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Chapter 8

Models of intervention

Iolo Madoc-Jones

Introduction

This chapter explores models of intervention that can be used to address offending behaviour. There are a several reasons for including a chapter on this topic, the first of these being that a number of authors have linked conceptual clarity on the part of those working with problem behaviour with effective practice (Rees 1978; Corby 1982; Mayer and Timms 1970; Schlichter and Horan 1981; Johnson 1981; Vennard 1997; Harper and Chitty 2004). These writers have typically been critical of those who adopt vague eclectic approaches to their work. By using models practitioners can better order, describe and understand events (Howe 1990). Clear models can also enable service users to better understand interventions. According to Ivanoff *et al.* (1994) a client has the right to understand the model that guides a practitioner's actions. By having models of intervention explained to them, clients might be better engaged in the change process and the impact of an intervention might be extended beyond the interview setting.

Secondly, while some research has suggested that some programmes adopting a cognitive behavioural model of intervention can be successful in reducing offending behaviour (Izzo and Ross 1990; Gendreau and Andrews 1990; McGuire 1995; Rex 2002), other research has suggested that very few criminal justice staff are familiar with the cognitive-behavioural model of change (Oldfield 1998; HMIP 2002, 2003). One reason for this might be that recently a wider range of people have come to play a role in addressing offending behaviour and for many of these untrained staff the cognitive-behavioural model of intervention is new (Kemshall *et al.* 2004). For others the space for critical reflection about the model might be limited. Gorman (2001), for example, suggests that exploring and questioning the cognitive behavioural model of intervention has been considered tantamount to an act of heresy in the Probation Service over the last few years. Whatever the cause, lack of familiarity with the cognitive model of intervention could have a detrimental impact upon the efficacy of practice.

Thirdly, and to the contrary, a number of publications have recently questioned whether the cognitive-behavioural model of intervention is the most effective in reducing offending behaviour (Mair 2000; Merrington and Stanley 2000; Worrall 2000; Gorman 2001; Oldfield 2002). Contemporary research, for example has not unequivocally shown that Home Office-sponsored accredited cognitive-behavioural programmes routinely produce reductions in reoffending (Vennard 1997; Mair 2004; Harper and Chitty 2004). What this creates is the need for other models of intervention to be understood because they might also have a contribution to make to reducing offending behaviour.

Finally, over time most professional groups develop a working model for practice (Thompson 1995; McNeil 2001). Informal or 'working', in the sense of not being academically recorded, such models are built up over time and are often culturally transmitted to new recruits. They are inevitably eclectic, being influenced by the approaches to practice that hold sway within any profession over the years (McNeil 2000, 2001). Exploring competing models of interventions can assist in the processes of clarifying and making sense of working models and help practitioners to avoid the trap of operating to eclectic approaches which are vague or based on common-sense assumptions which might be discriminatory.

For these reasons this chapter explores models of intervention for addressing offending behaviour. The chapter begins by considering how a model for intervention differs from a theory for intervention. Some of the theoretical positions that exist and that can underpin a model of intervention are then outlined. Next, the models of intervention that are used most widely in contemporary criminal justice practice with offenders are explored. The models considered are the cognitive-behavioural, task-centred, solution-based, person-centred and psychoanalytic models. In addition to these models, however, the radical model is also considered. This is because of the illuminating contrast this model offers to the other more conventional approaches to addressing offending behaviour. In exploring models the common format is adopted of first outlining the principles of the model and then considering the theoretical context which has shaped practice using the model. Following on from this some of the key issues related to the use of the model in the criminal justice system are explored, and the application of the model is illustrated using a recurrent case example. To conclude, the issue of how a model for intervention might be applied differently depending on the theoretical lens though which it is viewed is revisited. This sets the context for an understanding of how models might relate to each other and why a model of intervention might come in and out of fashion over time.

At various times the term offender or client will be used to describe the recipient of intervention. The rationale for using one over the other will be the precedent set for describing service recipients from within the particular model.

Models and theories

A model of intervention should be distinguished from a theory for intervention. According to Thompson (1995) a model describes a set of interrelationships but does not necessarily explain them. This is where theory comes in to offer a framework for understanding a model. Howe (1990) argues that in the field of interventions, all models have generally been underpinned and associated with particular theories about the nature of social reality and the nature of society.

According to Gergen (1999) two main positions exist in relation to the nature of social reality. These are the realist and the relativist positions. Realists believe that there are hard facts about social life and that these hard facts exist independently of people's subjective perceptions about them. For them there are rules to social life and all behaviour, including offending behaviour, can be understood in terms of these rules. As a result, people's own subjective ideas about why they behave the way they do are of little concern. Interventions based on this theoretical position focus on the person as an object, and on understanding the rules of social life to objectively diagnose problems and then to apply the correct treatment.

Relativists on the other hand reject the suggestion that there are hard facts about social life. They argue that the social world cannot be studied objectively in the same way as the natural world because humans act on the basis of their subjective ideas about what is going on. People's own ideas about why they behave the way they do is therefore of central concern to relativists. Interventions based on this theoretical position focus on the person as a subject, and on understanding the way people make sense of their worlds and then act.

According to Howe (1990) there are two theoretical positions on the nature of society. The consensus view is that society is most usefully examined as a well-ordered, stable and fair phenomenon. From this perspective whatever social problems exist, do not do so because of the way society is organised. As a result, interventions based on this theoretical position would focus on the individual as the source of problem behaviour. The conflict view on the other hand is that society is a fragmented, conflict-ridden entity. From this perspective social problems exist as a result of the unequal distribution of power in society. Interventions based on this theoretical position would therefore focus on society as a source of problem behaviours.

Different theories about the nature of social reality and the nature of society can give rise to very different interpretations of a model. This is an issue to which this chapter will return. However, for the time being it is sufficient to note as Howe (1990) does that most models of interventions have traditionally been associated with particular theoretical positions on the nature of social reality and society. These traditional associations make it possible to begin the process of examining models of intervention in a meaningful way.

The Case Study
Paul is the youngest of three children, now an adult aged 21. He has four convictions for theft, one for possession of heroin and has recently been convicted of an offence of robbery. One morning he punched a milkman to the ground and stole his money. Paul's mother and father split up when he was 10. His father died when he was 12. Paul did not do well in school and has no qualifications but he is literate. He is currently unemployed and lives with his mother. he says that his problems are that he cannot find a job, drinks too heavily and cannot stop using heroin.

Cognitive-behavioural models

Cognitive-behavioural models draw, with differing emphases, on the insights that derive from the behavioural and the cognitive schools of psychology.

Behaviourism starts from the premise that behaviours are learnt. One of the ways in which this happens was outlined by Skinner and called the process of operant conditioning (1938). He argued that all behaviours are subject either to reinforcement or punishment. Behaviours which are reinforced will tend to be repeated and become established while those which are punished will tend to be extinguished.

A behaviour can be reinforced in a positive or negative way. A behaviour is positively reinforced when it leads to a rewarding consequence and it is negatively reinforced when it avoids an aversive consequence. In this way a violent act, for example, might be positively reinforced if it leads to the acquisition of goods. Conversely a violent act might be negatively reinforced if it removes a perceived threat.

A behaviour can also be punished in a positive or negative way. A behaviour is positively punished when it leads to an aversive consequence and it is negatively punished when the behaviour leads to the withdrawal of something that was pleasurable. In this way an act of violence might be positively punished if it leads to pain or discomfort. Conversely a violent act might be negatively punished if it leads to an offender being ejected from their home on a cold night.

Other ways in which behaviours are learnt have been proposed by Bandura (1977) and Sutherland (1947). Bandura (1977) proposed that new behaviours are acquired, reinforced or extinguished at a distance – by observation of how others behave and what the consequences of that behaviour are to them. Sutherland (1947) proposed that behaviour is not only learnt when a behaviour and its consequences are directly observed but when an individual is exposed to people who hold favourable definitions towards a behaviour.

Approaches to addressing problem behaviours which draw on behavioural models are very straightforward in that the aim is to extinguish an undesirable behaviour (by adding punishments or removing reinforcers) and replace it with a desirable behaviour (by adding reinforcement or eradicating punishments). Behaviour modification of this kind is familiar to most parents with small children; it has also been used in hostels through the development of token economies wherein some behaviours are rewarded with tokens which can then be cashed in at the end of a specified period for a desirable reward. Approaches to practice which derive from both Bandura's and Sutherland's propositions are those which involve exposing offenders to pro-social environments and pro-social modelling.

By the 1960s many writers had begun to criticise behavioural accounts of learning for being incomplete. It was argued that they failed to consider that human beings had minds and that they might do more than simply react to their environments. Models therefore arose which gave cognition a more central role in explaining behaviour. Cognitive psychology focused on exploring the way individuals think (cognitive processes) (Ross and Fabiano 1985) or the thoughts that they have (cognitive products) (Beck 1976; Ellis and Greinger 1977; Yochelson and Samenow 1976). In the mid-1970s a number of authors published works that combined, with different emphasis, the ideas from the behavioural and cognitive traditions of psychology (Mahoney 1974; Goldfried and Merbaum 1973; Meichenbaum 1985). In general practitioners who adopt cognitive- behavioural models tend to consider a behaviour not as an event but as a process which begins with a stimulus that engenders thoughts and feelings, leading to actions which have either reinforcement or punishment consequences.

As Blackburn (1995) states, however, the cognitive-behavioural model lacks a unitary theoretical framework, and reflects an uneasy alliance of disparate philosophies. This is because 'cognition' or cognitive ability can be interpreted as just another biological or environmentally determined capacity (Ellis and Greinger 1977; Ross and Fabiano 1985), or as 'free will' in action. There are interpretations of the cognitive behavioural model therefore which cast the person as either an object or a subject. In the former case the interventions that follow focus on an offender's external environment or their genetically or environmentally determined cognitive skills levels. In the latter case, however, what offenders think, rather than how they think, is much more of a central concern (Yochelson and Samenow 1976).

Either way, the cognitive behavioural model has been criticised for promoting an approach to practice that fails to recognise or address the wider structural, cultural or discursive factors that might give rise to offending behaviour. Milner and O'Byrne (1998) point out that even when a practitioner using the cognitive behavioural model accepts that social conditions have a part to play in offending behaviour, they are normally only concerned with a person's immediate environment. Equally when there is a focus on an offender's thoughts, the concern is with the thoughts of the individual in isolation from the society they inhabit.

Key issues

Cognitive behavioural approaches represent the mainstay of current rehabilitative practices in the statutory UK criminal justice context. Numerous studies suggest that cognitive behavioural approaches have been effective in reducing reoffending (Izzo and Ross 1990; Gendreau and Andrews 1990; McGuire 1995; Rex 2002).

According to Kendall (2004) a particular interpretation of the cognitive-behavioural model has come to dominate practice in the statutory criminal justice context of England and Wales. One principle underpinning what she calls correctional cognitive behaviourism is that crime is considered to arise primarily from the cognitive choices individuals 'freely' make. The way that social environments and social exclusion may limit the behavioural options available to people is downplayed. Correctional cognitive behaviourism on the other hand also focuses on cognitive deficits. In doing so it straddles theoretical positions and moves from a theory of crime as a specific behavioural event to criminality as an inherent tendency. Hence as well as embracing the ideas of free will, the correctional cognitive behavioural model also embraces the deficit notion that those who offend are ill or different from 'normal' people. The offender is then pathologised and words such as 'treatment' are embraced to describe the process of intervention. Integral to this notion of treatment is a 'doctor–patient' relationship and a power imbalance in terms of expertise and knowledge between the receiver and the giver of treatment. Objections to this are that such an approach underestimates the prevalence of criminal behaviour, and that the resulting therapeutic process accords a low priority to what offenders themselves have to say about why they offend and what might help.

Case example: cognitive-behavioural practice
Paul's probation officer identifies that Paul evidences deficits in his cognitive skills. As a result he arranges for Paul to attend the Think First programme which attempts to develop participants' critical reasoning, empathic, lateral thinking and decision-making skills. At the same time the probation officer gives Paul homework to do – he is required to gather evidence, to discuss at the next supervision session, to justify his belief that he 'will never stop using heroin' and that his crime and drug taking 'is not that bad'. The probation officer hopes that Paul will realise that his thoughts and beliefs are not accurate and will exchange these maladaptive thoughts for those that make it less likely he will reoffend.

Task-centred models of intervention

The task-centred model was first articulated by Reid and Epstein (1972) and is a variant of brief therapy which Eckert (1993) defines as 'any

psychological intervention intended to produce change as quickly as possible' (in O'Connell 1998: 2).

The task-centred model is largely pragmatic in nature, being focused on the completion of tasks that will directly help the client with their problems. Hence the approach is often termed 'problem-solving'. In the task-centred model insight into how and why a problem arose is not considered to be important. On the basis of the belief that the best way to achieve results is to take action (Milner and O'Byrne 1998), what is considered important is that specific, measurable, achievable, realistic and time-limited (SMART) objectives are set for the future and then acted upon.

Doel and Marsh (1992) suggest that problem identification is a key stage in task-centred practice. They suggest intervention should begin with a list being compiled that includes all the client's problems. Next the worker and client should identify whether there are any common themes and what priorities should be set for action. Following on from this, the worker and the client should focus on one or two problems and set goals in relation to them. Task-centred practice usually leads to the creation of a contract between the worker and the client, setting out in very clear SMART terms tasks to be completed between intervention sessions. The tasks are designed to lead the client incrementally towards the goal that has been identified.

Milner and O'Byrne (1998) identify a number of possible tasks that a client might perform. Among them are exploratory tasks that involve actions which lead to further examination of the problem, e.g. keeping a diary, interventive tasks that involve actions which go some way to solving a problem, e.g. going to the job centre, and reversal tasks which involve doing the opposite of what the person has been doing, e.g. going out socialising instead of staying in. A key element to these tasks is that they are positive, that is they involve doing something rather than not doing something. Within intervention sessions the focus is primarily upon quantifying progress toward goals, reviewing progress, discussing obstacles to change and what the client has learnt from undertaking new behaviours.

According to Milner and O'Byrne (1998) and O'Connell (1998) in traditional task-centred practice clients are considered to be free agents, essentially capable of making meaningful decisions about how they behave. In task-centred practice therefore what clients would have to say about why they offend is critical and as a result they have typically defined their own problems and set their own individual and SMART goals for the future. As a result the objective doctor-patient hierarchy associated with the worker–client relationship in correctional cognitive behaviourism is often replaced with a collaborative egalitarian and reflective relationship.

While on the face of it there would appear to be no reason why the task-centred model could not embrace the notion that problem behaviours stem from problem environments, and hence be used to design plans that seek to challenge inequality and oppression, the model has primarily been used by those who locate problem behaviour at the level of the individual and how they see and respond to the circumstances they face (Milner and O'Byrne 1998).

The emphasis within the task-centred model on problems and the choices people make in relation to them lays it open to charges of having a negative focus and ignoring social context. However, this is countered by supporters of the method who argue that it is the problem rather than the person that is usually the client and a client may chose to focus on whatever problems they want (Doel 1998). As a result it is argued the model presents as being less susceptible than cognitive-behavioural approaches to charges of pathologising offenders or of being oppressive to groups whose offending is related to social exclusion.

Key issues

Research exists which suggests that working with client goals is more likely to lead to positive outcomes than working to goals set by workers (Trotter 1999). In the statutory context, however, Trotter (1999) has noted that workers often deal with involuntary clients whose motivation for change, level of insight into problems and commitment to a therapeutic relationship is low. In such instances getting clients interested in setting their own goals, let alone allowing them to define these goals by themselves, is problematic. Nontheless the task-centred model has been successfully used in the criminal justice context (Trotter 1999, Andrews *et al.* 1979; Rubin 1985; Kurtz and Linnemann 2006). At these times the model has had to be combined with motivational interviewing techniques to encourage engagement in the change process.

Case example: task-centred practice

In an interview Paul and the worker identify the problems he faces. Exploring these problems in more detail they agree that drinking is an obstacle to him dealing with his other problems and should be a key focus for work. Paul believes that membership of an AA group might help as he thinks controlled drinking to be beyond him, but he says he is too shy and paranoid to attend such a group by himself.

Aim – Paul to bring his drinking under more control.

Objective 1 – Paul to begin attending AA on a weekly basis.

Process:

- *Week 2* – Paul will be met at his home by an AA volunteer. They will both go to an AA meeting and then they will return to his home.
- *Week 3* – Paul will be met at his home by the volunteer. They will both go to an AA meeting. Paul will return home on his own.
- *Week 4* – Paul will meet his volunteer at the AA meeting and return home on his own.
- *Week 5* – Paul will meet his volunteer at the AA meeting. They will not sit together. Paul will return home on his own.
- *Week 6* – Paul will go to the AA meeting and return home on his own. When he gets back he will be met by his volunteer.
- *Week 7* – Paul will go to the AA meeting and return on his own.

According to Kurtz and Linnemann (2006) most of the literature indicates that beyond a certain level the length of supervision or contact between a worker and a client has little influence on the future criminality of the client. Similarly Reid and Shyne (1969) identified that interventions that were allowed to run on and on were no more or less effective than those that were cut short The 'brief' nature of task-centred approaches may therefore have much to offer in terms of efficiencies to agencies involved in the criminal justice system.

Solution-based models of intervention

The solution-based model was popularised by de Shazer (1984 1985) and Berg (1991, 1992, 1994) from the 1980s onwards and is usually considered to invert the focus of the task-centred model while maintaining many of its features. Instead of focusing on problems the solution based model of intervention focuses on solutions.

The solution-based model eschews problem talk and begins from the premise that whatever problems or difficulties a person faces, there are likely to have been times when they did not exist or were more manageable. The solution-based approach is to concentrate on these exceptional times, and therefore those occasions when the person had clearly found their own solutions to their problems. The aim is then to amplify, sustain and develop the person's own unnoticed strengths and resources (Lee *et al.*, 2003). Because of this, it is an approach to practice often described as strengths based.

Solution-based models embrace a systems perspective. A person is therefore considered to be part of a system that involves interrelated and connected parts. Change in one part of a system is thought to be capable of leading to change in another. Because of this, there is no assumption that any solution has to neatly fit a problem in a linear fashion. Hence if finding employment, for example, had worked in the past as a solution to domestic violence, it would be a legitimate goal for the client to set for themselves.

Identifying and clarifying appropriate goals are key tasks for the worker in solution-based approaches. Various techniques are used to help clients identify goals as a prelude to setting SMART objectives for the future. The first of these involves the use of scaled questions wherein individuals are required to design a scale from zero to ten, with ten representing their particular problem being absent or manageable, and zero their problem at its worst. A client is then invited to identify where they sit on the scale at present and consider what would need to happen for them to move up the scale to the next point and nearer their desired end state The purpose of scaled questioning is to break the change process down into easier and more manageable steps and to encourage an individual in the change process with small successes.

Miracle questions are also used to identify goals and solutions. A miracle question would resemble the following: 'Suppose tonight, while you were

asleep, a miracle happened (or a fairy godmother came) and the problem was ended, how would you know? Or what would be different, or what would spouse/parent see? What would you be doing?' The response to such a question can highlight solutions to the problem which can then be considered for implementation.

As in the case of the task-centred model, the client is centre stage and considered to be acting intentionally at all times. As was the case with the task-centred model there is no reason why the solution-based model could not be used to promote social change (Milner and O'Byrne 1998). However, the model has rarely been used for such purposes, and has been primarily used to focus on the individual and the way they are dealing with their social circumstances.

Key issues

Research exists which positively evaluates the effectiveness of strengths-based practices with offenders (Clark 1997; Van Wormer 1999; George *et al.* 1990; Early and Linnea 2000). In the criminal justice context, solution-based models have been used in respect of domestic violence (Sirles *et al.* 1993; O'Hanlon and Hudson 1992) and sexual abuse (Dolan 1991).

While the popularity of solution-based models is growing (O'Connell and Palmer, 2003), most published accounts of solution-based approaches refer to practice in the voluntary sector of United States of America. There is a dearth of publications regarding solution-based approaches in the statutory criminal justice context and in the United Kingdom. One reason for this in the UK might be that the solution-based model places the client's views centre stage, deliberately avoids problem talk and does not assume that a solution has to neatly 'fit' the problem. This might be problematic in the statutory UK context where offence focused work has come to be considered an integral and necessary part of rehabilitative practices. Equally because the solution-based approach focuses on strengths, it might, in a punitive cultural climate, be considered too much of a soft option. The common belief that offenders should be punished and that they experience guilt when reflecting on their past behaviour, would undoubtedly give greater legitimacy to approaches that directly focus on past offending behaviour.

Person-centred models of intervention

Person-centred models are based on the positive view that a person who is fully in touch with their inner self would be pro-social in their attitudes and behaviours. The goals of a worker using this model are to establish a warm and genuine relationship with a client so that the client can be freed up to discuss, explore, develop and realise their inner self (Rogers 1992). The person-centred worker attempts to tune into the client and then to reflect back to them what they are saying, so that the client develops

Case example: solution based practice
Using a solution-based model, a drug worker engages with Paul who identifies that in the future he would like to be working full-time as a chef. In a session that eschews problem talk, the worker asks Paul the miracle question: 'Suppose that you wake up tomorrow morning and found you did have a full-time job as a chef what would you notice that was different?' Paul identifies that he would have more qualifications for being a chef on his bedroom wall, he would be heroin free, he would be associating with people who also work and do not offend. Next Paul and the worker set out on a scale, weighted towards solutions, with the above scenario representing ten on the scale and the reverse – having no job or qualifications, using heroin every day, being with friends who offend and don't work at zero. The worker and Paul identify that in relation to this scale at present Paul is at four – a situation where he uses heroin regularly (but not everyday) has no qualifications and only rarely spends time with other people who work and do not offend. The worker invites Paul to identify what would be necessary to move from four on the scale to five, and Paul identifies getting more friends who don't use heroin as his priority. Accordingly Paul and the worker devise a SMART plan to put this into effect.

and sharpens their understanding and appreciation of themselves (Rogers 1992). The way the worker does this is through the exercise of unconditional positive regard and empathy.

Unconditional positive regard is important because only in the presence of such regard will a person be truly free to explore their perceptions. Empathy is important because it allows the worker to tune into the client so that the worker comes to reflect the client's perceptions, allowing the client and worker to work together to explore perceptions and feelings in more depth (Rogers 1992). Rogers describes empathy as:

> Entering the private perceptual world of the other and becoming thoroughly at home in it, being sensitive, moment by moment, to the changing felt meanings which flow in this other person, to fear, rage or tenderness or confusion or whatever s/he is experiencing. It means temporarily living in the other's life, moving about in it delicately without making judgments. (1980: 142–3)

Rogers is often considered to be one of the founding fathers of the person-centred model. He was of the view that human beings are intentional social beings who strive towards realisation, that is to making sense of themselves and the world around them (1961). Traditional person-centred approaches say very little about the nature of society. Person-centred workers typically

locate the source of difficulties within the person rather than society, and seek change at the level of the person.

Key issues

In one respect the goals of person-centred approaches are ambitious. It is a holistic approach which seeks to work with people to deal with existential matters. On the other hand, however, the goals are quite small in that developing an empathic relationship, and an understanding of the other person's perspective are considered to be positive ends in themselves (Thompson 1992). One consequence of this, however, is that person-centred practices defy easy quantification and measurement. This might well represent a considerable problem in light of the significance of performance management and target setting in the statutory and non-statutory criminal justice context.

The approach taken by person-centred workers is usually described as non-directive and exploratory. The worker does not tell the client what to do. As was the case with solution-based approaches, that this means the focus is not directly on offending behaviour would be problematic in the contemporary statutory criminal justice context. It might also lay the model open to the same accusations of being soft on offenders as the solution-based model.

The approach is based on reflective exchanges between the therapist and client. A typical offender's experiences of education and life may mean, however, that they lack familiarity with reflective thinking and non-directive exchanges. Relationship building is at the heart of the approach, but in the statutory criminal justice context the notion that a relationship of trust, understanding and unconditional positive regard can be developed when contact is statutorily mandated and the worker is duty bound to report significant disclosures or breaches is problematic.

Burnett and McNeil (2005) also argue that, while for decades the casework relationship has been at the heart of statutory criminal justice interventions, recently the emphasis on accredited group-work programmes and case management has reduced the opportunities for workers to develop a meaningful relationship with clients. This may however be considered less of an issue in the non-statutory setting and especially in residential facilities where staff might still experience extended and prolonged contact with offenders.

Rogers (1961) argued that empathy and unconditional positive regard were sufficient conditions for effective change to take place. More recently, however, these qualities have been considered the starting point for effective practice. Vennard (1997), for example, found that 45 per cent of the variance in outcomes between intervention programmes could be attributed to whether the workers involved expressed empathy and positive regard for their clients.

Case example: person-centred practice
In a series of sessions focused on Paul, the worker and Paul develop a therapeutic relationship, which leads to Paul opening up about his life and his feelings. In person-centred terms this is an end in itself. In one session he explores his hopes, fears and aspirations about life:

Paul: I don't know how I ended up in this situation really and how it's going to end up.
Worker: You feel concerned about the future.
Paul: Yes, if I don't change things soon I'm afraid I'll end up dead or in jail for a very long time.
Worker: Change is something you think is important but which seems to scare you.
Paul: Yes, that's right, I mean I don't know any other life and I'm sure I'd just mess it all up and end up back where I started.
Worker: Fear of failing is stopping you from starting then?
Paul: Yes that's right I suppose but if I don't do something then that's bad too.
Worker: You seem worried about the path you're on but at the same time scared to try another path. That sounds like quite a difficult position to be in.
Paul: It is, but I guess it's also true that doing something is no worse than doing nothing isn't it?
Worker: That would seem to be true from what you've said.
Paul: I could try.

Psychoanalytical models of intervention

Psychoanalysis was outlined by Freud who proposed that people had personalities which were made up of three separate systems interacting with each other called the id, the ego and the superego. The id is the instinctual part of personality and it resides in the unconscious. The main goal of the id is to satisfy basic impulses as immediately as possible. The superego reflects the internalisation of society's rules. The main goal of the superego is to maintain the very highest standards of behaviour. The ego is the part of the personality that develops as a person experiences reality. It is the rational, reasoning part of personality and the part that tries to find ways of satisfying both the id and the superego. In simple terms, the ego is the umpire in the middle, balancing the demands of the id with the demands of the superego. For example, the ego must strike a balance between the id which might tell someone who sees a small amount of money on the floor to just 'Take it', and the superego which might say 'You should not steal and must return the money to its owner'. Freud argued that if a balance

is not struck that satisfies both the id and the superego, then tension and disturbance would be created. To manage this tension an individual might deploy defence mechanisms which might lead them, for example, to deny their feelings or repress them into their unconscious.

Freud proposed that an inner balance would only be struck if adults as children had successfully negotiated five stages of psychosexual development. The details of these stages are not important here but Freud called them the oral, anal, phallic, latent and genital phases. It is with the introduction of psychosexual concepts that many people begin to struggle with Freud's ideas. Essentially he proposed that the sex drive was one of the more powerful of the id drives and that satisfying this drive in an acceptable way was the key to healthy development.

The intervention based on Freud's ideas is called psychodynamic or psychoanalytic therapy, and it is a form of intervention that encourages a client to revisit the stages of development and explore their unconscious inner selves and conflicts. As the client talks, it is expected that problems will reveal themselves from the unconscious either in repetitive patterns of behaviour, in dreams, the words the client uses, the subjects they avoid, the way the client relates to the worker or in slips of the tongue (Freudian slips). As the client explores past events significant relationships from the past are recreated in the dynamic between the therapist and client in the present. This gives rise to the possibility of revisiting traumatic relationships or incidences and successfully negotiating them in the present.

Freud's ideas are immensely complicated and it would not be possible to do justice to them here. While many people find some of his ideas unpalatable, according to Payne (1995) they have been influential in establishing a whole range of psychotherapeutic approaches. At the heart of most psychotherapeutic approaches are the beliefs that that actions arise from thought processes, that people have unconscious motivations, that past disturbances cause present difficulties and that talking about problems can lead to insight and change.

Psychodynamic approaches attribute problem behaviours to problem environments in a client's past. Because of this the client is generally seen as a passive victim of their life and an object of assessment and intervention. Traditionally the model for intervention has had very little to say about society, the focus of intervention is the individual client and the concern is with how they might be helped to accommodate themselves to their world.

Key issues

Psychodynamic models of working were used extensively in the criminal justice system of the USA and UK at the time when the What Works? research was suggesting intervention programmes with offenders, in general, did not work. Psychoanalytical and psychotherapeutic practices therefore fell considerably out of favour over the ensuing two decades.

However, it is worth noting that Martinson, the author who originally published research which was widely quoted as suggesting that 'nothing works', actually withdrew his conclusion some years later commenting on the potential effectiveness of a range of intervention models and mediums including individual and group psychotherapeutic approaches.

> Startling results are found again and again in our study for programmes as diverse as individual psychotherapy, group counselling, intensive supervision and 'individual' aid, advice, counselling. (1979: 254).

Psychodynamic and psychotherapeutic approaches share the ambitions of person-centred models in seeking to address fundamental concerns at the heart of a person's being. Because of this, however, they can still be accused of targeting what has become known as non-criminogenic as opposed to criminogenic needs. Non-criminogenic needs are those needs which, it has been argued, are not in themselves likely to cause future criminality, e.g. anxiety and low self-esteem.

In the contemporary climate, a problematic feature of Freudian-based psychoanalysis is that practice is prolonged. Typically, counselling from a Freudian perspective involves long-term treatment with the therapist and client meeting a number of times a week. Its practicality is therefore particularly questionable, for example, in a custodial setting or in the context of large caseloads of offenders to be managed.

Case study: psychoanalytic practice

In lengthy counselling sessions with his worker, Paul uncovers from his unconscious details about his abusive experiences as a child at the hands of his birth father. Over a period of years the worker helps Paul to contextualise and verbalise his experiences, to transfer some of his feelings on to the therapist and work through them. Paul learns that he is angry at his father and especially for the fact that he died when Paul was only 12. Paul learns that he has internalised a sense of himself as being worthless, and it is this which prompts him to act self destructively. Paul feels that as the youngest child, he was ignored and that despite the abuse his mother doted on his father. Paul comes to understand that much of his violent behaviour is associated with his desire to be more like his father in order to have a better relationship with his mother and be more important to her.

Radical models of intervention

Instead of focusing on individuals as the source of problems, radical models focus on society and seek to reduce offending behaviour by changing the nature and structure of society. The key to radical models is that intervention moves beyond the idea of psychological deficit to having an emphasis on collective working to achieve societal change.

Radical models emphasise empowering practices. Empowerment literally means 'becoming powerful' and while it has become something of a buzzword, and often means different things to different people, to radical practitioners it is an approach to practice 'concerned with how people may gain collective control over their lives, so as to achieve their interests as a group' (Thomas and Pierson 1995: 134). For Gutierrez (1990) empowerment involves actions which increase the self-efficacy of service recipients and develop self and group consciousness concerning the effects of power and oppression. For her, empowering practices help service recipients appreciate how political and social structures contribute to personal or group powerlessness and problems. Because individuals are always less powerful than groups, empowering practice tend to focus on collectives, and seeks to network and link individuals in similar situations together. As collectives they might then engage in direct action to change local and national service provision.

Radical models can be very varied. As long as an approach defines its aims in terms of raising awareness about the impact of power, it would warrant the broad title of being a radical model of intervention. Conceived in this way, there is no reason why any of the models discussed thus far could not be adapted for radical ends. Having said this, depending on whether the model conceived of human behaviour as under voluntary or external control, the goals of radical practice might differ. In the case of models embracing the notion of behaviour as being under voluntary control, increased consciousness of the effects of power and oppression might be considered a goal in itself. In the case of models embracing the notion of behaviour as conforming to objective laws, consciousness-raising might simply represent a beginning step on the road to more direct collective action.

Key issues

Radical models are often considered to be 'political' in nature but to assert this only in the case of radical practices is to ignore the political nature of all interventions. As Worsley (1977) points out, 'The position of being uninvolved is of course itself a position. It tacitly entails letting things go on as they are' (p. 72) (in Thompson 1992: 15).

Psychologically based approaches can also be described as political. Rose (1996), for example, has commented extensively upon the 'psy-complex', the term given to the ideological function of psychological knowledge, theory or practice in the regulation and maintenance of society. By failing to address how social conditions give rise to offending behaviour it might be argued that the correctional cognitive-behavioural, or traditional task-centred models are political. By not challenging the existing order they might be accused of being supportive of the prevailing liberal political climate, capitalist orthodoxy and the unequal distribution of power in society.

Whether there is scope for radical models to inform contemporary statutory criminal justice practice, however, seems doubtful. Such an approach would have to be maintained against a backdrop of accusations of political correctness and, by focusing on social structure not individual responsibility, of being soft on offenders (Stepney 2005). While as recently as 2000 McNeil found that many criminal justice staff stressed the significance of social factors in the lives and behaviour of offenders, Kendall (2004) and Stepney (2005) suggest the pre-eminence of neo-liberal philosophies emphasising choice and responsibility, and the corresponding promotion of supervisory practices which are offence-focused, reduces the opportunity for statutory staff to engage with radical models of intervention. While radical practice has always been more commonly associated with the non-statutory and voluntary sector, the advent of the mixed economy of welfare and the increasing reliance of the non-statutory sector on statutory funding may impact upon the continued ability of agencies in these sectors to remain sufficiently independent to engage in radical practice.

The concern within radical models to move beyond individual psychology foregrounds the preoccupations within most models of intervention with the personal psychology of offenders as opposed to the structures of society and with the individual in isolation from their social and economic contexts. In some cultures the rights of the individual are not emphasised and the duties that arise from being part of a family or social group are more important. Radical models are not necessarily more sensitive to such issues of diversity. However, by foregrounding issues of power they present as models that offer a more embedded challenge to routine ways of approaching people and the difficulties they face.

Case study: radical practice

Paul's worker recognises Paul's status as a black working-class man who, in a time of high employment, has been pushed to the margins of society. The worker does not suggest to Paul that his problems are all of his own making, or arise from inner drives or cognitive deficits; rather the worker engages with Paul to help him recognise how there are powerful groups in society who protect their own interests and reduce the opportunities available to others. The worker puts Paul in touch with other young black men who are experiencing difficulties and together they develop their understanding of how issues of race, class and gender influence their lives. They work as a group with the worker to bring their concerns to the attention of the local authority and they seek funding for a mentoring project with young black men, and challenge employers who fail to create work opportunities for those with criminal records.

Reviewing models for practice

Several models of intervention have been considered in this chapter. These models were associated with particular perspectives on the nature of social reality and of society. While this approach made it possible to make a start on understanding the models in question, it had the side effect of presenting models in a vary static way. In fact models of intervention are very fluid constructions. This is because, depending on the theoretical lens through which they are viewed, they can be interpreted in many different ways and support many different practices.

For example, it has already been mentioned that the cognitive behavioural model could be interpreted so as to embrace a conceptualisation of the person as either object or subject. As a result the model can support a range of interventions – those focused on an offender's social environment, on their cognitive skills or on their thoughts and beliefs. The correctional cognitive-behavioural model on the other hand straddles this dichotomy and embraces what might be termed a compatibilist position of the person as both object and subject.

In these two interpretations of the cognitive-behavioural model the individual person or their immediate environment is the target for intervention. However, other interpretations of the cognitive behavioural model exist which are underpinned by a critical theoretical framework (Ulman 1990). Such interpretations foreground the way the ideology underpinning the unequal distribution of power in society creates the environmental conditions which might support offending behaviour. An example of such an approach might be a domestic violence perpetrator's programme which, while adopting a cognitive behavioural model, recognises how the ideology of patriarchy impacts upon people's environment and cognitions.

The cognitive behavioural model is not alone in being open to a range of interpretations depending on the theoretical lens through which it is viewed. While the task-centred and solution-based models were associated with the relativist argument that people are intentional in their actions, and the consensus view that society is essentially fair and just, it would be possible to apply both models within a realist framework or a conflict view of society. While Doel and Marsh (1992) argue that forcing clients under threat to engage with the task-centred model would be against the spirit of the model, task-centred 'treatment' plans could be drawn up for offenders to follow. Equally the model could be used with individual offenders, groups of offenders or high crime communities to challenge existing social arrangements.

Similar reworking of the person-centred and psychotherapeutic models have taken place. Attempts have been made to locate both models within a more critical theoretical framework to recognise the role of power and its impact on the person (Proctor *et al.* 2006).

Just as models traditionally associated with the consensus view of society can be reinterpreted to embrace a view of society as in conflict, radical models, with their focus on empowerment, consciousness-raising and collective action, can be reinterpreted to embrace a more modified consensual view of society. It might be argued that such a reinterpretation of the radical model would involve it becoming colonised and domesticated in the service of the status quo. Then describing what is left as a 'radical' model of intervention becomes something of a semantic problem. However, collectives have been formed, especially in the non-statutory contexts, to empower service users to make claims for services. These collectives seek small-scale changes and reform of the system rather than revolutionary changes in society. As Morley states, empowerment or radical practice can often be pursued without challenging or even 'without necessarily acknowledging that a major cause of powerlessness is social and economic inequality' (1995: 35).

If a model of intervention allows of a different interpretation depending on the theoretical lens through which it is viewed, it follows that so long as the underlying theoretical assumptions remain the same, different models of intervention might be meaningfully combined by practitioners. While eclecticism in practice has been subject to some criticism (Rees 1978; Corby 1982; Mayer and Timms 1970; Schlichter and Horan 1981; Johnson 1981; Vennard 1997), the primary target of this criticism has been vague eclecticism as opposed to eclecticism per se.

Fashions and trends in models of intervention

Having discussed models of intervention and how they might be interpreted and combined effectively, what remains to be considered is how a particular model of intervention might come to be favoured over others at any particular point in time.

The intellectual traditions of liberalism, conservatism, Marxism and social reformism have exerted an important social and political influence over the centuries. Much like models of interventions, these traditions contain influential assumptions about human nature and the nature of society. These traditions should not be confused with political parties of similar names. Political regimes and parties often distort these traditions or invoke a mixture of different ones at different times in their history. However, the fact they do this highlights that at different times different assumptions about human nature and society are to the fore. Models of interventions can either accord with the social and political mood of the time or not. In this way models of intervention can fall in or out of favour or become reinterpreted over time (McWilliams 1987).

The post-Second World War period, for example, was characterised by optimism over the ability of the state to create a better society for all. As a result of this mood of optimism the welfare state and the NHS

were established in the UK. An integral part of this optimism was the belief in the ability of science to offer real answers to some of society's problems. During this time models of interventions which seemed to offer a science for practice came to the fore. Behavioural and psychotherapeutic approaches primarily drew on realism and the notion that behaviour could be understood and changed in a planned, systematic and scientific way.

The 1960s and 1970s on the other hand were decades when there was a general challenge to traditional orthodoxies within society. Civil rights movements sprang up across the Western world in an effort to address and challenge racial and gender discrimination. The scientific certainty of the modern period gave way over these two decades to uncertainty and eventually within the field of interventions to increased interest in radical models of interventions. These interventions appeared to offer a real challenge to the existing, and seemingly oppressive, traditional structures of society.

Since the turn to the right and to conservative/liberal thinking from the late 1980s onwards, models of intervention that focus on choice and freedom have come to greater prominence. The current popularity of the compatibilist correctional cognitive-behavioural model may owe as much to its resonance with the 'tough on crime, tough on the causes of crime' mantra of New Labour and to its managerial concerns than to research which suggests that it is a model of intervention which is effective in reducing offending behaviour.

Conclusion

In the non-statutory context, staff are more likely to be in contact with offenders in informal settings and to be less subject to the managerial pressures that require them to adopt particular models of intervention. As a result various models of intervention are likely to guide work with offending behaviour in these contexts. Such therapeutic freedom of expression is not without its problems, however. As stated, numerous authors have identified a tendency for deregulated practice in social care contexts to become unhelpfully vague and eclectic (Rees 1978; Corby 1982; Mayer and Timms 1970; Schlichter and Horan 1981).

In statutory criminal justice practice, however, a particular cognitive behavioural model of intervention underpinned by a specific theoretical framework has been championed. Offenders are primarily considered to offend because they have cognitive skills deficits which lead to faulty thinking. The proper intervention from this perspective looks to develop an offender's cognitive capacities and critical thinking skills in particular. While such championing of a model and theory may address many of the problems that arise from rampant eclecticism, this one-size-fits all approach to statutory intervention has been subject to some considerable criticism (Mair 2004; Smith, 2004; Kendall 2004). This criticism arises as a result of

research which suggests that cognitive behavioural interventions have not been as effective as first thought (Mair 2000; Merrington and Stanley 2000; Worrall 2000; Gorman 2001; Oldfield 2002). Equally however it arises from concern over whether there is still scope for reflective and critical practice to take place and for adapting and developing interventions to meet the diverse experiences and needs of individuals who come into contact with the criminal justice system.

This chapter has sought to make a contribution to developing a more critical appreciation of models of intervention. Six models were considered along with the theoretical perspectives that could inform how the models might be interpreted and combined. As omnipresent as cognitive behavioural approaches are in the statutory context, it has been highlighted that models of intervention are likely to continue to come in and out of fashion or be reinterpreted as the social and political climate changes.

Discussion questions

1 To what extent does having a model for intervention (with all its traditional theoretical assumptions) make obsolete or subvert the process of assessment?
2 What scope is there for criminal justice practitioners to embrace the radical model of intervention?
3 What theoretical assumptions about the nature of social reality and the nature of society underpin and guide your own approach to practice?

Further reading

Cognitive behaviourism

Hollin, C. (1992) *Cognitive-Behavioural Interventions with Young Offenders*. Allyn and Bacon

McGuire, J (2000) *Cognitive-Behavioural Approaches – An introduction to theory and research*. Edited by Jane Furniss, HMI Probation.

Available free to download at http://inspectorates.homeoffice.gov.uk/hmiprobation/docs/cogbeh1.pdf (last accessed 17 August 2006)

Sheldon, B. (2005) *Cognitive-Behavioural Therapy*. London: Routledge

Sheldon's book comprehensively explores the theoretical underpinnings and practical applications of cognitive-behavioural approaches in an accessible way, while McGuire explores how the model may be applied to examine offending behaviour in criminal justice contexts.

Task centred practice

Doel, M. (1998) 'Task-centred work', In R. Adams, L. Dominelli and M. Payne (eds), *Social Work: Themes, Issues and Critical Debates*. Oxford: Open University Press.

Reid, W. and Epstein, L. (1972) Task-centred casework, New York: Columbia University Press.

Reid and Epstein's early book on task-centred practice describes the model in readable detail and includes a useful chapter on shaping client tasks while Doel applies it to social work context in the UK.

Solution Focussed Practice

Kurtz, D. and Linnemann, T. (2006) Improving Probation Through Client Strengths: Evaluating Strengths based Treatments for At Risk Youth. *Western Criminology Review*, 7 (1): 9–19.

O'Connell, B. (1998) *Solution Focussed Therapy*. London: Sage.

O'Connell, B. and Palmer, S. (eds) (2003) *Handbook of Solution-Focused Therapy.* London: Sage.

O'Connell and Palmer's book comprises 15 chapters and describes the application of SFT by specialists in a variety of different UK contexts, while O'Connell's early work sets out the theoretical premise of the approach and Kurtz and Linnemann explore its efficacy with young people.

Person-centred practice

Mearns, D. and Thorne, B. (1988) *Person-centred Counselling in Action.* London:. Sage.

Mearns, D. and Thorne, B. (2000) *Person-Centred Therapy Today*. London: Sage.

Tudor, K. and Worrall, M. (2006) *Person Centred Therapy: A Clinical Philosophy*. London: Routledge

Mearns and Thorne follow and describe the person-centred approach one step at a time in a series of case studies, while Tudor and Worral examine more of the roots of person-centred thinking in existential and phenomenological philosophy.

Psychotherapeutic/ psychoanalytic practice

Bateman, A. and Holmes, J. (1995) *Introduction to Psychoanalysis: Contemporary Theory and Practice.* London: Routledge.

Jacobs, M. (2004) *Psychodynamic counselling in action*. London: Sage.

Jacob's book is an accessible and readable account of what remains a theoretically complex approach to practice, while Bateman and Holmes' book is for the more ambitious reader keen to develop their understanding.

Radical Practice

Adams, R., Dominelli, L. and Payne, M (2002) *Critical Practice in Social Work*. Basingstoke: Palgrave. A range of useful and authoritative articles on this area can be accessed at: http://www.radical.org.uk/barefoot/

Lagan, M. (1998) 'Radical social work', in R. Adams, L. Dominelli and M. Payne (eds) *Social work: Themes, Issues and Critical Debates.* Basingstoke: Palgrave.

Adams *et al.* and Lagan usefully explore the history and contemporary application of the radical and critical traditions, while articles on the Barefoot social worker site by experienced practitioners provide food for thought by brining a radical perspective to bear on contemporary social problems.

Compilations

Adams, R., Dominelli, L. and Payne, M. (eds) (1998) *Social Work: Themes, Issues and Critical Debates*. Basingstoke: Palgrave.

Howe, D. (1990) *An Introduction to Social Work Theory*. Aldershot: Gower.

Milner, J. and O'Byrne, P. (1998) *Assessment in Social Work*. Basingstoke: Palgrave.

Payne, M. (1995) *Modern Social Work Theory: A Critical introduction.* Basingstoke: Macmillan.

Milner and O'Byrne explore how models of intervention might inform and be used in the assessment process while Adams *et al.* explore models in broader contexts. However, Howe's book continues to provide the most clear theoretical framework for relating one model of practice to another.

References

Andrews, D.A., Keissling, J.J., Russell, R.J. and Grant, B.A. (1979) *Volunteers and the One-to-One Supervision of Adult Offenders*. Toronto: Ontario Ministry of Correctional Services.

Bandura, A. (1977) *Social Learning Theory*. New York: General Learning Press.

Beck, A.T. (1976) *Cognitive Therapy and the Emotional Disorders*. New York: International Universities Press.

Berg, I.K. (1991) *Family Preservation – A Brief Therapy Workbook*. London: Brief Therapy Press.

Berg, I.K. (1992) *Working with the Problem Drinker: A Solution-Focused Approach*. New York: W. W. Norton.

Berg, I.K. (1994) *Family-Based Services: A Solution-Focused Approach*. New York: W.W. Norton.

Blackburn, R. (1995) *The Psychology of Criminal Conduct*. London: Routledge.

Burnett, R. and McNeil, F. (2005) 'The place of the officer–offender relationship in assisting offenders to desist from crime', *Probation Journal*, 52 (3): 221–42.

Clark, M. (1997) 'Strengths-based practice: a new paradigm', *Corrections Today*, 59: 200–2.

Corby, B. (1982) 'Theory and practice in long-term social work', *British Journal of Social Work*, 12 (6): 619–38.

de Shazer, S. (1984) 'The death of resistance', *Family Process*, 23: 11–17.

de Shazer, S. (1985) *Key to Solutions in Brief Therapy*. New York: W.W. Norton.

Doel, M. (1998) 'Task-centred work', in R. Adams, L. Dominelli and M. Payne (eds), *Social Work: Themes, Issues and Critical Debates*. Oxford: Open University Press.

Doel, M. and Marsh, P. (1992) *Task-Centred Social Work*. Aldershot: Ashgate.

Dolan, Y.M. (1991) *Resolving Sexual Abuse: Solution-Focused Therapy and Ericksonian Hypnosis for Adult Survivors*. New York: Norton.

Dryden, W. (1995) *Brief Rational Emotive Behaviour Therapy*. Chichester: John Wiley & Sons.

Early, T.J. and Linnea, F.G. (2000) 'Valuing families: social work practice with families from a strengths perspective', *Social Work*, 45: 118–33.

Eckert, P. (1993) 'Acceleration of change: catalysts in brief therapy', *Clinical Psychological Review*, 13: 241–53.

Ellis, A. and Greinger, R. (1977) *Handbook of Rational Emotive Therapy*. New York: Springer Verlag.

Gendreau, P. (1996) 'Offender rehabilitation, what we know and what needs to be done', *Criminal Justice and Behaviour*, 23: 144–61.

Gendreau, P. and Andrews, D.A. (1990) 'Tertiary prevention: what the meta-analysis of the offender treatment literature tells us about what works', *Canadian Journal of Criminology*, 32: 173–4.

George, E., Iveson, C. and Ratner, H. (1990) *Problem to Solution: Brief Therapy with Individuals and Families*. London: Brief Therapy Press.

Gergen, K.J. (1999) *An Invitation to Social Construction*. London: Sage.

Goldfried, M.R. and Merbaum, M. (1973) *Behaviour Change Through Self-Control*. New York: Holt, Rinehart & Winston.

Gorman, K. (2001) 'Cognitive behaviourism and the Holy Grail: the quest for a universal means of managing offender risk', *Probation Journal*, 48 (1): 3–9.

Gutierrez, L. (1990) 'Working with women of colour: an empowerment perspective', *Social Work*, 35 (2): 149–53.

Harper, G. and Chitty, C. (2004) *The Impact of Corrections on Re-offending: A Review of 'What Works'*, Home Office Research Study 291. Available free to download from: http://www.homeoffice.gov.uk/rds.

HMIP (2002) *Audit of Accredited Programmes: North Wales Area of the National Probation Service*. London: HMIP.

HMIP (2003) *Audit of Accredited Programmes: Essex Area of the National Probation Service*. London: HMIP.

Howe, D. (1990) *An Introduction to Social Work Theory*. Aldershot: Gower.

Ivanoff, A., Blythe, B. and Tripodi, T. (1994) *Involuntary Clients in Social Work Practice*. New York: Aldine de Gruyter.

Izzo, R. and Ross, R.R. (1990) 'Meta-analysis of rehabilitation programmes for juvenile delinquents: a brief report', *Criminal Justice and Behaviour*, 17: 34–8.

Johnson, V. S. (1981) 'Staff drift: a problem in treatment integrity', *Criminal Justice and Behaviour*, 8: 223–32.

Kemshall, H., Holt, P., Bailey, R. and Boswell, G. (2004) 'Beyond programmes: organisational and cultural issues in the implementation of what works', in G. Mair (ed.), *What Matters in Probation*. Cullompton: Willan.

Kendall, K. (2004) 'Dangerous thinking: a critical history of correctional cognitive behaviourism', in G. Mair (ed.), *What Matters in Probation*. Cullompton: Willan.

Kriesberg, S. (1992) *Transforming Power: Domination, Empowerment and Education.* New York: State University of New York.

Kurtz, D. and Linnemann, T. (2006) 'Improving probation through client strengths: evaluating strengths based treatments for at risk youth', *Western Criminology Review*, 7 (1): 9–19.

Lee, M.Y., Sebold, J. and Uken, A. (2003) *Solution-Focused Treatment of Domestic Violence Offenders: Accountability for Change*. Oxford: Oxford University Press.

McGuire, J. (1995) *What Works: Reducing Reoffending*. Chichester: John Wiley & Sons.

McNeill, F. (2000) 'Making criminology work: theory and practice in local context', *Probation Journal*, 47 (2): 108–18.

McNeill, F. (2001) 'Developing effectiveness: frontline perspectives', *Social Work Education*, 20 (6): 670–87.

McWilliams, W. (1987) 'Probation, pragmatism and policy', *Howard Journal of Criminal Justice*, 26 (2): 97–121.
Mahoney, M.J. (1974) *Cognition and Behaviour Modification.* Cambridge, MA: Ballinger.
Mair, G. (2000) 'Credible accreditation?', *Probation Journal*, 47: 268–71.
Mair, G. (2004) 'Introduction: what works and what matters', in G. Mair (ed.), *What Matters in Probation*. Cullompton: Willan.
Martinson, R. (1979) 'New findings, new views: a note of caution regarding sentencing reform', *Hofstra Law Review*, 7: 243–58.
Mayer, J. and Timms, N. (1970) *The Client Speaks*. London. Routledge & Kegan Paul.
Meichenbaum, D. (1985) *Stress Inoculation Training*. New York: Pergamon Press.
Merrington, S. and Stanley, S. (2000) 'Doubts about the what works initiative', *Probation Journal*, 47: 272–5.
Milner, J. and O'Byrne, P. (1998) *Assessment in Social Work*. Basingstoke: Palgrave.
Morley, L. (1995) 'Theorising empowerment in the UK public services', *Empowerment in Organisations*, 3 (3): 35–41.
O'Connell, B. (1998) *Solution-Focused Therapy*. London: Sage.
O'Connell, B. and Palmer, S. (eds) (2003) *Handbook of Solution-Focused Therapy*. London: Sage.
O'Hanlon, B. and Hudson, P. (1992) *Stop Blaming, Start Loving! A Solution-Oriented Approach to Improving Your Relationship.* New York: Norton.
Oldfield, M. (1998) 'Case management: developing theory and practice', *Vista*, 4 (1): 21–36.
Oldfield, M. (2002) 'What works and the conjunctural politics of probation: effectiveness, managerialism and neo-liberalism', *British Journal of Community Justice*, 1 (1): 79–88.
Payne, M. (1995) *Modern Social Work Theory: A Critical Introduction*. Basingstoke. Macmillan.
Proctor, G., Cooper, M., Sanders, P and Malcolm, B. (2006) *Politicizing the Person-Centred Approach: An Agenda for Social Change*. Ross-on-Wye: PCCS Books.
Rees, S. (1978) *Social Work Face to Face*. London: Edward Arnold.
Reid, W. and Epstein, L. (1972) *Task-Centred Casework*. New York: Columbia University Press.
Reid, W.J. and Shyne, A. (1969) *Brief and Extended Casework*. New York: Columbia University Press.
Rex, S. (2002) 'Beyond cognitive behaviourism? Reflections on the effectiveness literature', in A. Bottoms, L. Gelsthorpe and S. Rex (eds), *Community Penalties: Change and Challenges*. Cullompton: Willan.
Rogers, C.R. (1961) *On Becoming a Person*. Boston: Houghton Mifflin.
Rogers, C.R. (1980) *A Way of Being*. Boston: Houghton Mifflin
Rogers, C.R. (1992) 'The necessary and sufficient conditions of therapeutic personality change', *Journal of Consulting and Clinical Psychology*, 60: 827–32.
Rose, D. (1996) *Inventing Ourselves: Psychology, Power and Personhood*. Cambridge: Cambridge University Press.
Ross, R. and Fabiano, E. (1985) *Time to Think: A Cognitive Model of Delinquency Prevention and Offender Rehabilitation*. Ottawa: Air Training and Publications.
Rubin, A. (1985) 'Practice effectiveness: more grounds for optimism', *Social Work*, 30: 469–76.

Schlichter, K.J. and Horan, J.J. (1981) 'Effects of stress inoculation on the anger and aggression management skills of institutionalised juvenile delinquents', *Cognitive Therapy and Research*, 5: 359–67.

Sirles, E., Lipchik, E. and Kowalski, K. (1993) 'A consumer's perspective on domestic violence interventions', *Journal of Family Violence*, 8 (3): 267–76.

Skinner, B.F. (1938) *The Behavior of Organisms*. New York: Appleton-Century-Crofts.

Stepney, P. (2005) 'Mission impossible? Critical practice in social work', *British Journal of Social Work*, advanced access, published 18 November. Available at: http://bjsw.oxfordjournals.org/cgi/reprint/bch388v1.pdf.

Sutherland, E. (1947) *Principles of Criminology*. Philadelphia: J.B. Lippincott.

Thomas, M. and Pierson, J. (1995) *Dictionary of Social Work*. London: Collins.

Thompson, N. (1992) *Existentialism and Social Work*. Aldershot: Avebury.

Thompson, N. (1995) *Theory and Practice in Health and Social Welfare*. Buckingham: Open University Press.

Trotter, C. (1999) *Working with Involuntary Clients*. London: Sage.

Ulman, J. (1990) 'Toward a synthesis of Marx and Skinner', *Behavior and Social Issues*, 1 (1): 57–70.

Van Wormer, K. (1999) 'The strengths perspective: a paradigm for correctional counselling', *Federal Probation*, 63 (1): 51–8.

Vennard, J. (1997) 'Evaluating the effectiveness of community programmes with service users', *Vista*, May: 15–26.

Worrall, A. (2000) 'What works at one arm point? A study of the transportation of a penal concept', *Probation Journal*, 47 (4): 243–9.

Worsley, P. (ed.) (1977) *Introduction to Sociology*. Harmondsworth: Penguin.

Yochelson, S. and Samenow, S.E. (1976) *The Criminal Personality*, Vol. 1. Northvale, NJ: Aronson.