated Sentence Management (ISM) is an initiative set out for prisoners who are within twelve months of release to start planning for their release by developing skills and engaging with outside services that will help support and guide the prisoner upon release ([irishprisons.ie](http://irishprisons.ie), 2017). However, this initiative is only available to prisoners serving twelve months or more, consequentially serving only 30% of the entire prison population (IPRT, 2010). Additionally, the IPRT (2010) found that many short-term serving prisoners were only granted a few hours’ notice of their release, were being released at the weekends when services were limited and were not provided with accommodation or health services when released. Possibly the most relevant findings of the report for this study were that of the IPRT’s recommendations that more psychological treatment such as substance misuse treatment and services for engaging prisoners to transitional supports such as community organisation that can be accessed in their own communities were required (2010).

Illicit drug use and alcohol misuse is not just problematic with the offending population. Valkow *et al* (2016) write that marijuana smokers who smoked during their brain development stage, birth to 21 years, can often be subject to adverse effects on the brains development. This often results in the person developing a lower IQ, having educational difficulties and/or social problems. Furthermore, Patton *et al*, (2002) writes that regular marijuana smokers are more at risk for developing depression and anxiety disorders. Considering that cannabis, or marijuana, is one of the top three illicit drugs available in Irish prisons and is the highest-ranking lifetime use substance in Ireland (NACDA, 2016), especially amongst Ireland's younger generations, more treatment options and early interventions programmes are necessary to reduce the use of cannabis in Ireland.

### 3.8 Irish Penal Policy on Supporting Recovery

The link between substance misuse and recidivism rates has been well documented (Probation Service, 2011, Bennett and Holloway 2004, Budd *et al* 2005, Connolly 2006 as cited by Clarke *et al*,. 2016). Clarke *et al* (2016) writes that the Probation Service and the Irish Prison Service (IPS) both recognise the problematic relationship between addiction and high recidivism rates. As a result of the aforementioned reviews of substance misuse and recidivism rates in Ireland more focus and funding was allocated to treatment programmes in Irish Prisons. In 2015 the IPS and Probation Service requested an independent review of the effectiveness of these new programmes. The results of this review is as provided below.

The Probation Service and IPS have adapted an international best practice model of mixed methods. This includes in-prison detox, methadone maintenance programmes, group and individual counselling, harm reduction and relapse prevention. While there is limited data available on the effectiveness of these new supports to prisoners it is projected that 70-100% of those who attend in-prison detox programmes will complete the program, 60-80% of people attending ongoing treatment will complete it. Additionally, it is forecasted that of people attending various types of addiction treatment opportunities a third will acquire complete abstinence, a third will manage their addiction safely and a third will relapse (Clarke *et al*,. 2016).

These statistics show improvement on Irish penal policy in supporting prisoners overcome addiction and the provision of new services are welcome to Irish prisoners the review carried out by Clarke *et al*, (2016) further identified other shortcomings in addiction services in Irish Prisons. These include, but are not limited to;

1. There is a focus on illicit and drug usage rehabilitation. As alcohol is reportedly not available in Irish Prisons prisoners are forced to undergo detox when they are admitted. However, not much focus is given to the underlying issues causing harmful alcohol intake or dependency.
2. The main treatment focus is on opiate addiction however more prisoners are presenting with benzodiazepine and psychoactive ('headshop') misuse problems.
3. Many prisoners are presenting with dual-diagnosis i.e. mental health issues co-existing alongside alcohol and/or substance addiction. Treatment options available from the prisons does not provide dual-diagnosis options.
4. The use of positive peer support within Irish prisons is not utilised.

(Clarke *et al.*, 2016).

While the focus on the offender's needs is a positive step for rehabilitation in Irish Prisons this data shows that treatment options available are still not reaching all the needs of the prisoners. This literature suggests that more research must be done on evidence based practice to best serve the offenders needs e.g. dual-diagnosis therapy. A recurrent problem in this review against the previous reviews is access to these therapies. While it is acknowledged that further treatment provisions are offered as a whole in The Irish Prison Service not all prisons are offering the same services or treatment options. That suggests that not all prisoners have access to treatment that may help support them in their recovery and consequentially desist from crime when released. Clarke *et al* (2016, p. 70) puts forward that one solution to the 'equity of access' dilemma is to provide a central unit but acknowledges that prisoners may not wish to transfer locations and the development of a central unit may take the focus from developing treatment opportunities in all prisons. Furthermore I would

argue that the development of a central unit may limit families having access to prisoners due to transportation or distance issues.

# Chapter Four: Findings and Discussion

This chapter will be delivered in three separate parts in order present the findings all three parts of the project.

**Part One:** The Founder's Project

**Part Two:** The Past Participant Study from a criminological perspective

**Part Three:** The Past Participant Study from a substance misuse perspective

## Part One

### 4.1 Introduction

This chapter will present and analyse the primary research findings gathered from interviews with the founding members of Churchfield Community Trust services. A vast number of themes emerged from the data; therefore, it is not feasible to discuss each of them in detail. This chapter will focus on analysing the three most prevalent themes and discuss them under their corresponding research question in relation to relevant literature. To protect the anonymity of the participants involved, they have been assigned pseudonyms.

Figure 1: Key Findings



## 4.2 Research Question One: What were the founder's experiences of grassroots activism and their original vision for CCT?

This section of the analysis aspires to provide the reader with an awareness of the lived experiences of grassroots activism and the founder's initial vision for CCT. Grassroots Community Development can be described as a 'bottom up' activity carried out by individuals or groups who 'seek to effect change within or beyond community' (Forde *et al.*, 2015, p. 81). The objective of this research question is to identify key factors involved in the initiation of the project as narrated by the founders and whether their experiences are relevant to the revised literature.

### 4.2.1 Identifying the Needs in the 'North Side'

Prior to the grassroots development of CCT taking place, it had been determined by the three congregations involved that the north side of Cork City was an area that would benefit from increased support:

*“We knew the area was a rapid area and there were statistics there at the time there was massively high unemployment numbers and there was drug use and criminality was very high in this area here. And there was need to support and help the community in that sense” (Gavin).*

*“They (the three congregations) identified Cork, north side as it seemed to have a need. Now the huge need was among young people, teenagers, maybe something like the ones that I was concerned about and that they felt that they would like to set up a project to support these young people” (Noel).*

When recalling the early days of CCT, all seven of the founders outlined the necessity of identifying the principal need for youths in the north side of Cork City at that time. Ife (2013, p. 139) describes the value of local knowledge as an ‘essential component of any community development work’, best described as ‘the community knows best’. Susan, Paul and Sean voice their recollections:

*“We did what you call a listening survey, so we went around to every single institution and we asked the people just one question, what do you think is the greatest unmet need in this place?” (Susan).*

*“We spent about three months listening and chatting to people and one of the things we decided to do to make contact with young people, was we went to the chapel field because that was where everybody gathered at night” (Paul).*

*“I started chatting to him and a few more of them came around and we got quite friendly and we used to go over then every evening and chat away to them, So it was a case of getting chatting to them gradually, didn’t tell them anything just that we were new around” (Sean).*

#### 4.2.2 Providing a Safe Place for Young Adults ‘Falling through the Cracks’

Subsequently, the project was introduced to the young people in the Churchfield area, following the identification of the most apparent need. This need was to provide support for early school leavers as a means of intervening and reducing the risk of them becoming involved in criminality and antisocial behaviour:

*“They were people really who were falling through the cracks and had no safety net at all. This (CCT) was providing a safety net for them at least” (Pat).*

*“Because we were all involved in teaching, we were all conscious of young people falling out” (Susan).*

*“They were coming into a safe place; where they were respected. They were coming into a place where people would listen to their problems and make an effort to try and support them at whatever stage they were in in their lives” (Gavin).*

Research carried out by De Roiste *et al.*, (2005) on behalf of the Office of the Minister for Children and Youth Affairs, discovered a striking number of early school leavers as being ‘barred’ from facilities within their communities. This resulted in them becoming unmotivated with little to do only ‘hang around’ (cited in Minister for Health and Children (2007, p. 79). In these quotes above, the founders expressed similar concerns for the young people as:

*“They (the young people) had gone through youth reach and all of that and they had been pushed out, more or less thrown out or dropped out of that. They were out of everything and we didn’t want to just let them down again with a bang” (Paul).*

#### 4.2.3 From the Classroom to the City; ‘Everyone was Learning’

The Federation for Community Development Learning in the UK provides a list of values associated with community development. These values include collective action, community empowerment and the people within all working and learning together (Forde *et al.*, 2015, p. 14). All seven of the founders including Sean, Susan and Kevin (all teachers), expressed how they were all working within new territory of justice issues, but outlined the significance of all learning and acquiring new skills and knowledge:

*“They were under a lot of pressure themselves, they were going nowhere, and their lives were going nowhere and it was like finding ourselves out in the wilderness with them, were we going nowhere too” (Susan).*

*“We were in different spaces but we were all growing. And that was what was important” (Sean).*

*“Initially we had the three religious orders living together and working together. All as you say teachers who had come up through the educational system and really were at sea” (Kevin).*

Collectively, the founders expressed the difficulties involved in working with these young people as result of all coming from a traditional teaching background which involved rules, regulations and strict routines that had to be adhered to:

*“The three of us were coming into this out of the classroom and you know the classroom was built on discipline, structure and this was the direct opposite” (Susan).*

#### 4.2.4 Discussion

These findings illustrate some of the undertakings carried out by the founders’ in the initiation period of CCT. Yerbury (2012) describes community as beginning with the



individuals involved. This is apparent in this research as it is noted that the founders made huge efforts to identify the major needs of the young people in the north side of Cork City at that time. These findings correlate with the research carried out by Yerbury (2012) on young people's attitudes of community. Community development has been illustrated as a 'preventative approach that anticipates issues and situations and seeks to address them before they turn into problems' (Forde *et al.*, 2015, p. 11). This preventative approach is evident in the analysis of the data as the founders aimed to provide a safe and enriching environment to decrease young people's risk of becoming involved in criminality. All seven of the participants had similar experiences in relation to the grassroots of CCT. The motivations, values and principles that underpinned the founders' vision will now be discussed in research question two.

### 4.3 Research Question Two: What were the motivations, values and principles that underpinned the founder's expectations for the project?

"Any community worker will approach the task with a set of personal values, in addition to those that 'come with the job' (Ife, 2013, p. 370). This research question was directed at discovering the motivations and explicit values and principles that underpinned the founder's concept of providing a service for young people in the Churchfield area.

#### 4.3.1 Faith and Spirituality as a Motivation

*"The main motivation was to get back in touch with our founder's spirit and they were the people who addressed the most urgent needs at that time and we said well what were the most urgent needs of our time, and how can we address them?" (Pat).*

*"For us it was a faith journey, I would want to say that too and there was a belief for us that somehow that if it was meant to be it would happen, despite all the difficulties" (Susan).*

All seven of the founders interviewed consistently referred to their faith and their ethos' as being fundamental in their motivations for the grassroots of CCT. The above quotes relate strongly to Rice and Nagle's philosophy of devoting their lives to the material interests of young people in Ireland (ERST, 2016) and educating the lives of impoverished young people in their communities (Presentation Sisters Union, 2015).

#### 4.3.2 The SERVOL Model

The significance of the SERVOL model within the project was unanimous amongst all seven founding members'. This philosophy derived from the West Indies and it is still being utilised in organisations such as youth training and education centres and prisons (Pantin, 1992, Montrichard, 2004, Healy, 2012). All seven of the founders commented on what the SERVOL model meant to them:

*"The SERVOL thing is that you don't go in with any fixed agenda. You go in and see what their needs are" (Paul).*

*"The approach was if you were going to help people, you should not be going in with a bag full of solutions; you shouldn't be going in there with your standards and trying to bring them to your standards. There was the philosophy of ignorance, there was attentive listening and respectful interventions and that's really what made this programme different" (Gavin).*

*"The SERVOL philosophy was working right through, get them to do it, get them involved anyway, and get them consulting on how things are done, that very important. It's also a very respectful approach; you don't come in and say I know what is wrong with you, and I know how to cure you" (Pat).*

These quotes are highly comparable to the SERVOL philosophies which include a 'philosophy of ignorance', 'attentive listening' and 'respectful intervention' (O'Donnell, 2015) and were implemented in CCT from the beginning.

Griffith's (2002) study on past trainees of SERVOL life centres in Trinidad concluded that there were considerable improvements in their behaviours, attitudes and lifestyles of participants while giving them "greater confidence, self-awareness and self-esteem, enhanced their parenting skills and increased their level of tolerance towards others..." (Griffiths, 2002, p.51). More recently, research conducted by Healy (2012) in relation to an educational project for young adults, suggests positive outcomes experienced by students when the three key principles of SERVOL had been employed.

#### 4.3.3 A Sense of Community

Five of the founders interviewed mentioned the focus on community and the significance of providing the young people with a sense of 'acceptance' as well as they, themselves, feeling accepted within a new community of people new to them;

*"We were trying to build a community. It was a sense of belonging where they could feel, 'I can be here and I can be accepted'. Acceptance and trust" (Sean).*

*“The sense of community, and that’s what the whole thing is about and that’s what why the lads are happy because they are a part of a community and the name of it is CCT and even in the name it says trust and it’s about building trust and being a part of the community” (Susan).*

Each founding member discussed the function of various people within the community and their engagement and level of support in CCT’s early years:

*“The Guards got involved (in a soccer tournament), all the community Guards, two of them in particular were extremely supportive” (Paul).*

*“One of our greatest allies was the shopkeeper from just over on the corner shop...it wasn’t just that, she was supportive in whatever we were doing and she was also a liaison person with the local community and once we had her supporting us then you were in. We found acceptance from the beginning” (Noel).*

The above quotes in relation to providing a sense of community are consistent with Doherty (2007, p. 10) and his concept of community, as outlined in chapter three. This concept is consistent throughout seven of the founders’ interviews as they express how significant others within the community were crucial in implementing support in the early years.

#### 4.3.4 Discussion

These findings identify some of the motivations, values and principles that underpinned the founders’ decision to be a part of the grassroots of CCT. The founders were unanimous in confirming their faith and spirituality as a focal point, remaining true to the aspirations of their spiritual founders, Nano Nagle and Edmund Rice. It is clear from the above quotes each founder was committed to providing support and guidance to the young people in Churchfield while employing the SERVOL framework to guide them from the beginning. Five of the seven founding members acknowledged a sense of community as being a major component in the values and principles associated with CCT. The founder’s reflections on the future direction of the project will now be discussed in relation to question three.

#### 4.4 Research Question Three: What are the Founder’s Reflections on the Future Direction of CCT?

This research question as outlined by CCT, aspired to gain an insight into the founders’ personal reflections on the future direction of CCT while considering matters that may need to be revised, as narrated by the founders themselves. All the founding members had observed CCT and several of the everyday activities involved in the weeks/days prior to

being interviewed. Their reflections are based on these observations and their overall experiences of CCT as a reintegration service.

#### 4.4.1 Exceeding Expectations

There is relevant literature available that indicates the significant development CCT has ascertained in the years since its initiation in the early 1990s. All seven founding members expressed their reflections on how the project has ‘exceeded’ all expectations:

*“It’s (CCT) amazing, it would be beyond my wildest imagination” (Susan).*

*“I would say what they have given them is expression to the philosophy way beyond what we could have hoped for or imagined. Oh god, it is gone way and beyond. The conversation we had yesterday with the two guys in the workshop was mind blowing” (Kevin).*

*“I would say it (CCT) has exceeded all of our expectations, that’s what I am feeling” (Pat).*

A review of CCT rendered between 2001-2003 found that “almost two thirds of clients from this period are currently crime free”, along with “over half of those who have completed the programme are currently in full time employment” (Morley, 2003, p. 11). Comparably, the 2009 CCT annual report outlined there were eight key participants within the project. Of those eight, only one client reoffended (O’Brien, 2009). More recent figures show that CCT has worked directly with 168 clients between the years 2008-2014 (64 in 2014) with recidivism rates being as low as two percent (McCartaigh, 2015). The above reflections of the founding members repeatedly suggest the development of CCT is far beyond what they had anticipated during the grassroots of the project.

#### 4.4.2 The Need to Reignite the Link between Religious Roots and the CCT Project

Five of the seven founding members explicitly expressed the need to replenish a well-defined link between CCT’s religious roots and the founding members involved in the grassroots. The three suggestions outlined are discussed below by Gavin, Pat and Kevin:

*“About three or four times a year, I thought this was very good, but the co-coordinator now doesn’t have this now but we would meet with the three trustees. It’s like supervision, well that was our supervision and it was very personal and very supportive and the people who had set up the project who were not on the ground anymore but they were still supportive” (Gavin).*

*“I would like to have received their annual reports, it would have been a good way of keeping me informed, I’m not sure who it goes to now or who is responsible to distribute it, it would be a good thing to do” (Pat).*

*“Looking back to the foundations of Nagle and Edmond Rice, the whole spiritual dimension was always central. We did encourage him (current director of Churchfield Community Trust) yesterday on maybe bringing the staff down to the birth place of Nano Nagle” (Kevin).*

Lillis (2011) believes that experiencing community development in the church and society can aid intervention through empowering and encouraging communities and the individuals within. Replenishing this link between the spirituality and faith embedded in the grassroots of CCT may help re-engage the project with its roots, while acknowledging the work carried out by the founding members due to their personal faith. Molloy (2013) believes it is often in our families, communities and social lives that we experience the most challenging situations that will test our faith. Filling the gap between the two may revive service user’s faith and enhance their belief in themselves and others around them.

#### 4.4.3 The Need for Consolidation and Recalling the Grassroots of the Project

Four of the seven founders expressed the need for consolidation in CCT as it continues to expand and develop at a fast pace. Lillis (2011) acknowledges ‘intrusion’ of state support as being common in community-based organisations based on elements such as funding and money. This results in demands being made of the community that do not correlate with their unique agendas and concerns: “Communities agendas, core concerns, activities, evaluations and processes are their very own hallmark and must not be suborned to the wishes of non-community authorities” (Lillis, 2011, p. 25). Three of the founders express this below:

*“In any organisation you can’t go on and on and on, you could implode so it’s important that you should reach a certain point and consolidate” (Gavin).*

*“We were aware that it has expanded so much so quickly that there was need for consolidation particularly at the financial end” (Kevin).*

*“I would be a bit worried if, and I stress if, the enterprise took over to the point where there wasn’t any time for this safe space in the daily running’s” (Susan).*

Comparatively, this may be achieved by acknowledging the previous quotes from the founders. These include the necessity of reigniting the link between the project and the religious orders through re-establishing accessibility to annual reports and engaging in increased support and communication regarding the foundations of the congregation’s

founders' philosophies. Remaining sincere to the original SERVOL model is another possible means of consolidation.

#### 4.4.4 The Prominence of the SERVOL Model Remains

All seven of the founders were asked if they felt the SERVOL model was still being applied in the running of CCT today. From this, all seven agreed that they had observed or felt the philosophy was still very much embedded in CCT. Susan, Paul and Pat express their explanations below:

*“Certainly, I would say I was very conscious of it (SERVOL) in Ballyvolane and I was very conscious of it in Farrinferris and when I was meeting the lads today I got a sense that they were happy to be there” (Susan).*

*“It (SERVOL) was a care programme in St. Lucia and as they have gone, I think this (CCT) would fit in perfectly with them. It has developed into much more structured, answering the need that was there. They’re still answering the need. The need was for these people and the clientele changed somewhat by aiming at the need” (Paul).*

*“I think they are yes and they’re doing it consciously, it’s not just by accident, and it is still there I even heard them mention it” (Pat).*

These comments correlate with CCT’s most recently available annual report (2015) where SERVOL is addressed as being their core philosophy and ‘one of respectful intervention in people’s lives and situations’ (O’ Donnell, 2015, p. 3). Due to the sustained use of SERVOL, CCT provide educational programmes designed to help a marginalised group in society to ‘take charge of their lives’ through the process of empowerment (ibid.)

#### 4.4.5 Discussion

The prominence of the congregations and their faith and spirituality in the schedule of the initiation of CCT is something that was pronounced in the findings. Achesson (2005), Inglis, (2008) and Martin (2013) discuss the decline and change of the role of the Catholic Church in social policy and welfare state in Ireland in recent years. Nonetheless, the position of the members of the congregations involved in the initiation of CCT is embedded in its history and warrants continued comprehension in the future progression and development of the project. The need for consolidation can be related to reminding community partners of the

grassroots development of CCT and the significance and main objective of providing a non-judgemental and supportive reintegration service for ex-prisoners.

## Part Two

### 4.1 Introduction

Part two of this chapter will present and analyse the primary research findings gathered from interviews with eleven former users of Churchfield Community Trust services from a criminological perspective. A vast number of themes emerged from the data; therefore, it is not feasible to discuss each of them in detail. This chapter will provide an overview of all the themes in the form of a diagram. But, will focus on analysing the three most prevalent and discuss them under their corresponding research question in relation to relevant literature. To protect the anonymity of the participants involved, they have been assigned pseudonyms.

#### Figure Two: Demographic Profile of Past Participants

This section offers some significant facts regarding the final sample. The information is based on details provided by the participants and is presented in the following format to protect their identity

##### Age Category of Participants

<b>20-30</b>	<b>4</b>
<b>31-40</b>	<b>4</b>
<b>41-50</b>	<b>3</b>

##### Avenue of Referral to CCT

The Probation Service	3
A Treatment Centre	3
Another community service	1
Self-referral or through a friend	4

**Time of Last Substance Use**

Still use occasionally	3*
Under a year	2
1-5	5
6-10	1

**Number of Years since being a Client of CCT**

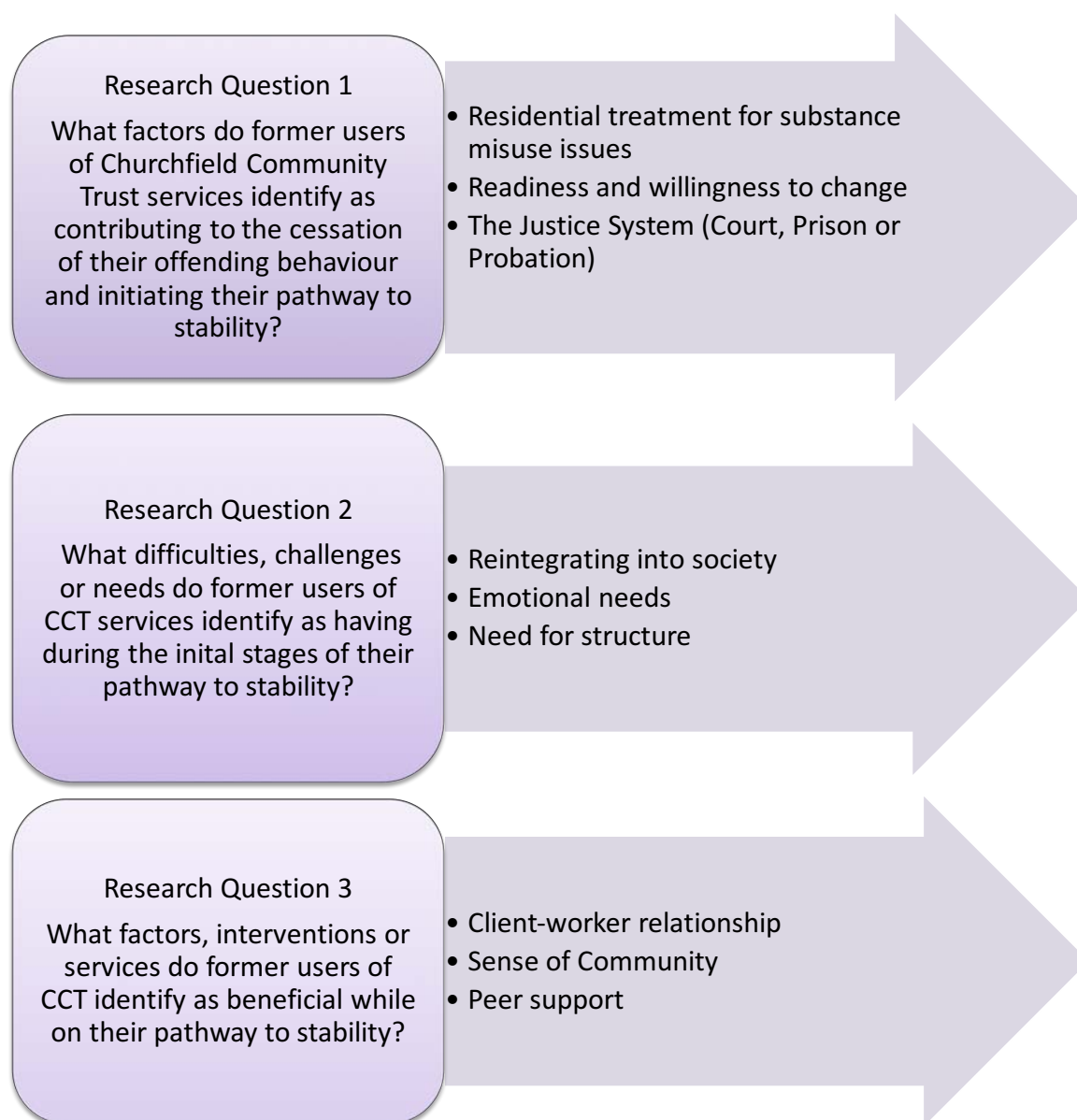
Under five years	3
5-9	5
10+	3

**Number of Years since Last in Custody or Prosecuted for an Offence**

Under five years	3
5-9	4
10+	3
Unknown	1

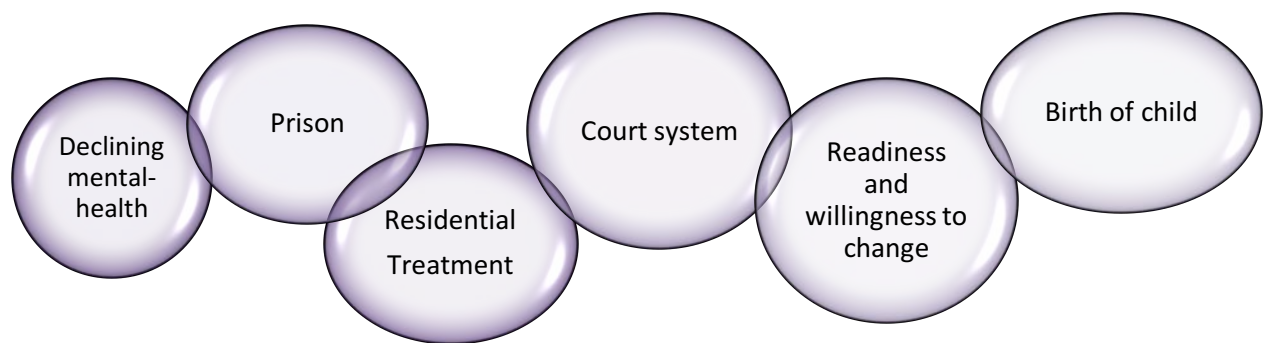


Figure 3: Overview of Key findings from a Criminological Point of View



## 4.2 Research Question One: What factors do former users of Churchfield Community Trust services identify as contributing to the cessation of their offending behaviour and initiating their pathway to stability?

Figure 4: Summary of Themes



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### 4.2.1 Residential Treatment and Substance Misuse

Existing literature illustrates an apparent link between crime and substance misuse. Research confirms a high prevalence of substance misuse issues among the offender population (The Probation Service, 2012; Drummond *et al.*, 2014). Findings arising from this study support this phenomenon, ten out of the eleven interview participant's spoke about spending time in residential treatment to address their substance misuse issues on at least one occasion. However, seven respondents specifically identified treatment as a factor that contributed to the cessation of their offending behaviour.

*"When I was in treatment, it made me think of the things I had done ... it made me realise what I was doing and what I had done to people when I was drinking and drugging"* (Kieren)

Substance misuse is considered a criminogenic need, which if addressed can reduce an individual's risk of reoffending (Farrow *et al.*, 2007). Interestingly, all eleven participants resonated with this literature and stated that their offending behaviour as an adult was directly linked to their substance misuse, with some disclosing they have desisted from crime since being in recovery.

*“I have been in prison numerous times. I have been in and out of prison all my life since I was a teenager...looking back, it was my addiction, but at the time I didn't know what I was doing because I was enjoying what I was doing... I suppose crime was something that came into my life because I needed that in order to survive in my addiction” (Patrick)*

#### 4.2.2 Readiness and Willingness to Change

Seven participants identified a specific time in their life when they became willing to make a change. They spoke of countless attempts by loved ones and professionals to help them prior to that point; however, they described their efforts as meaningless as they didn't feel ready themselves.

*“It didn't matter where I went, which treatment centre I went to, which jail. Until I was ready to stop inside it wasn't going to happen. People tried scare tactics, everything...it's not going to happen until you make that decision” (Ross)*

While some detailed reaching a point of desperation before making the decision they wanted to change, all seven identified feeling a sense of readiness within. Steve spoke of “*hitting rock bottom*” and “*losing everything*” before developing that willingness.

*“it took my family turning their back on me, running out of money, ending up in Simon...that was it for me like, I lost everything” (Steve)*

*“... my first attempt on my life didn't stop me using. The second attempt on my life, that didn't stop me using...but there came a point where I became willing and I wanted help and it was the first time in my life that I wanted genuine help and I went into (name of treatment centre). I had no charges; I just did it for myself...I made that choice myself and then I knew it was time for change in my life” (Patrick).*

#### 4.2.3 The Justice System

Five participants identified Prison, Court or the Probation Service as a contributing factor in initiating their pathway to stability. Steve spoke especially highly of Prison and described it as a safe haven from his chaotic life on the outside;

*“Prison was one of the best experiences of my life...I was safe, I knew I couldn't stop using on the outside. I was an intravenous user at the time. I could not stop using, so it got me clean and I started to feel alive in there. I didn't want to be anywhere else, I was happy inside there; I knew that the badness was going to stop” (Steve)*

A few participants mentioned Probation supervision and the impact that had on their recovery; however, mostly Probation was viewed as a channel for accessing residential

treatment or as a link to other services. Two participants perceived the Probation Service solely as an avenue for funding for educational courses.

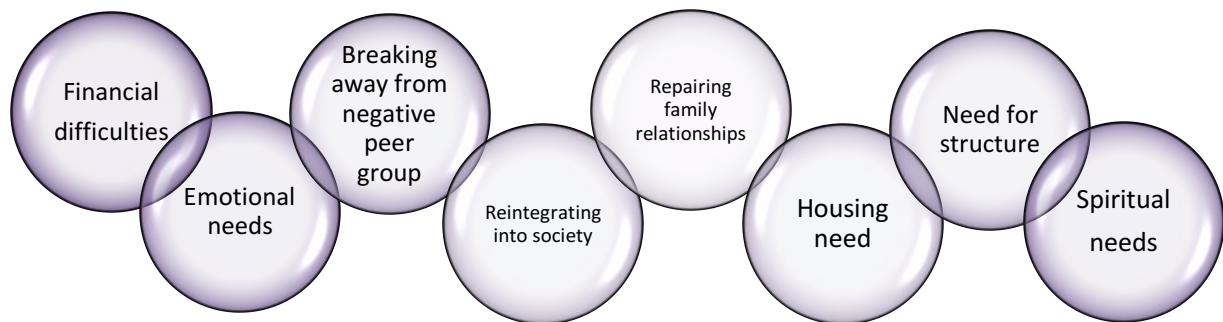
*“Ya my Probation Officer is very nice, I like her. She’s helped me out with an awful lot. She brought me to treatment like” (Joe)*

#### 4.2.4 Discussion

It is interesting to notice the link between the above findings and some of the theories on desistance. The readiness and willingness to change described by seven participants can be compared to Cromwell *et al* (1991) desistance theory which not only identifies the importance of making a decision to stop committing crime but also maintains that this decision must come from within and not be imposed by an external source. Some mentioned coming to this realisation as a result of the birth of a new child and others spoke of making the decision following a failed suicide attempt. Although very different reasons, one could assume the participants developed this readiness as a result of re-evaluating what’s important in life, thus supporting Clarke and Cornish’s (1985) desistance theory. Clarke and Cornish (1985) argue that desistance is impacted by processes of volition and choice. They maintain that desistance from crime is strongly influenced by factors such as not wanting to return to prison and the reassessment of what’s important in life (as cited in McNeill *et al.*, 2012). Findings arising from this research draw many similarities with existing literature on desistance. However, participants described making the decision to change in relation to their substance misuse and not their offending behaviour. For those who mentioned the justice system as a contributing factor in initiating their pathway to stability, it was in the context of supporting their recovery from substance misuse. For all participants, it seemed substance misuse was their primary concern and their offending was secondary.

### 4.3 Research Question 2: What difficulties, challenges or needs do former users of CCT services identify as having during the initial stages of their pathway to stability?

Figure 5: Summary of Themes



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#### 4.3.1 Reintegrating into Society

Eight participants described the difficulty of reintegrating into society following a stint in prison or residential treatment. Many mentioned the challenges they faced carrying out everyday tasks such as cooking, cleaning or shopping. Joe described himself as “institutionalised” as a result of being in prison from a young age. He provided an account of some of his struggles following his release from prison after serving a lengthy sentence;

*“Talking to people, sitting down here like this talking to you like. If that was back then I’d be up the walls, I would have found it hard to do that. Going into shops and buying clothes and spending money. I didn’t know how to do that...I couldn’t do nothing really like. Even stopping at traffic lights and cars passing... Because in prison it’s a different environment” (Joe)*

Tim describes one experience he had when he first came out of treatment after detoxing from methadone and benzodiazepines.

*“I went in to buy a pair of runners and there was two people in the queue and I was fucking paranoid out of my head. It was my first time being clean and sober. It was my first time dealing with this shit in about 15 years. And I didn’t know how to live, I didn’t know how to act around people” (Tim)*

Three participants specifically mentioned the difficulty of learning to take responsibility. Ross’s experience is indicative of all three.

*“The only problem with being clean is now I can say Jesus it was easy stopping the drugs, it was changing all the other things that was the hard thing. The behaviours, taking short cuts in life. Taking the easy option...when I was using, I had no responsibility. I didn’t have to take responsibility. All I had to do was get drugs. The hardest part about it is the continuous taking responsibility” (Ross)*

#### 4.3.2 Emotional Needs

Seven participants spoke of being in an especially vulnerable position in the initial stages of their pathway to stability. Some described feeling particularly stressed, others remembered feeling confused, sad or upset. A few participants mentioned feeling quite alone and unsupported during that time, either due to family breakdown or as a result of having to distance themselves from many of their peers.

*“When I was in (name of treatment centre)...every night I was crying. Every single night thinking of the things I’ve done...without the drugs all my feelings came back and I couldn’t handle it” (John)*

Patrick found that one of the biggest challenges he faced was that the expectations from his loved ones were too high causing him particular distress during the early stages of his recovery.

*“I come out of a treatment centre and the person closest to me may think oh Jesus he’s grand now, but far from it junio?...Like a lot of people coming out of treatment, they are starting to change but the family remain the same and that brings its own pressure and problems...what I found myself was the expectation was massive on me” (Patrick)*

#### 4.3.3 Need for Structure

Findings arising from this study are consistent with existing literature which stipulates that the dependence on structures and regulations in prison can develop an overwhelming need for structure on release (Haney, 2001). Nine participants mentioned the value of structure during the early stages of their pathway to stability. Some referred to the importance of following a structured programme, while others simply spoke of the significance of having a positive daily routine. All nine participants felt CCT were responsible for providing the structure they needed at that time. Gavin and Patrick both spoke about the role of CCT in their life;

*“...it got me out of the house, gave me something to do. Kept my mind occupied. Gave me the motivation to get out of bed” (Gavin)*

*“I suppose I was in a treatment centre and when I came out I was looking for structure in my life and CCT provided me with that structure...I had a daily routine, it suited me like...it was great because it made me get up in the morning and I had somewhere to go” (Patrick)*

Ross agreed that CCT offered him the structure he needed during the initial stages of his recovery; however, he described feeling vulnerable again once finishing the programme as he suddenly no longer had that structure.

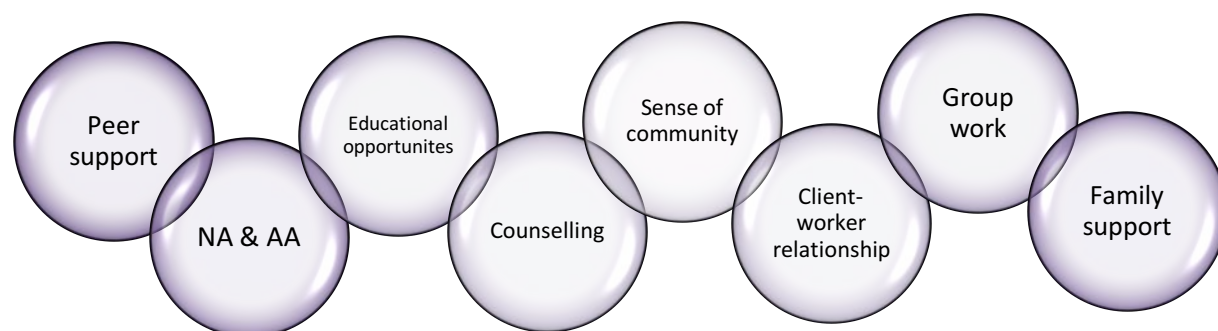
*“When my CE scheme was up, that was it...I never planned for going ahead...you need something to step into next” (Ross)*

#### 4.3.4 Discussion

Both the literature and the findings arising from this study suggest that the very nature of the prison system fails to prepare individuals for release. Maruna (2001) maintains that the isolation associated with imprisonment creates a sense of disempowerment and can result in an inability to self-regulate on release. This hypothesis is supported by the accounts provided by the participants above. Interestingly, Norway, the country with the lowest recidivism rate adopts a restorative model of justice and has a prison system that focuses predominately on reintegration (Sterbenz, 2014). This evidence confirms the significance of appropriate discharge planning in the successful reintegration of ex-prisoners. However, some participants described the challenges they faced after finishing a residential treatment programme leading you to question whether this environment also neglects the importance of preparing the individual for reintegration into society.

## 4.4 Research Question 3: What factors, interventions or services do former users of CCT identify as beneficial while on their pathway to stability?

Figure 6: Summary of Themes



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### 4.4.1 Client-Worker Relationship

Each of the eleven participants named at least one worker that made a lasting impact on their lives. While most of the workers mentioned were either past or present staff members of CCT; some participants also spoke about Probation Officers, Prison Officers, Counsellors and staff members of other community services. However, regardless of their profession, they all seemed to share similar characteristics; genuineness, interested, understanding, approachable, caring and empathic.

*“When I was having a bad day he’d know and he’d call me over to the side...no matter what I’d done, even if it was bad he’d still talk to me about it” (John)*

*“She’d listen to ya like; she’d always have encouraging advice. She wouldn’t speak down to you, she’d speak to you as an equal” (Ross)*

Tim provided an account of one experience that had a lasting impact on him;

*“He (name of staff member) rang me that night at nine o’clock to see if I was okay. That stood out to me. He didn’t need to take time out of his life to ring me. And when he rang me there was sincerity in his voice and he genuinely meant what he said. That really drove home how much the staff here do care about the person...They go above and beyond the call of duty sort of thing. They don’t need to ring you after work to see if you’re okay...” (Tim)*



Two participants spoke of noticing a negative change in CCT since they first attended the service. Both agreed it is as a result of policy and structural changes within the organisation. One person mentioned the high level of paperwork involved and felt it was taking away from direct work with clients.

*“Things have changes like. I see it like; I see it with the lads. I don’t know how it’s gonna run its course. But the feel when (name of staff member) was there is different to now...So I think it’s lost its human touch” (Ross)*

#### 4.4.2 Sense of Community

Only a few participants mentioned the benefit of the programmes or therapies offered by CCT, the majority spoke about the genuineness of staff, the friendships they made while there and the overall sense of community within the organisation. Many commented on the open-door policy that operates within CCT. All participants spoke of returning to CCT since finishing the programme; some talked about calling in regularly for a chat, while others spoke of returning to receive literacy support or assistance filling in forms.

*“The best thing about CCT is that they welcome people back...they like to see people and how their getting on” (Patrick)*

*“I think it was the welcome I got here. It’s the very friendly atmosphere... there’s a real community spirit here...It’s the family atmosphere I get from here” (Tim)*

#### 4.4.3 Peer Support

Eight participants acknowledged the significance of peer support during their pathway to stability. They recognised the value in learning from their peers and being surrounded by others who shared similar experiences to them. Some cited the benefits of peer support in the context of NA or AA, while others referred directly to CCT.

*“That’s a big part of CCT for me, not even the staff but the clients here. Past and present pass on the information. Passing on their experiences is vital” (Tim)*

A number of participants mentioned the challenge of breaking away from a negative peer group during the initial stages of gaining stability. They described CCT as a positive environment to be in during this time as it inspired new friendships to develop with people who shared similar wants and needs.

*“Every person that I was here with at the time was either clean, getting clean or in the process of all that. So it was a very positive environment to be in” (Matthew)*

*“If he can fucking do it I can as well...I couldn’t tell my ass from my elbow before like, to be honest I was all over the place like and I started copying what other fella’s were doing up there and I stopped hanging around with certain people”(Joe)*

Joe described how he was influenced by others who were further into their recovery than he was and mentioned a mentoring system that occurs within NA.

*“The fellas who were there the longest, good and clean and sober and all that. I was kind of drawn to one or two of them fellas yano...I used to talk to them. And then one thing led to another and they brought me along to a NA meeting” (Joe)*

#### 4.4.4 Discussion

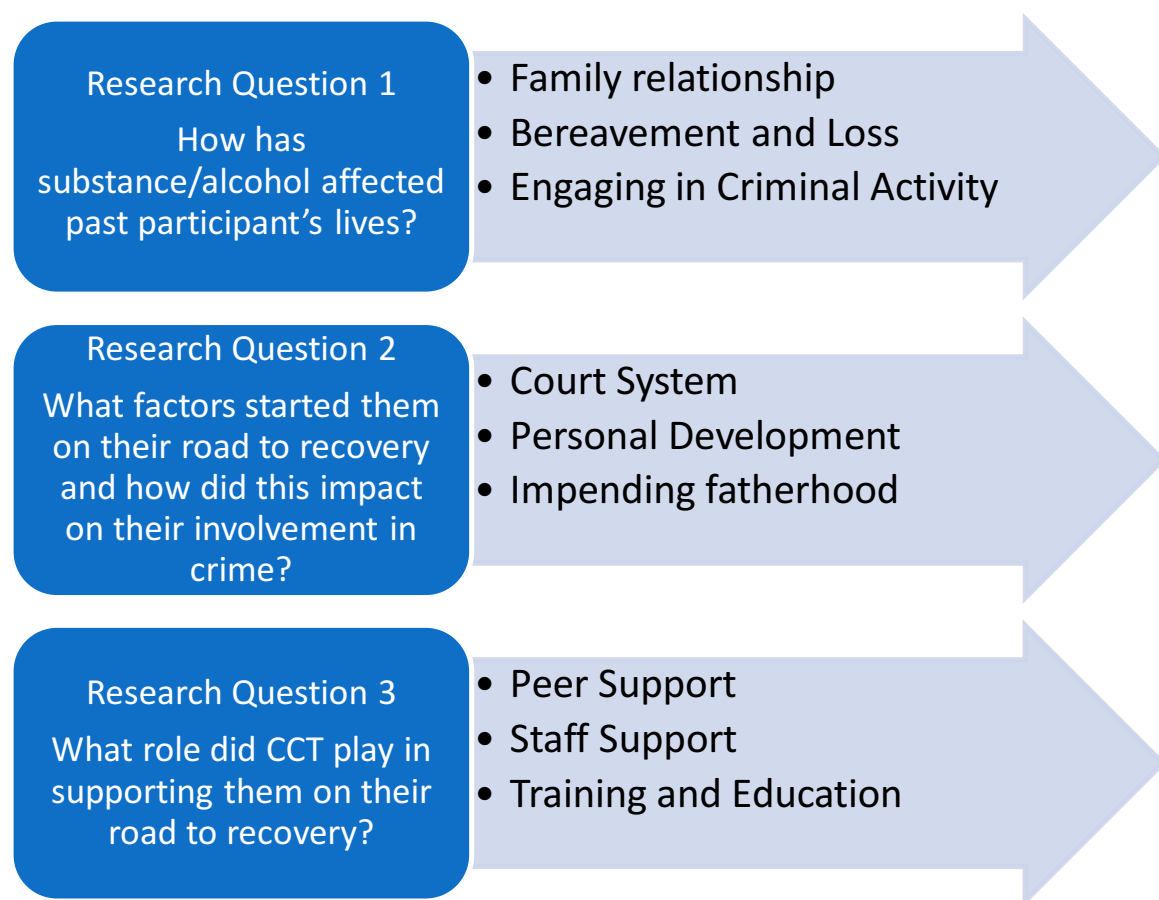
Maruna *et al.* (2012) insist that research on desistance doesn’t necessarily involve investigating the benefit of programmes and interventions but rather aims to explore the dynamic interactions that support a person to secede from criminal behaviours. Interestingly, only a few participants in this study mentioned the benefit of the programmes offered by CCT, the majority spoke about the genuineness of staff, the friendships they made while there and the overall sense of community within the organisation. This finding is consistent with Laub and Sampson’s (2001) theory on desistance which maintains that relationships which are formed for reasons other than crime control are a significant factor in an individual’s ability to avoid offending. All participants mentioned at least one worker that made a lasting impact on their lives. The majority of those spoken about were past or present staff members of CCT; however, some participants referred to Prison Officers, Probation Officers and Counsellors. This indicates that the environment where the relationship is formed is insignificant and that it is the genuineness of the relationship that is important. CCT utilises relationship building to initiate change in the lives of the people they work with. They employ a therapeutic model of intervention based on the philosophy of the Servol model (O’Donnell, 2016). While none of the participants specifically named the Servol approach, they did refer to many of its core principles.

# Part Three

## 4.1 Introduction

Part three of this chapter will present and analyse the primary research findings gathered from interviews with eleven former users of Churchfield Community Trust services from a substance use point of view. A vast number of themes emerged from the data; therefore, it is not feasible to discuss each of them in detail. This chapter will provide an overview of all the themes in the form of a diagram. But, will focus on analysing the three most prevalent and discuss them under their corresponding research question in relation to relevant literature. To protect the anonymity of the participants involved, they have been assigned pseudonyms.

Figure 7: Over view of key findings from a substance use perspective



## 4.2 Research Question 1: How has substance/alcohol affected past participant's lives?

This question was posed in order to give the researcher and the reader a brief background on the use of drugs and/or alcohol in their lives and how this use has affected their lives. CCT works will adult males who have a history of substance/alcohol misuse and/or criminal engagement. This section will look at how family relationships were influenced by substance/alcohol misuse, the prevalence of loss and death experienced by the participants and how substance/alcohol misuse influenced participants engaging in offending or criminal behaviours.

### 4.2.1 Family Relationships

Family involvement is a theme that has emerged from each participant in this study both in terms of relationship break down or as a support during recovery. Family relationship as a support will be explored in the next section of this chapter. Out of the eleven participants eight have identified that alcohol and drug use were prevalent in their families as depicted by Matthew, Tim, Steve, John and Joe;

*"Yeah alcohol and stuff you know. A couple of black sheep and that you know. My uncle was strung out and other uncle alcohol and a couple of family members died."* (Matthew)

*"My older cousin was into drugs, my uncle was locked up for drugs"* (Tim)

*"The drugs were everything and I could not stop. So it was all them things that lead... my family turning their back on me, running outa money, ending up Simon"* (Steve)

Or by family members misuse of drugs/alcohol;

*"And it went onto about 14, 15 then. It was the same thing and then I started seeing bits of Coke on the table then when they were home and I remember tasting it and putting it into my mouth."* (John)

*"My dad is a murder for the drink"* (Joe)

### 4.2.2 Discussion

While this paper will pre-dominantly focus on the experiences of the research participants I believe it to be relevant to include a small discussion on the influence of parental or family usage on the research participants. Horgan (2011) writes that substance abuse can be passed

through generations by influences such as environment or family. Kendler *et al* (2003) suggest another route as hereditary, where certain behaviours, such as substance misuse, can be genetically passed on through generations. Consequentially children of parents who have a history of alcohol/substance misuse are more likely to misuse alcohol/substances in their adolescent years and are at a higher risk of developing a dependency in adulthood (Chassin *et al*, 1991; Hawkins *et al*, 1992, as cited by Horgan, 2011). This research is conclusive to our own findings which suggest that children who are witness to drug and/or alcohol use are more likely to develop a substance use problem in adulthood.

#### 4.2.3 Bereavement and Loss

Six out of the eleven participants reported bereavement and loss as something that occurred as a result of drug use or that influenced their own drug use. Joe, Tim and Matthew shared their experience as;

*“I was with a girl at the time and...she passed away from drink and drug use and then I went off the walls.” (Joe)*

*“Like through my using there would have been a few of my friends died, like when I was 19 one of my friends died....he was after over dosing” (Tim)*

*“I was with a girl who committed suicide when I was 18 you know..... kind of used heavier on that, drugs and just kind of always on the session like, alcohol, cocaine, ecstasy, marijuana, medication.” (Matthew)*

#### 4.2.4 Discussion

The 2015 statistics from the European Monitoring Centre for Drugs and Drug Addiction shows that Ireland has one of Europe’s highest rates of overdoses (HSE.ie, 2017) with approximately one person dying from drug poisoning every day. While the topic of death due to substance misuse is gathering vast attention globally (Valentina *et al*, 2016) very little research is available on this topic, (Valentina *et al*, 2016, Fiegleman *et al*, 2011). Valentine *et al* (2016) outline three pieces of research found relevant to this topic. Of the research available two main themes were prevalent to each research, these include;

1) The “social and moral stigma” that may be associated to a “self-inflicted death” and how that stigma can be transferred to the bereaved and;

2) Reflecting on family relationships prior to their deaths i.e. the negative affect that the substance misuse had on family relationships (Valentina *et al*, 2016, p285).

Feigleman *et al* (2011) wrote that the aftermath of such a death incur “victim-blame by others and potentially self-blame by the survivor” (Feigleman *et al*, 2001, p293). This research, however, is based on families of those who died due to substance misuse and no literature is available on peers or substance using peers. Therefore, I was not able to establish whether our cohort was experiencing a higher, lower or equal statistical experience of loss due to substance misuse.

#### 4.2.5 Criminal Involvement

This section presents a small reference to criminal engagement that came because of drug and/or alcohol misuse, as my research partner Orla has taken the focus of offending behaviour in her concurrent research project. The full cohort of participants admitted to engaging in criminal activity previously throughout their lives. This part will focus on the influence substance misuse had on their offending behaviour as experienced by Patrick, Tim and Steve;

*“Crime was something that came into my life because I needed that in order to survive in my addiction.” (Patrick)*

*“My crime would have been trying to feed my addiction. So that was doing things trying to get money for drugs so therefore I guess I was in the circle. I had to do these things in order for me to stabilise myself with my own habit.” (Tim)*

*“I would have had a lot of money before that but I ran out so then I started doing the burglaries stuff like that to get the money for the heroin which I would have never done before” (Steve)*

#### 4.2.6 Discussion

My research partner will be taking the focus of criminal engagement in her research hence this discussion will be brief. It is well established that substance and/or alcohol misuse and criminal activity are strongly linked (The Probation Service, 2011; Drummond *et al*, 2014). The results of this study support this theory as 100% of our cohort reported experiencing both criminal engagement and/or substance misuse. Additionally, the literature provides that treatment of substance misuse can lead to a reduction in recidivism rates (Farrow *et al.*, 2007, Caudy *et al.*, 2015, Clarke *et al.*, 2016). In relation to the Irish Probation Service’s study our

full cohort resonates with this literature as the participants report engaging in offending behaviour as a direct result of substance misuse and report that they have not engaged with criminal behaviour since ceasing drug use.

#### 4.3 Research Question 2: What factors started them on their road to recovery and how did this impact on their involvement in crime?

The research participants presented three main motivating factors that started them on their recovery. One participant provided two motivating factors that influenced him. These are presented as;

Attending treatment to avoid a custodial sentence, five out of eleven. As shared by Kieran, David and Tim;

*“So I was seeing this Probation Officer and she sent me to this counsellor and the counsellor says I think you need treatment... before I went down there I was on remand for two weeks.”* (Kieran)

*“To be honest about it, it was the courts really. It was the courts really, 2011 I got caught again with drugs.”* (David)

*“How I got into recovery this time was I got caught with drugs for sale and supply....and it was either go to treatment or go to Jail.... I didn’t think I would stay clean this long. I did it for court like, it was a means to an end”* (Tim)

Their own personal development. Four out of eleven put forward that they chose themselves to begin recovery. As shared by Patrick and Ross;

*“But there just came a point where I became willing and I wanted help and it was the first time in my life that I wanted genuine help and I went into \*\*\*\*\*. I had no charges, I just did it for myself”* (Patrick)

*“I just couldn’t cope any longer”* (Ross)

Impending fatherhood, two out of eleven, inclusive of John who shared two motivating factors, reported impending fatherhood as a motivating factor for embarking on their road to recovery. As shared by Steve and John;

*“For me the changing point happened when my girlfriend told me she was pregnant”* (Steve)

*“But I got there, and I only wanted to get up there so I didn’t have to go back to prison. And the small one.” (John)*

#### 4.3.1. Discussion

A person’s motivating factor has long been established to be linked to the outcomes of substance misuse interventions (Ries and Ellingson, 1990). The findings show many different motivating factors for addressing one’s addiction. Clarke *et al* (2016) put forward that time spent in prison or under the guidance of a probationary order is an ideal time to engage offenders with addiction treatment opportunities. Additionally Bright *et Perron* (2008) found in their study that legal coercion or motivation reduced the dropout rate in three substance misuse settings including short term residential, long term residential and outpatient settings. This resonated with these research findings when considered that the possibility of a custodial setting was the initial motivating factor for change. Contrasting literature undertaken by Wild *et al* (2016) reports that while legal coercion can lead to offender retention in treatment settings in order to gain a full understanding of the treatment outcomes one must consider the level of motivation when accessing treatment. This study found that of those who were legally motivated for treatment but reported little or no other motivating factor were at an increase of dropout or low levels of engagement in the treatment process than those who had additional motivating factors. This research resonates with our findings as six out of the eleven participants reported other motivating factors than legal coercion or motivation.

#### 4.3.2 How did this impact on their involvement in crime?

Of our full research sample eleven out of eleven participants put forward that they have ceased engaging in criminal activity since beginning their recovery. As shared by Kieran,

*“Ya. I stopped crime when I came out of Tabor lodge.” (Kieran)*

#### 4.3.3 Discussion

As previously mentioned substance misuse is a criminogenic need and if addressed can reduce recidivism rates (Farrow *et al*, 2007, Caudy *et al*, 2015, Clarke *et Eustace*, 2016). This theory is strongly linked to our findings as 100% of our participants reported disengaging or ‘desisting’ from offending behaviour since addressing their substance misuse issues. Interestingly our full cohort reported criminal engagement as a result of substance misuse



behaviours or as a way of feeding their addiction. The cessation of criminal engagement once on the road to recovery puts forward that maintaining substance use was the primary concern for our cohort and not profiting from illegal activities.

#### 4.4. Research Question 3: What role did CCT play in supporting them on their road to recovery?

The participants provided many examples of the support and interventions they received from CCT. The findings presented reflect the relationships associated with CCT and the practical learning opportunities.

##### 4.4.1. Positive Peer Support

Of the eleven participants, the full 100% outlines that peer support was one of the main benefits they received from CCT. This is shared by Joe, Gavin and Matthew;

*“And you’re in there with all fellas like myself and people who would have similar backgrounds with drug use and drinking and being involved in crime and prisons and all that stuff. So, we were all the same boat and all that like” (Joe)*

*“Fellas coming in sitting down, you’d be surprised what you’d learn off them you know.”(Gavin)*

*“Every person that I was here with at the time was either clean, getting clean or in the process of all that. So, it was a very positive environment for the people that were here. Or for the people that were coming through” (Matthew)*

##### 4.4.2 Client-Worker Relationship

Each of the eleven participants additionally identified one member of staff who positively impacted on their experience in CCT. This was noted in terms of the personal approach that the staff took with the participants. Many examples were given of the lasting effects that the equal or peer relationship between the worker and the service user had on their experience of CCT. Examples of this impact are represented by Alec and David;

*“She’d listen to ya like; she’d always have encouraging advice. She wouldn’t speak down to you, she’d speak to you as an equal” (Ross)*

*“They were your boss but they were your pal at the same time, it was the non-formal direction I got off (name of worker)” (Matthew)*

*“Because they, they didn’t just take me on in here working. They put me into treatment centres. Not put me but asked me to go which I did and my place was still there for me. They kept it open all the time”*  
(Alec)

*“CCT just make you believe in yourself you know they made us believe in ourselves. They made us believe we were good people”* (David)

#### 4.4.3 Discussion

Litt *et al* (2009) undertook a study where participants who exited an alcohol detox facility were referred to either an individualised aftercare program or one that focused on building a support network post treatment. The results showed that of those who attended the aftercare program that encouraged building a sober network of peers that they had better outcomes and level of sobriety in the follow-up stage. Best *et al* (2015) promote the importance of peer groups in substance misuse recovery. The literature found that even the simple act of being in a supportive group, such as NA/AA, has positive effects on a person’s recovery. Best *et al* (2015) argues that the use of peer support in recovery allows for the individual to assume or develop a new ‘non-using’ identity with the support and in the environment of non-using peers. The effectiveness of this support is influenced by how the individual relates to their peers (Best *et al*, 2008; Best *et al*, 2012 as cited in Best *et al*, 2015) The literature and the findings suggest that peer support, both in terms of service user and support staff, has a positive effect on recovery from both alcohol and substance misuse.

#### 4.4.4 Employment, Education and Skills

The benefits of education and skills were acknowledged by some research participants. However, the whole research sample reflected that CCT offered them structure in their lives at a time when they needed it to adjust back into mainstream society.

*“Overall a great support for me, whether it was out in the garden doing horticulture or out in the garden doing woodwork. Cooking with the lads or.....getting acupuncture was very good, and getting the massage every second week. It’s all stuff that made life fulfilling. And made recovery fulfilling”*  
(Patrick)

*“Taught me how to cook, about horticulture, landscaping, woodwork, life skill...But we learned a lot about drink and drug use and where it leads ya and all that type of stuff.” (Joe)*

*“I done the carpentry, the computers, like I got experience from a few things as well you know”*  
(Gavin)

#### 4.4.5 Discussion

Padgett *et al* (2016) argues that employment promotes a sense of purpose and meaning, gives structure to daily living, provides an additional social support and instils a sense of pride and accomplishment and leads to better outcomes in recovery. However, Padgett *et al* (2016) writes that due to limited education and skillset and with many people having recorded criminal offences it is often difficult for people in recovery to secure employment. This is reflected in our findings as, complimentary to the therapeutic aspect of learning, some participants reflected on the benefits of receiving this educational and skilful training. Additionally the increase of financial reward while on the CE scheme was reported as being positively received by the participants. Interestingly these supports offered were considered to be of lesser value to the process of recovery than the aforementioned social support received by clients at CCT. This is most appropriately summed up by Tim who states;

*“There’s a lot more to CCT than just being on the CE Scheme”*

# Chapter 5: Conclusions and Recommendations

## 5.1 Introduction

Chapter Five will provide the closing comments of this three part project and present the recommendations arising from the research findings and subsequent analysis. To conclude, a final reflective piece on the process of engaging in a community-based research project in collaboration with CARL and Churchfield Community Trust will be included.

## 5.2 Closing Comments

This study set out to a) explore the experiences of past participants of CCT and b) gain an insight into the thoughts and view of founding members of the organisation.

Having conducted the research and completed a review of the literature, there were a number of key findings from each study. Above all, the underlying link between substance misuse and offending behaviour is apparent. All eleven participants disclosed having a substance misuse issue at some point and revealed that their offending behaviour as an adult was limited to this time in their life. This finding is consistent with existing literature which identifies substance misuse as a risk factor that directly contributes to a person's likelihood of reoffending (Farrow *et al.*, 2007). Both the literature and the findings of this study illustrate the vulnerability of individuals following release from prison or a period in residential treatment. The literature stipulates ex-prisoners are at a higher risk of poor health, impaired social functioning, hospitalisation, overdose and suicide post release from prison, thus, highlighting the importance of appropriate reintegration support (Green *et al.*, 2016). Many participants spoke about the difficulties associated with carrying out everyday tasks leading you to question whether the current prison system fails to prepare individuals for release. As a result, community-based projects, like CCT, play a significant role in countering the effects of imprisonment and supporting individuals to reintegrate into society successfully. Finally, findings from this study reiterate the absolute value of a positive client-worker relationship when working with a vulnerable population. Other than providing structure, the programmes and interventions offered by CCT were awarded little significance by the participants.

Mostly, it was the genuineness of staff, the peer support and the overall sense of community that made a lasting impact on the participants and supported their desistance from crime. The use of peer support in recovery was also noted by the full cohort with some participants reflecting that these factors made them feel safe and supported during their recovery.

The founder's project outlined the founder's experiences during the early years of the project. Many spoke of identifying the principle need of the people in the north side of Cork City in the early 1990s. Through carrying out their own initial research, the founders recognised the need to provide a safe place for the young people in Churchfield as many of them were described as '*falling through the cracks*'. Literature associated with grassroots community development highlights the value of local knowledge on issues and concerns within the community.

The role of the religious organisations ethos and their founders' philosophies as well as the SERVOL approach were realised to be defining characteristics in each founders' grassroots experience. The analysis of the data discovered that both the founders and the first participants involved in CCT were all learning. The founding members' reflections on the future progression of CCT outlined several valuable recommendations based on their past experiences and their observations of the project at present.

## 5.3 Recommendations

Having completed writing up our research findings and analysis, we collaborated in order to prepare one set of recommendations to present to CCT. Given that this was a participatory research study, the recommendations proposed by the participants will take precedence. This will be followed by our recommendations, as researchers.

### 5.3.1 Participant's Recommendations

- ❖ It was recommended that more emphasis needs to put on relapse prevention within CCT. This should include educational and therapeutic interventions. Many clients engage in CCT after spending time in treatment centres, some of which do not have an aftercare program in Cork. This is an opportunity for CCT to become more involved in supporting clients in their recovery. Special reference was made to the educational aspect of relapse prevention in identifying triggers and warning signs of relapse; Steve stated "*relapse prevention, what are their triggers, what are their warning signs. Raising the boy's awareness around all that stuff.*"

- ❖ Transition planning was an idea put forward by Ross and Tim. Tim reflected on his experience of when he finished the CCT programme; *“I straight back on the dole queue”* and Ross reported *“When my CE time was up, that was it. I never planned for going ahead... You want something to step into next”*. Transition planning could include support in securing full time education or employment. It was noted that support in acquiring part time education courses were available but as Tim reported *“it was only one night a week”*.
- ❖ One participant recommended that additional work experience opportunities would be beneficial to service users nearing the end of the scheme. This was recommended by Ross who stated *“If they could go away now with all the contacts and get a list of companies they are involved with that would take people on for work experience. And when it’s coming to the end give the boys the opportunity to try some work out. Something like that that would give them the opportunity to move on and get a job like.”*
- ❖ Patrick recommended that CCT should provide support for family members. Patrick shared that *“there was always a time where I thought it would it be good to have family on board in some way. In the sense that support for the family like, nothing to do with like with us but like a family support system”*.
- ❖ A need for family members to be educated around substance and alcohol recovery was further recommended by Patrick. As people, or families, who haven’t undergone recovery from addiction, are often unaware of the struggles involved. Education around supporting loved ones in early recovery could facilitate the successful transition back into the family environment. Patrick proposed that *“maybe where there’s a support worker who maybe educates the family a bit about the transition that we’re making and the process of change...I found myself the expectation was massive on me.”*
- ❖ The need for more space was suggested by one participant. It was noted that there are vacant buildings beside CCT. Kieran recommended *“for more rooms like for people having one and ones like the way we’re having now”*.

### 5.3.2 Founding Members' Recommendations

All seven of the founding members expressed their reflections on the future direction of CCT. From this, several recommendations were identified. These will be discussed below:

#### Re-establishing Connections

- ❖ Four of the seven founders identified the need to re-ignite the link between the religious orders and CCT. Re-establishing close connections with the trustees of CCT through instigating informal meetings a couple of times a year. This was an activity that was regularly carried out in previous years but has since ceased. One founder described it as a form of 'supervision', acting as a support to those who are currently involved while retaining the knowledge and experience of the original founding members' who are no longer actively involved.

#### Distribution of Annual Reports

- ❖ Distributing CCT's annual reports to the founding members' who are no longer involved as a means of sustaining communication and knowledge of recent development and progress open to the congregations involved.

#### Recollecting the Spiritual Dimension

- ❖ Reminding the director and current staff members of the spiritual dimension that was and remains central to the three congregations involved at grassroots level of CCT. One founder mentioned a discussion that included several founding members where they all felt it would be beneficial for current staff to visit Nano Nagle's home place. This would inform and remind staff members of the importance of the founders' philosophy and commitment in providing spiritualistic intervention to a marginalised group.

#### The Need for Consolidation

- ❖ Four of the seven founding members expressed the need for consolidation within the project. It is the writer's belief that this may be partially satisfied through implementing the above recommendations as outlined by the founders. By making these changes, CCT is re-identifying their roots and reminding everyone involved past and present, of the significance of the grassroots of the project.

### 5.3.3 Researcher Recommendations

- ❖ A number of participants spoke about the positive influence their peers had on both their recovery and their ability to desist from crime. Following on from this, we suggest that CCT would benefit from implementing an official mentoring system whereby former users of the service, who are at a stable stage in their lives, are paired with current service users to offer support and guidance.
- ❖ Many of the participants expressed a desire to “give back” both to CCT and to wider the community. In response to this, and following on from the previous recommendation, we extend our proposal to include the opportunity for mentor training, with the aspiration that the mentors could potentially play a role in the already existing outreach programme.
- ❖ Following on from one of the participant’s recommendations which suggest that service users and their families would benefit from family support, we recommend that CCT team receive the appropriate training in order to be able to provide this support.
- ❖ The literature indicates that unemployment is a risk factor which increases an individual’s likelihood of reoffending (Seymour and Costello, 2003). In response to this, and following on from the participant’s recommendations, we propose that service users are given the opportunity to engage in sheltered employment when nearing the end of the CCT programme. This would allow individuals to discover their interests and potentially secure future employment.
- ❖ Given the apparent link between substance misuse and offending behaviour, we recommend that all staff be trained in delivering the alcohol and offending behaviour programme that is already in operation in a group capacity. This would allow for staff members to complete the programme individually with clients resulting in a larger number of people availing of the programme. We also propose the idea that former users of CCT, who are at a stable stage in their lives, could be trained in delivering this programme, or aspects of the programme, to their peers.



- ❖ A number of participants mentioned losing friends to suicide. In response to this, we suggest that service users have the opportunity to complete the two-day Applied Suicide Intervention Skills Training (ASIST) workshop in suicide first aid.
- ❖ Lastly, it is evident from our findings that the relationship between the client and worker is a fundamental asset in initiating positive change. As CCT is continuously developing and adding to their part-time and full-time, we suggest that all staff receive updated training in a) motivational interviewing and b) the Servol philosophy which guides CCT's way of working so that all staff members have an in-depth understanding on the principles.
- ❖ While reflecting on the above quotes from the founders on the need for consolidation, it is evident that they fear that CCT may become unable to consistently provide that 'safe space' for clients. Therefore, it is the writer's belief that CCT would benefit from the role of a social worker embedded in the everyday running of the project. This would ensure clients receive that one on one engagement essential for reintegration. The IASW (2017) outlines a social worker's role as comprising of a broad skill base for interventions including counselling, family support work, problem solving and community work, all of which are vital when working with ex-offenders.

#### 5.3.4 Further Research Opportunities

- ❖ Additionally, our findings suggest that many of our research participants suffered bereavement of peers and/or family members due to substance misuse. There is limited literature available on the impact of losing a family member, three studies as mentioned in Chapter Four of Lisa's report. However, Lisa was unable to ascertain any evidence or literature on the impact of substance misuse bereavement of peers. Further research on this would be beneficial to influence evidence based practice when offering bereavement support.
- ❖ It was interesting to find that the majority of participants contested the harm reduction model and felt they would be unable to use any substance in moderation. Perhaps, looking at this in more detail would be an opportunity for further research.

- ❖ As mentioned within this study, it was difficult to ascertain recent evaluations of the SERVOL model as an approach used in community organisations and certainly in reintegration services. This may be due to the fact that there are limited organisations utilising the model. Nonetheless, CCT and other organisations would benefit from carrying out a large-scale research study on the evaluation of the implementation of the SERVOL model and its three principles in relation to the co-ordination of CCT.

## 5.4 Final Reflections

Although this was a group project that involved three Social Work students working in collaboration, each student was required to produce their own final report to submit to the exam board. This paper is an attempt to combine all three written pieces into one document to present to Churchfield Community Trust and the CARL initiative. All three students will have had a different experience of the research process and therefore all three final reflections have been included.

### 5.4.1 Katie's Reflective Piece

During this research process, I experienced challenges and felt various emotions. The main reasons I decided to become part of a CARL project was due to my keen interest in reintegration services and substance misuse, together with struggling to choose a research topic. When I read CCT's proposed research topics, I immediately became interested in carrying out a research involving substance misuse and the impact CCT had on service users affected by addiction. Initially, when I attended the preliminary mentoring meeting with CARL, my tutor and my co-researchers, I had anticipated being able to choose this topic. After further discussion with my peers, it was clear that all three researchers were keen to research the same question. I decided to undertake a different proposed topic, involving an evaluation of the contribution of the staff in CCT, which later became the founder's project.

I immediately became intimidated by the research topic as it was an area I was unfamiliar with and was uncertain of the methods involved. As I progressed through the process, I began to realise the significance of recording the founding member's experiences and the value it held to CCT. I felt nervous to be given the responsibility of interviewing the founding members of such a profound and inspirational organisation that continue to support a marginalised group. My biggest fear was attempting to remain true to the founders' experiences and conveying their stories to a high standard. Throughout the two years on the

MSW, I often struggled with my confidence and self-belief in my abilities, both professionally and academically. Because of this, I feared I would be unable to create a research study that would satisfy CCT and the objectives identified for the study.

With the support and guidance of my tutor, CCT and my peers, I became increasingly confident in my skills and began to believe in my research capabilities. Observing CCT and the support they provide inspired me to work hard and dedicate myself to carrying out a satisfactory research study that I could be proud to present to CCT. When interviewing the founding members, I instantly realised the determination held by each of them to provide support for those in need, even though it was an area they too were unfamiliar with. Being part of a CARL project assisted me in sticking to strict time scales and research plans as well as continuously communicating with CCT and involving them in the research process.

The support provided by members of CCT, particularly Kevin Mooney, made this research process achievable and enjoyable, as I felt continuous support from the beginning. Carrying out this study has developed my research and academic skills as well as giving me the confidence to work collaboratively with community services and peers. It has changed my attitude towards research as this was something I struggled to see myself becoming a part of and being successful in. The research process came with its stresses and I often became overwhelmed, but I learned to manage them effectively with guidance from those involved. The ability to cope under stress and time constraints is something that is essential in a social work profession. I feel this collaborative piece has further prepared me for the future stresses of the social work role, as well as reminding me of the achievements possible if the work and commitment is put in.

I learned a lot about myself throughout this process, including that I am often my own worst enemy. There were several times I questioned my capabilities and if I would be able to achieve the research aims. I persevered as a result of the inspiration gained from the founding members and the staff members of CCT. I feel an enormous sense of achievement having completed it and feel privileged to have been given the opportunity to work with CCT and assist in the promotion of social change. If I had chosen a topic unrelated to CARL from a students' perspective, it may have been less demanding but I would not have gained the invaluable experience and knowledge possessed on completion of this research.

### 5.4.2 Orla's Reflective Piece

Conducting this research and having the opportunity to be a part of collaborative project has been a significant learning experience. Not only has it improved my research skills but it has developed my communication skills and my ability to task manage. The process has highlighted the significance of research and the underlying value of evidence-based practice. However, most importantly, it has increased my awareness of social issues and reinforced by reflexive positioning that crime should be treated as a social matter and not just as an individual concern. Nevertheless, with a project of this magnitude, it was inevitable some challenges would arise.

Originally, when Lisa and I chose to undertake this study together and collaborate on data collection, we decided that Lisa would explore the topics of substance misuse and recovery and I would take a closer look at crime and desistance. However, having completed the research and reviewed the literature, we have established that the two topics are interconnected. As a result, we found it a challenge to separate the research in the manner we had originally planned. In this project, we each had our own research questions, which were somewhat similar; therefore, there was a significant amount of overlap in our findings chapter, as well as a number of themes that were left unanalysed. Perhaps, if we were to undertake this project again, it would be more useful to analyse different themes emerging from the same set of research questions. Another practical challenge we faced was the task of having to present and analyse the findings from eleven interviews and award every participant an equal space within a limited word count. Given that this was a participatory research project, I did not want to misrepresent, exclude or dismiss any of the views and opinions of the participants.

The nature of some of the narratives provided by the participants was particularly harrowing. Some described attempting suicide and more spoke of experiencing overdose. However, a compelling advantage of having a research partner is the associated peer support. Throughout the research process, Lisa and I consulted with each other periodically, debriefing after interviews and discussing any issues that arose. The CCT team were an additional support to us and were available to provide both practical and emotional support when needed.

I am especially grateful to have had the opportunity to be involved in a collaborative research project. Not only has it developed my ability to work in partnership with others, it has been a fundamental example of promoting collaboration and participation in practice, both of which

are core principles of social work. Although challenging at times, I feel privileged to be able to help a community group through my research and potentially contribute to some level of social change. I am honoured to have met such an inspiring group of people; their strength and courage is inspiring.

#### 5.4.3 Lisa's Reflective Piece

Undertaking this research was a daunting experience. Having never previously undertaken primary research I was aware throughout this study that I was new to this area of research. This was coupled with the prospect that this research would be reviewed by a wider review source, namely CCT, and that they were hopeful to use this research to improve their service. However, there was an underlying level of excitement in writing this paper as it encompassed both my professional experiences in the MSW, The Probation Service and a men's residential substance/alcohol misuse facility.

An additional source of interest was the prospect of undertaking this research as part of a collaborative approach. As part of the MSW1 course we were given a group assignment and I found the experience to be a positive one. I found throughout this process that my colleagues and I worked well together and offered each other motivation and support when necessary. The motivating factor of not wanting to let my valued colleagues down also kept me focused on the task at hand and reduced my tendency to procrastinate. Additionally, being able to discuss topics throughout the project with my colleagues allowed me to stay focused on themes relevant and avoid 'going down a rabbit hole' of immaterial information which, admittedly, I also have a tendency to do. Throughout this study, I gained support from my research partners and I was very grateful for their willingness to openly discuss this research and for their words of encouragement along the way.

The use of participatory research brought about mixed feelings. I found that the interviews to be very empowering. Hearing the accounts of the participants and the obstacles they have overcome in their pathways to stability motivated me to keep on top of my research progress. Working with the research participants, I felt privileged to be a part of this study. Finding that each participant had come back to CCT and shared as honestly, openly and selflessly like they did, I was compelled to address each theme as they arose. However, due to the limited word count, it was not possible to address every theme and I struggled to pick the most relevant themes as I felt they all held equal value. Once again, I consulted my research

colleagues for support around this and was relieved to learn they were faced with the same dilemma. We discussed the themes that emerged from the data and decided on themes that would allow for the greatest variety of themes to be presented to CCT. While there were many learning opportunities throughout this research, the core learning for me was utilising the knowledge that service user's or clients hold to better inform my practice. I also learned that my colleagues are an invaluable source of support for me in social work research and practice.

# Bibliography

Akers, R. (1998). *Social Learning and Social Structure*. Boston: North Eastern University Press.

Akers, R. and Jensen, G. (2003). *Social Learning Theory and the Explanation of Crime*. New Brunswick, N.J.: Transaction.

Alcohol Action Ireland. (2017). Alcohol and Health - Alcohol Action Ireland. Available online at:

Available at <http://www.drugsandalcohol.ie/21750/> (Accessed 6 Mar. 2017)

Available at: <http://health.gov.ie/wp-content/uploads/2016/11/Bulletin-1.pdf> (Accessed 18 Mar. 2017).

Available at: <https://www.justice-ni.gov.uk/news/adult-and-youth-reoffending-northern-ireland-cohort-2012-13-published-today> (Accessed 2 Apr. 2017)

Available at: [http://www.irishprisons.ie/wp-content/uploads/documents\\_pdf/12232-Irish-Prison-Service-AnnualReport2015-v7-2.pdf](http://www.irishprisons.ie/wp-content/uploads/documents_pdf/12232-Irish-Prison-Service-AnnualReport2015-v7-2.pdf) (Accessed 11 Aug. 2016).

Barlow, J. 1999. *Systemic Review of the Effectiveness of Parent-training Programmes in Improving Behaviour Problems in Children aged 3-10 Years*. 2nd ed. Health Services Research Unit, University of Oxford, UK.

Bateson, G. (1972). *Steps to an Ecology of Mind*. New York: Ballantine.

Bedford Row, (2007). *Voices of Families Affected by Imprisonment: A Bedford Row Family Research Project*. Limerick: Bedford Row

Bee, H and Boyd, D. (2009). *Lifespan Development*, U.S.A: Pearson Education

Best, D., Beckwith, M., Haslam, C., Haslam, S., Jetten, J., Mawson, E. and Lubman, D. (2015). "Overcoming alcohol and other drug addiction as a process of social identity transition: the social identity model of recovery (SIMOR)", *Addiction Research & Theory*, **24**(2), pp.111-123.

Biggerstaff, D. and Thompson, A. (2008). "Interpretative Phenomenological Analysis (IPA): A Qualitative Methodology of Choice in Healthcare Research", *Qualitative Research in Psychology*, **5**(3), pp.214-224.

Borzycki, M. and Baldry, E. (2003) 'Promoting Integration; The Provision of Prisoner Post Release Services, Academic Journal Article, Published September, 2003, Vol. 262, available online at: <https://www.questia.com/library/journal/1P3->

[1653853311/promoting-integration-the-provision-of-prisoner-post-release](#) [Accessed on 9/3/2017].

Braun, V. and Clarke, V. (2006) 'Using Thematic Analysis in Psychology, Qualitative Research in Psychology, Vol. 3 (2), pp. 77-101.

Brett- Davies, M. (2007) '*Doing a Successful Research Project: Using Qualitative or Quantitative Methods*', Hampshire, Palgrave Macmillan.

Bright, C. and Perron, B. (2008). "The influence of legal coercion on dropout from substance abuse treatment: Results from a national survey", *Drug & Alcohol Dependence* **92**, pp.123–131.

Britton, D. (2011). *The Gender of Crime*. Lanham, Md: Rowman & Littlefield.

Caine, V. and Mill, J. (2016) '*Essentials of Community-based Research*', New York, Left Coast Press, Inc.

Caneda- Astray, V., Bushbee, M., and Fanning, M. (2013) Social Learning Theory and Prison Work Release Programs, Florida International University, available online at: <http://digitalcommons.fiu.edu/cgi/viewcontent.cgi?article=1165&context=sferc> [Accessed on 20/3/2017].

Carey, M. (2009). *The Social Work Dissertation*, New York, Open University Press.

Carey, M. (2012). *Qualitative Research Skills for Social Work*, Farnham, Ashgate Publishing Ltd.

Carey, M. (2013). *The Social Work Dissertation: Using Small-Scale Qualitative Methodology*, New York, Open University Press.

Casey, J and Jarman, B. (2011) The Social Reintegration of Ex-prisoners in Council of Europe Member States, The Quaker Council for European Affairs, available online at: <http://www.cep-probation.org/wp-content/uploads/2015/03/rprt-reintegration-full-en-may-2011.pdf> [Accessed on 4/3/2017].

Caudy, M., Folk, J., Stuewig, J., Wooditch, A., Martinez, A., Maass, S., Tangney, J. and Taxman, F. (2015). "Does substance misuse moderate the relationship between criminal thinking and recidivism?", *Journal of Criminal Justice*, **43**(1), pp.12-19.

Central Statistics Office, (2017). *CSO Quick tables: Crime - Recorded Crime Offences*. [online] Available at: <http://www.cso.ie/multiquicktables/quickTables.aspx?id=cja01> [Accessed 3 Apr. 2017].

Churchfield Community Trust, (2009). *All Coping, All Hoping. An Assessment of the Impact of Churchfield Community Trust 2001-2003; Executive Summary of Findings and Vision for the Future 2004-2009*. Cork.



- Clarke, A. and Eustace, A. (2016). *Drug & Alcohol Treatment Services for Adult Offenders in Prison and in the Community*, Eustace Patterson Ltd.
- Cooper, B. (2001). "Constructivism in Social Work: Towards a Participative Practice Viability", *British Journal of Social Work*, **31**(5), pp.721-738.
- Corby, B., 2006. *Applying Research in Social Work Practice*. Berkshire, Open University Press
- Coughlin, S., Smith, S. and Fernández, M. (2017). *Handbook of community-based participatory research*, New York, Oxford Community Press.
- Creswell, J. (2007). *Qualitative Inquiry and Research Design: Choosing Among Five Approaches*. Thousand Oaks, C.A: Sage Publications.
- Cromwell, P., Olson, J. and Avary, D. (1991). *Breaking and Entering: An Ethnographic Analysis of Burglary*. Newbury Park, C.A: Sage.
- Cso.ie. (2015). *Probation Recidivism 2009 cohort - CSO - Central Statistics Office*. Available at:  
<http://www.cso.ie/en/releasesandpublications/er/pror/probationrecidivism2009cohort/>  
 (Accessed 13 Aug. 2016).
- Cso.ie. (2016). *Probation Recidivism 2010 cohort - CSO - Central Statistics Office*. Available at:  
<http://www.cso.ie/en/releasesandpublications/er/pror/probationrecidivism2010cohort/>  
 (Accessed 03 Apr. 2016).
- De Vries, S., Hoeve, M., Assink, M., Stams, G. and Asscher, J. (2014). Practitioner Review: Effective Ingredients of Prevention Programs for Youth at Risk of Persistent Juvenile Delinquency - Recommendations for Clinical Practice. *J Child Psychology Psychiatry*, 56(2), pp.108-121.
- Dean, J. (2017). *Doing Reflexivity: An Introduction*. Bristol, Policy Press, p.10.
- Degenhardt, L., Gisev, N., Trevena, J., Larney, S., Kimber, J., Burns, L., Shanahan, M. and Weatherburn, D. (2013). Engagement with the Criminal Justice System Among Opioid-Dependent People: A Retrospective Cohort Study. *Addiction*, 108(12), pp.2152-2165.
- Denzin, N. and Lincoln, Y. (2008). *Strategies of Qualitative Inquiry*. 3rd ed. Thousand Oaks, CA: Sage Publications.
- Denzin, N.K. and Lincoln, Y.S. (2011). *The Sage Handbook of Qualitative Research*. 4<sup>th</sup> ed. London: Sage Publications.
- Department of Justice. (2015). *Adult and Youth Reoffending in Northern Ireland (Cohort 2012 to 13)*.

- Doherty, C. (2012) 'Setting the Scene' in Jackson, A and Doherty, C. (eds.), *Community Development in Ireland Theory Policy and Practice*, Dublin, Gill Macmillan, available online at: [http://www.gillmacmillan.ie/AcuCustom/Sitename/DAM/056/Community\\_Development\\_-\\_Look\\_Inside\\_Sample.pdf](http://www.gillmacmillan.ie/AcuCustom/Sitename/DAM/056/Community_Development_-_Look_Inside_Sample.pdf) [Accessed on 3/3/2017].
- Drummond, A., Codd, M., Donnelly, N., McCausland, D., Mehegan, J., Daly, L. and Kellehar, C. (2014). *Study on the Prevalence of Drug Use, Including Intravenous Drug Use, and Blood-Borne Viruses among the Irish Prisoner Population*. Dublin: National Advisory Committee on Drugs and Alcohol.
- Durham Community Research Team (2011) *Community-based Participatory Research: Ethical Challenges*, Durham University.
- Edmund Rice School Trust (ERST) (2016) 'Our History', available online at: <http://www.erst.ie/about-us/our-history/> [Accessed on 4/3/2017].
- Environment, Community and Local Government (2015) '*Our Communities; A Framework Policy for Local and Community Development in Ireland*', Department of Environment, Community and Local Government: Community Division, available online at: [http://www.housing.gov.ie/sites/default/files/attachments/public\\_consultation\\_synopsiss.pdf](http://www.housing.gov.ie/sites/default/files/attachments/public_consultation_synopsiss.pdf) [Accessed on 9/3/2017].
- Estévez, E. and Emler, N. (2011). Assessing the Links among Adolescent and Youth Offending, Antisocial behaviour, Victimization, Drug use, and Gender. *International Journal of Health and Clinical Psychology*, 11(2), pp.269-289.
- Fahey, T. (1998) 'The Catholic Church and Social Policy', *The Furrow*, Vol. 49(4), pp. 202-209, available online at: <http://0-www.jstor.org.library.ucc.ie/stable/pdf/27663634.pdf> [Accessed on 1/04/2017].
- Farrington, D. and Welsh, B. (1999). Delinquency Prevention Using Family-Based Interventions. *Children & Society*, 13(4), pp.287-303
- Farrow, K., Kelly, G. and Wilkinson, B. (2007). *Offenders in Focus : Risk, Responsivity and Diversity*. Bristol: The Policy Press.
- Fazel, S. and Wolf, A. (2015). A Systematic Review of Criminal Recidivism Rates Worldwide: Current Difficulties and Recommendations for Best Practice. *PLOS ONE*, 10(6), pp. 130-390.
- Fazel, S., Bains, P., & Doll, H. (2006). Substance Abuse and Dependence in Prisoners: A Systematic Review. *Addiction*, 101, pp. 181–191.
- Feigelman, W., Jordan, J. and Gorman, B. (2011). "Parental Grief after a Child's Drug Death Compared to other Death Causes: Investigating a Greatly Neglected Bereavement Population". *OMEGA - Journal of Death and Dying*, 63(4), pp.291-316.

- Forde, C. and Lynch, D. (2015) *'Social Work and Community Development; A Critical Practice Perspective'*, Palgrave.
- Gerdes, K., & Segal, E. 2011, "Importance of Empathy for Social Work Practice: Integrating New Science", *Social Work*, 56(2), pp. 141-148.
- Gilchrist, M. and Taylor, M. (2016) *'The Short Guide to Community Development'*, 2<sup>nd</sup> eds., Bristol, Policy Press.
- Grady, M.P. (1998) *Qualitative and Action Research, A Practitioners Handbook*. Indiana: Phi Delta Kappa Educational Foundation.
- Gray, D. (2004). *Doing Research in the Real World*. London: Sage Publications.
- Green, B., Denton, M., Heffernan, E., Russell, B., Stapleton, L. and Waterson, E. (2016). From Custody to Community: Outcomes of Community-Based Support for Mentally Ill Prisoners. *Psychiatry, Psychology and Law*, 23(5), pp.798-808.
- Green, R., Mitchell, P. and Bruun, A. (2013). Bonds and Bridges: Perspectives of Service-Engaged Young People on the Value of Relationships in Addressing Alcohol and other Drug Issues. *Journal of Youth Studies*, 16(4), pp.421-440.
- Griffith, T., Dandurand, Y., Murdoch, D. (2007) 'The Social Reintegration of Offenders and Crime Prevention, the International Centre for Criminal Law and Reform and Criminal Justice Policy, Canada, National Crime Prevention Centre, available online at: [http://publications.gc.ca/collections/collection\\_2009/sp-ps/PS4-49-2007E.pdf](http://publications.gc.ca/collections/collection_2009/sp-ps/PS4-49-2007E.pdf) [Accessed on 3/3/2017].
- Grix, J. (2002) Introducing Students to the Generic Terminology of Social Research, Political Studies Association, Vol. 22 (3), p. 175-178, available online at: [https://ucc-ie.blackboard.com/bbcswebdav/pid-1040559-dt-content-rid-1700216\\_1/courses/2017-SS6206/teaching%20students%20about%20research%20terminology.pdf](https://ucc-ie.blackboard.com/bbcswebdav/pid-1040559-dt-content-rid-1700216_1/courses/2017-SS6206/teaching%20students%20about%20research%20terminology.pdf) [Accessed on 10/04/2017].
- Guba, E. (1990). *The Paradigm Dialog*. Newbury Park, C.A: Sage Publications.
- Guba, E. and Lincoln, Y. (1988). Do inquiry paradigms imply inquiry methodologies?. In: D. Fretterman, ed., *Qualitative Approaches to Evaluation in Education*. New York: Praeger.
- Guba, E. and Lincoln, Y. (2005). Paradigmatic Controversies, Contradictions and Emerging Confluences. In: N. Denzin and Y. Lincoln, ed., *The Sage Handbook of Qualitative Research*, 3rd ed. Thousand Oaks, C.A: Sage Publications.
- Hacker, K. (2013). *Community-based participatory research*, Los Angeles, Sage.
- Haney, C. (2001). *The Psychological Impact of Incarceration: Implications for Post-Prison Adjustment*. Santa Cruz, C.A: University of California.

- Harrison, L., Hughes, A. (1997). *The Validity of Self-Reported Drug Use: Improving the Accuracy of Survey Estimates*, MD, National Institute on Drug Abuse.
- Hawtin, M and Percy-Smith, J. (2007). *Community Profiling: A Practical Guide*. Buckingham: Open University Press.
- Health Research Board (2016). *Overview of alcohol consumption, alcohol-related harm and alcohol policy in Ireland*, Dublin, Health Research Board.
- Health Research Board. *Irish National Focal Point to the European Monitoring Centre for Drugs and Drug Addiction (2016) Ireland: National report for 2015 – drug markets and crime*. Dublin, Health Research Board.
- Healy, O. (2012) ‘*An Examination of the Societal and Individual Effects of Early School Leaving in the Irish Context, Focusing on Sundays Well Life Centre an Example of Alternative Education*’, Cork, Community and Academic Research Links, available online at:  
<https://www.ucc.ie/en/media/academic/appliedsocialstudies/OrlaithHealy.pdf>  
 [Accessed on 10/3/2017].
- Heron, J. and Reason, P. (1997). A Participatory Inquiry Paradigm. *Qualitative Inquiry*, 3(3), pp.274-294.
- Hesse-Biber, S. and Leavy, P. (2011). *The Practice of Qualitative Research*. 2nd ed. London: Sage Publications.
- Hogan, J. and Donnelly, P. (2009) ‘Introduction’ in Hogan, J., Dolan, P. and Donnelly, P. (eds.) ‘*Approaches to Qualitative Research; Theory and its Practical Application*’, pp. 1- 18, Cork, Oak Tree Press, available online at:  
<http://arrpw.dit.ie/cgi/viewcontent.cgi?article=1013&content=buschmarbk> [Accessed on 5/01/2017].
- Hollway, T., Mawhinney, S. and Sheehy, N. (2007). Treating Addiction, Tackling Crime: The Impact of Probation-Led Residential Treatment on Offender Substance Misuse, Recidivism and Attitudes Towards the Criminal Justice System. *Irish Probation Journal*, 4(1), pp.108-124.
- Holstein, J. and Gubrium, J. (2008). *Handbook of constructionist research*, New York, Guilford Press
- Horgan, J. (2011). *Parental substance misuse*, Dublin, Stationery Office.
- Hse.ie. (2017). *HSE Marks International Overdose Awareness Day - HSE.ie*. [online] Available at: <http://www.hse.ie/eng/services/Campaigns/overdoseawarenessday.html> [Accessed 11 Mar. 2017].
- <http://alcoholireland.ie/facts/health-and-alcohol/> (Accessed 19 Mar. 2017).

- Humphreys, B. (2008). *Social Work Research for Social Justice*. Basingstoke: Palgrave MacMillan.
- IASW (2017) 'About Social Work', available online at:  
<https://www.iasw.ie/about.aspx?contentid=3027> [Accessed on 2/04/2017].
- Ife, J (2013) '*Community Development in an Uncertain World; Vision, Analysis and Practice*', New York, Cambridge University Press.
- Ife, J. (1998). *Rethinking Social Work: Towards Critical Practice*. Melbourne: Longman.
- Ifsw.org., (2014), *Global Definition of Social Work | International Federation of Social Workers*. Available at: <http://ifsw.org/get-involved/global-definition-of-social-work/> (Accessed 20 Mar. 2017).
- Independent (2017). 'Explosion in synthetic drug use will kill many more', says top doctor. [online] Available at: <http://www.independent.ie/irish-news/news/explosion-in-synthetic-drug-use-will-kill-many-more-says-top-doctor-35465976.html> (Accessed 18 Mar. 2017).
- Inglis, T. (2008) '*Global Ireland, Same Difference*', New York, Routledge.
- Irish Association of Social Workers (2007). Irish Association Code of Ethics'.
- Irish Penal Reform Trust, (2009). *Position Paper 5: Penal Policy with Imprisonment as a Last Resort*. Dublin: Irish Penal Reform Trust.
- Irish Penal Reform Trust, (2017). *Irish Penal Reform Trust: Annual Report 2015-2016*. [online] Dublin: Irish Penal Reform Trust. Available at:  
[http://www.iprt.ie/files/IPRT\\_Annual\\_Report\\_2015-16.pdf](http://www.iprt.ie/files/IPRT_Annual_Report_2015-16.pdf) [Accessed 10 Apr. 2017].
- Irish Prison Service (2016) Strategic Plan 2016- 2018, Longford, Irish Prison Service, available online at: [http://www.irishprisons.ie/wp-content/uploads/documents\\_pdf/strategic\\_plan\\_2016.pdf](http://www.irishprisons.ie/wp-content/uploads/documents_pdf/strategic_plan_2016.pdf) [Accessed on 1/04/2017].
- Israel, B., Schulz, A., Parker, E. and Becker, A. (1998) 'Review of Community-based Research: Assessing Partnership Approaches to Improve Public Health, Annual Review Public Health, Vol. 19, pp. 173-202, available online at:  
<https://pdfs.semanticscholar.org/01c4/078df375245fc804cbdbbc7a078164509d35.pdf> [Accessed on 16/04/2017].
- Kendler, K., Prescott, C., Myers, J. and Neale, M. (2003). "The Structure of Genetic and Environmental Risk Factors for Common Psychiatric and Substance Use Disorders in Men and Women", *Archives of General Psychiatry*, **60**(9), p.929.
- Kumar, R. (2014) '*Research Methodology; A Step by Step Guide for Beginners*', 4<sup>th</sup> ed., London, SAGE Publications Ltd.

- Laub, J. and Sampson, R. (2001). Understanding Desistance from Crime. *Crime and Justice*, 28, pp.1-69.
- Lavia, J. and Moore, M. (eds.) (2010) '*Cross Cultural Perspectives on Policy and Practice-Decolonizing Community Contexts*', Abington, Routledge, available online at: [https://books.google.ie/books?id=DWuLAgAAQBAJ&printsec=frontcover&source=gb\\_s\\_ge\\_summary\\_r&cad=0#v=onepage&q&f=false](https://books.google.ie/books?id=DWuLAgAAQBAJ&printsec=frontcover&source=gb_s_ge_summary_r&cad=0#v=onepage&q&f=false) [Accessed on 10/3/2017].
- Ledwith, M. and Springett, J. (2010). *Participatory practice Community-based action for transformative change*, Bristol, The Policy Press, p.104.
- Lillis, S. (2011) 'Community in the Church- A Means of Healing', *The Furrow*, Vol. 62 (1), pp. 20-27.
- Lishman, J., Brannan, J., Gibson, A. and Yuill, C. (2014). *Social work an Introduction*. London: Sage Publications.
- Liston, V. (2014). The Problematic of Participation: Back to the Future. In: R. Munck, L. McIlrath, B. Hall and R. Tandon, ed., *Higher Education and Community-based Research: Creating a Global Vision*. New York: Palgrave MacMillan.
- Litt, M., Kadden, R., Kabela-Cormier, E. and Petry, N. (2009). Changing network support for drinking: Network Support Project 2-year follow-up. *Journal of Consulting and Clinical Psychology*, 77(2), pp.229-242.
- Long, J. and Mongan, D. (2014). *Alcohol Consumption in Ireland 2013: An Analysis of a National Alcohol Diary Survey*, Dublin, Health Research Board.
- Longe, J. (2008) Drug Tests in Irish prisons. *Drugnet Ireland*, 26, P22-23
- Marcus, J. V. (2006) 'Motivations to Grassroots Community Action in the Context of Poverty', University of Florida, available online at: [http://ufdcimages.uflib.ufl.edu/UF/E0/01/58/42/00001/marcus\\_j.pdf](http://ufdcimages.uflib.ufl.edu/UF/E0/01/58/42/00001/marcus_j.pdf) [Accessed on 6/3/2017].
- Marlow, C. (2010). *Research Methods for Generalist Social Work*. 5th ed. Belmont, USA: Cengage Learning.
- Martin, D. (2013) 'Catholic Ireland: Past, Present and Future', *The Furrow*, Vol. 64 (6), pp. 323-331, available online at: <http://0-www.jstor.org.library.ucc.ie/stable/pdf/24635656.pdf> [Accessed on 1/04/2017].
- Martynowicz, A and M, Quigley. (2010). *It's Like Stepping on a Landmine; Reintegration of Prisoners in Ireland*. [online] Dublin: Irish Prison Reform Trust. Available at: [http://www.iprt.ie/files/%E2%80%9CIts\\_like\\_stepping\\_on\\_a\\_landmine%E2%80%A6%E2%80%9D%E2%80%93\\_Reintegration\\_of\\_Prisoners\\_in\\_Ireland.pdf](http://www.iprt.ie/files/%E2%80%9CIts_like_stepping_on_a_landmine%E2%80%A6%E2%80%9D%E2%80%93_Reintegration_of_Prisoners_in_Ireland.pdf) [Accessed 8 Aug. 2016].

- Martynowicz, A. and Quigley, M. (2010) 'It's like stepping on a landmine; Reintegration of Prisoners in Ireland', available online at [http://www.iprt.ie/files/%E2%80%9CIts\\_like\\_stepping\\_on\\_a\\_landmine%E2%80%A6%E2%80%9D%E2%80%93\\_Reintegration\\_of\\_Prisoners\\_in\\_Ireland.pdf](http://www.iprt.ie/files/%E2%80%9CIts_like_stepping_on_a_landmine%E2%80%A6%E2%80%9D%E2%80%93_Reintegration_of_Prisoners_in_Ireland.pdf) [Accessed on 3/3/2017].
- Maruna, S. (2001). *Making Good: How Ex-Convicts Reform and Build their Lives*. Washington, DC: American Psychological Association.
- Maruna, S., McNeill, F., Farrall, S. and Lightowler, C. (2012). Desistance Research and Probation Practice: Knowledge Exchange and Co-producing Evidence-Based Practice Models. *Irish Probation Journal*, 9, pp.42-54.
- Maschi, T. (2016). "Applying a human rights approach to social work research and evaluation", Springer.
- McGuire, J. (2002). Criminal Sanctions Versus Psychologically-Based Interventions with Offenders. *Psychology, Crime and Law*, 8, pp.183-208.
- McIlrath, L., Bates, C., Burns, K., Lyons, A., McKenna, E. and Murphy, P. (2014). Emerging Policy and Practices on Community-Based Research-Perspectives from the Island of Ireland. In: R. Munck, L. McIlrath, B. Hall and R. Tandon, ed., *Higher Education and Community-Based Research: Creating a Global Vision*. New York: Palgrave MacMillan.
- McKay, J. (2016). "Making the hard work of recovery more attractive for those with substance use disorders, *Addiction*, **112**(5), pp.751-757.
- McNeill, F. (2006). A Desistance Paradigm for Offender Management. *Criminology and Criminal Justice*, 6(1), pp.39-62.
- McNeill, F., Farrall, S., Lightowler, C. and Maruna, S. (2012). *How and Why People Stop Offending: Discovering Desistance*. [online] Glasgow: The Institute for Research and Innovation in Social Services. Available at: <https://www.iriss.org.uk/sites/default/files/iriss-insight-15.pdf> [Accessed 10 Apr. 2017].
- Mertens, D. (2005). *Research and Evaluation in Education in Psychology: Integrating Diversity with Quantitative, Qualitative and Mixed Methods*. 2nd ed. Thousand Oaks: Sage Publications.
- Miller, R. and Brewer, J. ed., (2003). *The A-Z of Social Research*, London, Sage.
- Molloy, C. (2013) 'A Faith for Future', the Furrow, Vol. 64 (4), pp. 196-207.
- Montgomery, C., Fisk, J. and Craig, L. (2008). The Effects of Perceived Parenting Style on the Propensity for Illicit Drug Use: The Importance of Parental Warmth and Control. *Drug & Alcohol Revs.*, 27(6), pp.640-649.



- Morley, C. (2003) 'All Coping, All Hoping: An Assessment of The Impact of Churchfield Community Trust, 2001-2003', Clarity Research, Development and Training Ltd.
- Motherway, B. (2006) 'The Role of Community Development in Tackling Poverty in Ireland; A Literature Review for the Combat Poverty Agency, available online at: [http://www.combatpoverty.ie/publications/TheRoleOfCommunityDevelopment-LiteratureReview\\_2006.pdf](http://www.combatpoverty.ie/publications/TheRoleOfCommunityDevelopment-LiteratureReview_2006.pdf) [Accessed on 3/3/2017].
- Munck, R., McIlraith, L., Hall, B. and Tandon, R. ed., (2014). *Higher Education and Community Based Research; Creating a Global Vision*, New York, Palgrave Macmillan.
- National Advisory Committee on Drugs and Alcohol, (2016). *Prevalence of Drug Use and Gambling in Ireland and Drug Use in Northern Ireland*,
- National Treatment Agency for Substance Misuse, (2009). *Breaking the Link: The Role of Drug Treatment in Tackling Crime*. [online] London: National Health Service. Available at: [http://www.nta.nhs.uk/uploads/nta\\_criminaljustice\\_0809.pdf](http://www.nta.nhs.uk/uploads/nta_criminaljustice_0809.pdf) [Accessed 6 Apr. 2017].
- Newton, B.J., Rothlingova, Z., Gutteridge, R., LeManchard, K. and Raphael, J.H. (2011) 'No room for Reflexivity? Critical Reflections following a Systematic review of Qualitative Research', *Journal of Health Psychology*, Advanced Access Published December 6, 2011, doi:10.1177/11359105311427615, available online at: <https://www.wlv.ac.uk/media/wlv/pdf/Newton-et-al-2011---No-room-for-reflexivity-online-version.pdf> [Accessed on 10/02/2017].
- O' Donnell, P. (2015) *Churchfield Community Trust Ltd., 2015 Annual Report*, Churchfield Community Trust.
- O' Keeffe, C. (2015) 'Drug Users 'need treatment, not Prison'', *Irish Examiner*, available online at: <http://www.irisht Examiner.com/ireland/drug-users-need-treatment-not-prison-342776.html> [Accessed on 15/02/2017].
- O'Brien, E (2015). *Churchfield Community Trust: 2014 Annual Report*. Cork: Churchfield Community Trust.
- O'Brien, E. (2009) 'Churchfield Community Trust Annual Report, 2009'.
- O'Brien, E. (2013) 'Churchfield Community Trust Annual Report, 2013'.
- O'Donnell, J. (1966). Narcotic Addiction and Crime. *Social Problems*, 13(4), pp.374-385.
- O'Donnell, P. (2016). *Churchfield Community Trust: 2015 Annual Report*. Cork: Churchfield Community Trust.
- Office of the Minister for Children (2007) 'Teenspace; National Recreational Policy for Young People, Summary' Dublin, The Stationery Office, available online at:



[https://www.deya.gov.ie/documents/publications/TEENSPACE\\_Summary\\_ENG.pdf](https://www.deya.gov.ie/documents/publications/TEENSPACE_Summary_ENG.pdf)  
[Accessed on 20/2/2017].

Padgett, D. (1998). *Qualitative Methods in Social Work Research*. Thousand Oaks, C.A: Sage Publications.

Padgett, D. (2008). *Qualitative Methods in Social Work Research*. 2nd ed. Los Angeles, C.A: Sage.

Padgett, D. (2013). *Qualitative methods in social work research*, Thousand Oaks, Calif, Sage Publications.

Pakes, F. and Winstone, J. (2007). *Psychology and crime*. Cullompton, UK: Willan Publishing.

Palmer, E., Hatcher, R., McGuire, J., Bilby, C., Ayres, T. and Hollin, C. (2011). Evaluation of the Addressing Substance-Related Offending (ASRO) Program for Substance-Using Offenders in the Community: A Reconviction Analysis. *Substance Use & Misuse*, 46(8), pp.1072-1080.

Pantin, G. (1992) 'SERVOL through the years 1970-1993', Port of Spain, Servol Ltd., available online at: <http://files.eric.ed.gov/fulltext/ED433911.pdf> [Accessed on 20/2/2017].

Patton, G. (2002). "Cannabis use and mental health in young people: cohort study." *BMJ*, **325**(7374), pp.1195-1198.

Payne, G. and Payne, J. (2004). *Key Concepts in Social Research*. London: Sage.

Perron, B. and Bright, C. (2008). "The influence of legal coercion on dropout from substance abuse treatment: Results from a national survey." *Drug and Alcohol Dependence*, **92**(1-3), pp.123-131.

Phillips, D. (2009) Reflective Positioning; The Impact of Conversations in the Social and Cultural Environment of Midwifery Practice Settings on Professional Learning for Students, Australia, Nova Science Publishers Inc., available online at: <http://dro.deakin.edu.au/eserv/DU:30028601/phillips-reflectivepositioning-2009.pdf> [Accessed on 25/3/2017].

Pobal, (2008) 'Social Inclusion of Ex-Prisoners and their Families: The Role of Partnerships', Dublin, Pobal.

Popple, K. (2015) *Analysing Community Work; Theory and Practice*, 2<sup>nd</sup> ed., Berkshire, Open University Press.

Presentation Sisters Union North East Ireland (2015) 'Churchfield Community Trust', available online at: <http://presentationsistersne.ie/initiatives/churchfield-community-trust/> [Accessed on 22/12/2016].

- Quigley, E., Hugues, B., Zobel, F. and Costa Storti, C. (2013). *Drug policy profiles*, Luxembourg, Publications Office.
- Redmond, S and Dack, B (2011). Working in Partnership to Reduce Youth Offending – A Baseline Report of Community Based Projects Supported by Young Persons’ Probation and the Irish Youth Justice Service. Department of Justice and Equality. Ireland.
- Ries, R. and Ellingson, T. (1990). “A Pilot Assessment at One Month of 17 Dual Diagnosis Patients”. *Psychiatric Services*, **41**(11), pp.1230-1233.
- Ritchie, J., Lewis, J. & Elam, G., 2006. ‘Designing and Selecting Samples’, in Ritchie, J. and Lewis, J. (eds). *Qualitative Research Practice: A Guide for Social Science Students and Researchers*, London, SAGE Publications.
- Ritchie, J., Ritchie, J., McNaughton Nicholls, C. and Ormston, R. (2014). *Qualitative research practice*, Los Angeles, SAGE.
- Rogan, M. (2012). Rehabilitation, Research and Reform: Prison Policy in Ireland. *Irish Probation Journal*, (9), pp.6-32.
- Rogan, M. (2014). Out of Balance: Disproportionality in Sentencing. [Blog] *Penal Reform International*. Available at: <https://www.penalreform.org/blog/balance-disproportionality-sentencing/> [Accessed 1 Apr. 2017].
- Rubin, A. and Babbie, E. (2009). *Essential Research Methods for Social Work*. 7th ed. United States: Cengage Learning.
- Rubin, A. and Babbie, E. (2010). *Essential research methods for social work*, California, Cengage Learning.
- Rubin, H. and Rubin, I. (1995). *Qualitative interviewing: The art of hearing data*. Thousand Oaks, C.A.: SAGE.
- Sacks JJ, Roeber J, Bouchery EE, Gonzales K, Chaloupka FJ, Brewer R (2013). “State costs of excessive alcohol consumption, 2006”, *Preventive Med.* **45** (4), pp. 74–85
- Schwandt, T. (2007). *The Sage Dictionary of Qualitative Inquiry*. 3rd ed. Thousand Oaks, C.A: Sage Publications.
- SERVOL (2012) ‘The History of SERVOL’, available online at: <http://www.servolt.com/history.html>. [Accessed on 10/3/2017].
- Seymour, M. and Costello, L. (2003). A Study of the Number, Profile and Progression Routes of Homeless Persons Before the Court and in Custody. Dublin: Dublin Institute of Technology.
- Shaw, I. and Gould, N. (2001). *Qualitative Research in Social Work*. London: Sage.

- Shaw, I. and Holland, S. (2014). *Doing Qualitative Research in Social Work*. London: Sage Publications.
- Silverman, D. (2011) '*Interpreting Qualitative Data, A Guide to the Principles of Qualitative Research*'. 4<sup>th</sup> ed., London, SAGE Publications Ltd.
- Skinner, S. (1997). *Building Community Strengths: A Resource Book on Capacity Building*. London: Community Development Foundation.
- Smith, C. And Thornberry, T. (1995). The Relationship Between Childhood Maltreatment and Adolescent Involvement in Delinquency. *Criminology*, 33(4), pp.451-481.
- Smith, J., Flowers, P. & Larkin, M. (2009) *Interpretive Phenomenological Analysis: Theory*.
- Social Workers Registration Board (2013) *Criteria and Standards of Proficiency Education and Training*, available online at:  
[http://www.coru.ie/uploads/documents/SWRB\\_Criteria\\_and\\_Standards\\_of\\_Proficiency\\_Education\\_and\\_Training.pdf](http://www.coru.ie/uploads/documents/SWRB_Criteria_and_Standards_of_Proficiency_Education_and_Training.pdf) [Accessed on 16/3/2017].
- Statham, J. (2011) *Working Together for Children, a Review of International Evidence on Interagency Working to inform the Development of Children's Services Committees in Ireland*, Department of Children and Youth Affairs, available online at:  
<https://www.dcy.gov.ie/documents/publications/wtfchildren.pdf> [Accessed on 02/03/2017].
- Steinhaus, N. (2014). "With or Without You" - The Development of Science Shops and Their Relationship to Higher Education Institutions in Europe. In: R. Munck, L. McIlrath, B. Hall and R. Tandon, ed., *Higher Education and Community-Based Research: A Global Vision*. New York: Palgrave MacMillan.
- Sterbenz, C. (2014). Why Norway's prison system is so successful. *Business Insider UK*. [online] Available at: <http://uk.businessinsider.com/why-norways-prison-system-is-so-successful-2014-12?r=US&IR=T> [Accessed 10 Aug. 2016].
- Stoecker, R. (2005). *Research Methods for Community Change: A Project-Based Approach*. Thousand Oaks, C.A: Sage Publications.
- Strand, K., Marullo, S., Cutforth, N., Stoecker, R. and Donohue, P. (2003). "Community-Based Research and Higher Education: Principles and Practices", Hoboken, John Wiley and Sons.
- Tan, A. (2009) '*Community Development Theory and Practice; Bridging the Divide between Micro and Macro Levels of Social Work*', Indianapolis, North American Association of Christians in Social Work, available online at:  
<https://www.nacsw.org/Publications/Proceedings2009/TanACommunity.pdf>. [Accessed on 9/3/2017].

- Taylor, S., Bogdan, R. and DeVault, M. (2016). "Introduction to qualitative research methods", Hoboken, John Wiley and Sons.
- Teater, B. and Baldwin, M. (2012). *Social Work in the Community*. Bristol: Policy Press.
- The Irish Prison Service (2013). *IRISH PRISON SERVICE RECIDIVISM STUDY 2013*. Dublin, Irish Prison Service.
- The Irish Prison Service, (2010). *Annual Report 2010*, Dublin: Irish Prison Service.
- The Irish Prison Service, (2016). *The Irish Prison Service Annual Report 2015*. [online] Longford: The Irish Prison Service Headquarters. Available at: [http://www.irishprisons.ie/wp-content/uploads/documents\\_pdf/12232-Irish-Prison-Service-AnnualReport2015-v7-2.pdf](http://www.irishprisons.ie/wp-content/uploads/documents_pdf/12232-Irish-Prison-Service-AnnualReport2015-v7-2.pdf) [Accessed 10 Apr. 2017].
- The Probation Service (2011), *The Probation Service: DRUG AND ALCOHOL MISUSE AMONG ADULT OFFENDERS IN PROBATION SUPERVISION IN IRELAND*. Dublin, The Probation Service
- The Probation Service, (2012). *Drug and Alcohol Misuse Among Adult Offenders on Probation Supervision in Ireland; Findings From Drugs and Alcohol Survey 2011*. [online] Meath: The Probation Service. Available at: <http://www.drugs.ie/resourcesfiles/research/2012/Drug+and+Alcohol+Misuse+among+Adult+Offenders+on+Probation+Supervision+in+Ireland.pdf> [Accessed 8 Aug. 2016].
- The Probation Service, (2013). *Probation Service Recidivism Study*. [online] Dublin: The Probation Service. Available at: [http://www.probation.ie/website/probationservice/websitepublishingdec09.nsf/AttachmentsByTitle/Probation+Service+Recidivism+Study+2008-2013/\\$FILE/Probation+Service+Recidivism+Study+2008-2013.pdf](http://www.probation.ie/website/probationservice/websitepublishingdec09.nsf/AttachmentsByTitle/Probation+Service+Recidivism+Study+2008-2013/$FILE/Probation+Service+Recidivism+Study+2008-2013.pdf) [Accessed 12 Aug. 2016].
- The Probation Service, (2013). *Restorative Justice Strategy*. [online] Dublin: The Probation Service. Available at: [http://www.probation.ie/website/probationservice/websitepublishingdec09.nsf/AttachmentsByTitle/Probation+Service+Recidivism+Study+2008-2013/\\$FILE/Probation+Service+Recidivism+Study+2008-2013.pdf](http://www.probation.ie/website/probationservice/websitepublishingdec09.nsf/AttachmentsByTitle/Probation+Service+Recidivism+Study+2008-2013/$FILE/Probation+Service+Recidivism+Study+2008-2013.pdf) [Accessed 12 Aug. 2016].
- Twelvetreets, A. (2008). *Community Work*. 4th ed. Basingstoke: Palgrave MacMillan.
- United Nations Office on Drugs and Crime (2012) 'Introduction Handbook on the Prevention of Recidivism and the Social Reintegration of Offenders, Criminal Justice Handbook Series', New York, United Nations, available online at: [http://www.unodc.org/documents/justice-and-prisonreform/crimeprevention/Introductory\\_Handbook\\_on\\_the\\_Prevention\\_of\\_Recidivism\\_and\\_the\\_Social\\_Reintegration\\_of\\_Offenders.pdf](http://www.unodc.org/documents/justice-and-prisonreform/crimeprevention/Introductory_Handbook_on_the_Prevention_of_Recidivism_and_the_Social_Reintegration_of_Offenders.pdf) [Accessed on 1/3/2017].

- University College Cork, (2017). *About CARL | Community-Academic Research Links UCC*. [online] Available at: <http://www.ucc.ie/en/scishop/ac/> [Accessed 6 Jan. 2017].
- Urek, M., 2006. "Narrative methods in social work research", Von der Idee zur Forschungsarbeit, *Forschen in Sozialarbeit un Sozialwissenschaft*, pp.413-434.
- Valentine, C., Bauld, L. and Walter, T. (2016). "Bereavement Following Substance Misuse" *OMEGA - Journal of Death and Dying*, **72**(4), pp.283-301.
- Valkow, N., Baler, R., Compton, W. and Weiss, S. (2014). "Adverse Health Effects of Marijuana Use", *New England Journal of Medicine*, **370**(23), pp.2219-2227.
- Weiss, R. (1994). *Learning from Strangers: The Art and Method of Qualitative Interview Studies*. New York: Free Press.
- White, W. (2009). "The mobilization of community resources to support long-term addiction recovery". *Journal of Substance Abuse Treatment*, **36**(2), pp.146-158.
- Whyte, B. (2004). Effectiveness, Research and Youth Justice. *Youth Justice*, 4(1), pp.3-21.
- Wild, T., Yuan, Y., Rush, B. and Urbanoski, K. (2016). "Client Engagement in Legally-Mandated Addiction Treatment: A Prospective Study Using Self-Determination Theory", *Journal of Substance Abuse Treatment*, **69**, pp.35-43.
- Williams, K.S. (2004) *'Textbook on Criminology'*, Oxford, Oxford University Press.
- Willott, S. and Griffin, C. (1999). Building your own lifeboat: Working-class Male Offenders talk about Economic Crime. *British Journal of Social Psychology*, 38(4), pp.445-460.
- World Health Organisation (2014). *Global status report on alcohol and health 2014*. Luxemburg: World Health Organisation.
- Yow, V. (2014). *Recording oral history*. London, Rowman & Littlefield.