

*Matching Offenders and Programmes:  
The Responsivity Principle at work in the Cornmarket Project for Offenders,  
Substance Misusers and their Families in Wexford*

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**Summary** In recent years, a perception among relevant agencies (statutory and community/voluntary) of an increase in the availability of drugs such as heroin and cocaine in Wexford has seen a correspondent increase in anti-social and criminal activity. It is also against this backdrop that the Cornmarket Project has developed. This article briefly describes the development of the project, and its programmes. It elaborates the theoretical basis of the work undertaken with offenders, drug misusers and their families in the project, emphasising in particular the importance of the responsivity principle, or matching service users to appropriate programmes and vice versa, in work with offenders.

**Keywords** Offending, drug misuse, probation, community project, motivation, responsivity, motivational enhancement therapy, stages of change.

**Introduction**

Thoughts of Wexford in the southeast corner of Ireland are apt to conjure up images of the tourism oriented "sunny southeast" label. Indeed, that part of Ireland does have an above average rate of sunshine and continues to be a popular holiday destination for both Irish and foreign holidaymakers. However, a look beyond the tourist vista reveals that Wexford also has an above average rate of unemployment (at 6.5%). And on a nationwide deprivation index (where a score of ten means a county is among the most deprived 10% in the country) Wexford scores 6.6% (Wexford County Development Board, 2002). In addition, it would appear from anecdotal evidence that those areas in Wexford that experience the highest levels of social deprivation also experience a higher level of crime, problems associated with substance misuse and general anti-social behaviour.

Wexford has a population of over 104,000 and like many other parts of Ireland, substance misuse and attendant criminal activity are not new. Problems associated with the misuse of alcohol and other drugs such as cannabis and ecstasy are amongst the issues that initially led to the establishment of the Cornmarket Project, a community based project for offenders, substance misusers and their families, by the Wexford Area Partnership. From the outset the Wexford Area Partnership was determined that the project should embrace a multi-agency approach to the issues of substance misuse and criminality. As a consequence, the management committee comprises representatives from thirteen statutory, non-statutory, voluntary and community based organisations and groups, including: the Community Development Initiative (FAB), the Community Based Drugs Initiative, the SAFE Community Project, an Garda Síochána, the Department of Community Rural and Gaeltacht Affairs, the Probation and Welfare Service (PWS), FÁS (the state training agency), Youthreach/County Vocational Education Committee, Wexford Town Council, the Wexford Council of Trade Unions, the Ais Éirí Treatment Centre, the Wexford Money Advice Budgeting Service and the Wexford Area Partnership. The Cornmarket Project offers a countywide service.

The Department of Justice, Equality & Law Reform (DJELR), through the PWS, have funded the Cornmarket Project in Wexford since 2001 on a three-year pilot basis. The project was developed out of an existing Wexford Area Partnership initiative established in 1999 that provided counselling and support

for substance misusers and their families. From the outset, the core elements of the original service have remained i.e. accessible, free and confidential support for service users. However, the involvement of the PWS allowed for the development of a broader programme for those involved in anti-social behaviour. The objectives of the Wexford Area Partnership's Social Inclusion Plan 2000-2006 are:

- To foster public safety and promote the common good by positively influencing the behaviour of offenders,
- To create conditions whereby local community sanctions offer a realistic alternative remedial action for those in conflict with the law,
- To cause offenders to address their anti social offending behaviour (including substance misuse), and
- To support offenders in pursuing a crime-free way of life and enhance access to mainstream services by providing them with pro-social skills, while taking into account their specific difficulties and lifestyle issues.

These aims are in line with those of the PWS (PWS, 2001) This shared vision and value base facilitated the development of interagency co-operation through the project.

### **Founding and Underlying Principles**

In establishing the Cornmarket Project, the Wexford Area Partnership was anxious to ensure that the project was targeted specifically at those who were seeking help for their substance misuse and/or criminal behaviour issues but who could not or would not access help or make progress through other established services. In some cases this had arisen through exclusion from other mainstream services in the past because of anti-social behavioural problems, or failure to meet the wider criteria for access in the first place. Therefore, from the start there was an emphasis on working with the most socially excluded and vulnerable, and those who could not, or would not, gain access to other programmes. Moreover, the project accepted from the start that it was likely that a great deal of motivational work would have to be done in a planned way with service users in order to effect meaningful change. Consequently, it was likely to be more effective to work with these individuals, initially at least, "where they were at" i.e. targeting resistance to change.

Research over the last decade or so into various treatment methodologies for offenders, particularly those aimed at reducing reoffending, has led to much debate about "what works" (e.g. Farrall, 2002; McGuire, 1995 and McNeill, 2002). Emphasis has been placed on a number of key practice principles, including those of risk, need, responsivity and professional discretion (Connolly, 2000). The **risk principle** states that the intensity of the treatment intervention should be matched to the risk level of the offender. The **need principle** distinguishes between criminogenic (i.e. factors linked directly to offending) and non-criminogenic needs. The **responsivity principle** proposes that styles and modes of treatment and service must be closely matched to the preferred learning styles and abilities of the offender. According to the **professional discretion** principle, having reviewed risk, need and responsivity considerations as they apply to a particular offender, there is a need for sound professional judgment (Kennedy, 2000) in such work. Therefore, programme effectiveness depends on matching types of treatment/interventions and workers/therapists to types and needs of individual service users.

Given the foregoing, the Cornmarket Project operates on the basis that in order for its programmes to be effective, the following criteria must be met:

- Counselling and intervention programmes are delivered as part of a planned process, based on individual care plans, agreed in consultation with the service user.
- Interventions are delivered by trained and clinically supervised staff. (For example, all programme staff are trained and competent in Motivational Interviewing).
- Where a participant has been or is involved in criminal behaviour, primacy is placed on addressing criminogenic risk and need factors.
- All staff are expected to be enthusiastic, engaging, flexible to the needs of service users, and be able to work in an anti-oppressive way, and using professional power appropriately.
- Staff are expected to model pro-social norms and are trained to recognise anti-social thinking, feeling and behaviours and to suggest and demonstrate concrete positive alternatives.
- Staff act as advocates on behalf of service users when accessing progression routes to other programmes and services as appropriate but will at all times ensure the development of individual self-efficacy (ability and belief in one's own ability to bring about change).

While much of the what works literature has focussed on risk and need principles (see above), the importance of the responsivity principle in interventions to reduce reoffending among offenders has probably been relatively neglected. The remainder of this article outlines the work of the Cornmarket Project and describes other practice principles and frameworks that inform that work, particularly those linked to the responsivity principle foundation of the project. These are: (a) Differentiated Treatment Matching, (b) the Stages of Change Model, (c) Motivational Enhancement Therapy and (d) Motivational Interviewing.

### **The Programme**

Since the establishment of the Cornmarket Project in October 2001, 423 individuals (up to the end of March 2004) had attended for counselling/intervention, or otherwise participated in project programmes. Fifty four percent of those were either direct referrals from the PWS, or had otherwise come to the attention of the Garda through involvement in criminal behaviour. A further 480 people received other supportive intervention during the same period. A comprehensive independent, external evaluation of the Cornmarket Project is being undertaken during 2004, with findings to be published by the end of the three-year pilot, in September 2004.

The Project has two distinct levels of structured intervention with offenders in accordance with the above approach:

- Strand One (*Counselling & Support Programme*) is primarily for low risk offenders who usually do better without intensive supervision or treatment/intervention and respond positively to counselling interventions designed to elicit and enhance their own motivation for change.
- Strand Two (*Stabilisation Programme*) is the structured day programme and rehabilitation element of the programme and is designed for higher risk offenders in order to maximise reductions in recidivism.

Progression onto and through the programme for new participants typically includes:

1. Attendance at strand one for a minimum of four counselling sessions based on a Motivational Interviewing approach (see below),
2. Introducing offenders to the concept of a care plan and designing it with their input,
3. Moving offenders if appropriate to strand two and gradually introducing offenders to the

cognitive behavioural materials used on the programme to address criminogenic issues,

4. Advocating on behalf of offenders who have stabilized their lifestyles and wish to move on to other mainstream providers of programmes or into the labour market.

Although group work forms an integral part of the Cornmarket programme, considerable emphasis is placed on meeting the individual needs of the offenders attending strand two.

### **Family Support**

In general, this article describes the approach to working with those who have been referred to our project for reasons of criminality and anti-social behaviour. However, the Cornmarket Project also offers support to the families of such service users. Our work to date in Wexford has indicated that criminality and substance misuse can leave family members other than the offender feeling isolated as they struggle to "cover up" and cope with the dysfunctional behaviours of an offending family member. When families are confronted with the reality of problematic substance misuse, they usually try to cope as best they can, successfully or otherwise. Often regarding themselves as somehow guilty for the behaviours of those involved in substance misuse and criminality, they may see themselves as "failures." This type of perception among non-offending family members, allied to the offending behaviour of the individual, can become a self-defeating vicious circle.

For these reasons the Cornmarket Project views work in supporting family members as an integral part of its overall programme. To this end the project offers both one-to-one support and a fortnightly family support group where an experienced facilitator helps participants to explore their own feelings and develop self-help coping strategies. These interventions are undertaken with a view to helping non-offending family members support moves by offenders towards pro-social attitudes and behaviour. In May of 2004 14 people were availing of the family support service. For some of these their family members were already direct service users at the project, while others were attending even if the family member with the substance misuse or criminal behaviour problem had not, or would not, engage with the programme.

### **Responsivity: (a) Differentiated Treatment Matching**

It is understood that if sufficient attention is not paid to the principle of responsivity in particular, then intervention and treatment programmes for offenders can fail. The primacy of the responsivity principle for practice in the Cornmarket Project pointed to the need for "differentiated treatment matching," which is also informed by research based on classification of individuals and relevant specific issues. Barriers to adequate responsivity in work with offenders, such as cognitive and intellectual deficits, social skills deficits and "readiness to change" deficits have often not been properly addressed in work with drug-misusing offenders in the past. This could mean that a programme or intervention is pitched too far ahead of an individual's abilities and understanding at that particular time. To this end, the assessment process for allocation into the appropriate Cornmarket programme strand is seen as vital. This process includes assessment of:

1. Offending behaviours and reasons for referral to the programme,
2. Risk assessment, including risk of re-offending,
3. Level of current substance misuse (both drugs and alcohol),
4. Any link between substance misuse and offending,
5. Cognitive ability assessment (including literacy and numeracy), and
6. Perception of willingness and readiness to address substance misuse and/or criminal behaviours.

**Responsivity: (b) Stages of Change**

Another important feature of the Cornmarket Project programme is the use of the Stages of Change or Trans-theoretical Model (see Table 1 below). This model (Connors et al, 2001) is used by project staff in gauging offender readiness and/or willingness to address their offending related behaviours. The five stages of change identified are; precontemplation, contemplation, preparation/determination, action, and maintenance:

**Table 1: Stages of Change**

Stage	Characteristics of Person at this Stage
<b>Precontemplation</b>	The offender is not considering the possibility of change and does not think he/she has a problem. Individuals typically perceive that they are being coerced into treatment to satisfy someone else's need. If the offender does not participate in treatment then there is little probability that recidivism can be reduced or that the risk level of the offender can be managed effectively.
<b>Contemplation</b>	Characterised by ambivalence; in other words, offenders may simultaneously, or in rapid alternation, consider and reject reasons to change; are aware that a problem exists, but not ready to commit to a change strategy.
<b>Preparation/ Determination</b>	A combination of intention and behavioural criteria. May report having made some small behavioural changes and reduced offending behaviours.
<b>Action</b>	Have made a commitment to change and engaging in actions to bring about change; i.e. actively doing things to change or modify their behaviour, experiences, or environment in order to overcome problems. Typically involved in counselling and/or a programme.
<b>Maintenance</b>	Working hard to sustain the significant behavioural changes made and actively working to prevent minor slips or major relapse. This stage is not static – dynamic, particularly when the individual is exposed to high-risk situations. The problem is not that offenders do not change, but rather that they do not maintain changes.

Offenders in the Cornmarket programme at the precontemplation and contemplation stages benefit from consciousness raising and environmental re-evaluation strategies that provide them with an understanding of the impact of their unhealthy behaviours on themselves and others and help them to realise that behaviour change can be an important part of a new pro-social identity. Those in the preparation/determination stage benefit from intervention strategies that reinforce self-efficacy, that is, the offender's ability to choose and to make a commitment to change. For those in the action and maintenance stages, techniques such as reinforcement management and encouraging participants to seek and use social support to assist them in sustaining positive change are used. These include increasing the rewards for positive change and decreasing the rewards from the old behaviours, using counter-conditioning to substitute healthier alternative cognitions and behaviours and stimulus control to remove the cues to engage in the unhealthy behaviour.

**Responsivity: (c) Motivational Enhancement Therapy (MET)**

The project uses a modified (to suit local needs) version of the MET (Miller et al, 1995) approach as a theoretical underpinning and model for its programmes. MET is an evidence-based intervention to

achieve maximum positive and sustained behavioural change, thus ensuring a reduction in substance misuse and consequently, in recidivism. At the heart of this approach is a commitment to differentiated treatment matching. In this regard, offenders and substance misusers are not viewed as a homogeneous group who will all respond positively, and simultaneously, to a "one programme fits all" approach, but rather as unique individuals requiring tailored responses. In this model motivation may be operationally defined as "the probability that a person will enter into, continue, and adhere to a specific strategy" (Miller and Rollnick, 2002).

Moreover, in this approach, motivation is seen as dynamic and, therefore, opportunity exists for the therapist/practitioner to help motivate the offender. The project worker, counsellor or other practitioner must strive to create effective motivational choices in order to increase the probability that offenders will respond favourably to probation supervision. If interventions are not matched as closely as possible to the service user's perception regarding their behaviour, resistance to change may in fact only be increased. Prochaska and Diclemente (1984), the originators of this model, specify experiential and behavioural processes that support and sustain individuals at each stage.

#### **Responsivity: (d) Motivational Interviewing**

The majority of referrals to the project could be placed (initially at least) in what might be described as the "reluctant client" category. However, historically, some treatment and intervention programmes in Ireland for substance misusers and offenders, presuppose that participants are motivated and prepared. Motivation issues may be frequently cited among reasons for dropout, failure to comply, relapse and other negative programme outcomes. For example, in a study of dropouts from the Cognitive Skills, Anger and Other Emotions Management Programmes (Stewart and Cripps, 1999), the reason most commonly identified by programme delivery officers, for offenders dropping, was under the category "lack of motivation."

If increasing a substance misusing offender's motivation to address change through participation in the programmes offered by the Cornmarket Project is an important contributor to reducing recidivism, the next step is to identify what factors influence motivation. The factors that have been the subject of review through much research in human services generally may be classified according to five key areas (see Table 2): client and therapist characteristics, therapeutic relationship, service/client matching and environmental supports. Among the dynamic client characteristics linked to motivation are the client's recognition of the extent of problem severity and the client's self-efficacy.

Using the principles of Motivational Interviewing (MI), Cornmarket Project workers understand that lack of motivation to change is not a trait, rather motivation is fluid and can be influenced. MI (Miller and Rollnick, 2002) is a client-centered approach that strategically directs offenders to examine, explore, and resolve the ambivalence they have about their behaviour. It works with the service user's own agenda to consider change, exploring the resistance substance misusers and offenders have to change, including working creatively with an individual's attachment and ambivalence to certain behaviours. Originally developed for work with addictive behaviours, many probation and other workers are now familiar with the techniques of MI being used in the criminal justice arena, where it has proved helpful in challenging and facilitating change in offending behaviour (Ware and Byrne, 2001). In this regard, all therapists, project workers and practitioners engaged by the Cornmarket Project are specifically trained and competent in the use of Motivational Interviewing techniques.

The main purpose of Motivational Interviewing is to help an offender stuck at a certain stage of change to move on to the next stage, or to revisit the previous stage if they have moved on prematurely (Bailey et.al, 1998). Techniques to achieve this include both directive and non-directive open questions, reflec-

tive listening, affirmation, eliciting self-motivating statements and the use of summary. The offender is encouraged to take responsibility for his or her own decision-making. By helping offenders explore and resolve ambivalence about problem behaviours, service users can be empowered to help build their motivation and so promote positive behaviour change. Where MI may not be appropriate at times with individual offenders, cognitive-behavioural counselling aimed at structured relapse prevention also forms an integral part of Cornmarket's overall MET programme.

Staff that are empathic, experienced and knowledgeable, supportive, and provide advice and expectation of positive outcome are consistently linked to positive outcomes. Matching service users with programmes, linking level of complexity to the capacity of the individual, and building in a progressive skills attainment approach, aids in increasing self-efficacy and reducing information overload. Finally, organisational aspects of the Cornmarket Projects programme such as immediate access to help, continuity of care, and providing a "menu of options," matching programmes to participant needs, positively influences motivation for treatment, change and compliance. Measures to increase motivation and treatment compliance among substance misusing offenders, and used by staff in the Cornmarket Project, are summarised in Table 2:

**Table 2: Factors Influencing Motivation**

<b>Motivation Factor</b>	<b>Offender Intervention or Service Provision</b>
1. Client characteristics (problem severity, confidence that he or she can change)	Individual or group interventions that help offenders recognise the impact of their problems, support self-efficacy and teach relapse prevention
2. Therapist/Staff characteristics	Recruit and train staff who meet the characteristics of effective interveners: enthusiastic, competent, encouraging self-efficacy, empathic, model pro-social beliefs and values
3. Therapeutic (staff-offender) relationship	Establish mutually agreed-upon goals. The relationship should be supportive but directive
4. Service/Service User matching	Provide programmes that are structured, skills based, progressive, not too cognitively complex
5. Environmental supports	Provide an environment that supports change, notes and encourages efforts to change, identifies other sources of support outside the programme: provide access to a range or 'menu' of options to assist in change

In addition, using Motivational Interviewing in interventions with substance misusing offenders incorporating a number of individual and group sessions over a period of eight to twelve weeks, has (anecdotally to date) recorded enhanced responsivity by increasing motivation to address criminogenic risk factors among Project participants.

### **Conclusion**

Substance misusers are not all alike; nor are all staff, settings, or treatment programmes. Indeed, the first report of the Drug Court Planning Committee (1999) recommended "the provision of services and rehabilitation programmes capable of being tailored to meet the individual needs of each offender." The matching of service users with appropriate programmes and practitioners, and practitioners to the groups that best match their skills, can improve the effectiveness of probation supervision and community based

programmes for offenders. Best practice with regard to responsivity begins with good assessment. Gauging motivation level, cognitive ability, personality traits, and maturity is essential for the development of successful intervention plans.

The Cornmarket Project, in association with the Probation and Welfare Service, strives to implement best practice based on the outline of the above model and approach, ensuring the welfare of service users and the safety and well being of the wider community. Of course, the true impact of adherence to responsivity and other motivational factors on treatment and interventions with substance misusing offenders can only be determined by examining recidivism rates, probably in conjunction with other indices, over extended periods of time.

In Ireland, as the discussion on non-custodial sentencing and supervised community sanctions continues, the principle of responsivity, which includes the appropriate matching of service users to programmes and staff, and the identification of factors that might mediate the effectiveness of treatment and intervention services, merits further exploration. The numbers of offenders and family members using the Cornmarket Project services would appear to be an indicator of some degree of success. At the time of writing, the outcome of an initial evaluation of the pilot phase of the project is awaited. In conclusion, if those who attend and actively participate in the Motivational Enhancement Therapy (MET) programmes offered by the Cornmarket Project, achieve lowered recidivism rates compared to those who do not, then the efficacy of this evidence-based approach will have been demonstrated. Thus will the success of the Cornmarket Project be measured through this exciting and challenging three-year collaborative pilot project.

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