



## **West Midlands Regional Offender Manager**

### **Offender Need Data**

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## **Executive Summary**

Forensic Pathways was commissioned to provide insight into offender need for the purposes of the Regional Offender Manager's Commissioning Plan. A specific, complex database containing over 1.8 billion items of data was built and analysed. The name of the database is Pathway. Data was obtained from a number of sources for the Report. Connect and OASys were used for the main database and the remaining sources were used as control samples.

### **Connect**

This data is managed by West Mercia Probation Service and covers West Midlands, Staffordshire, West Mercia and Warwickshire. The Data was supplied by Connect and has been analysed. In Connect alone there are over 3,798,046 items of data (3.7 Million data items) and these have been analysed.

### **OASys**

This data is managed by the Home Office and is a national data set. Data was supplied by OASys and has been analysed. The database now contains over 1,870,000,000 items of data extracted and is available for analysis.

## **Findings**

The data was analysed to look at offender need, therefore the sample was separated into male adults, female adults, male young offenders and female young offenders. Different needs were highlighted depending on the offender group and these findings are explained and assessed using previous research, to put the findings of this study into context. Some analysis was also conducted to look at subgroups of offenders. These included different age groups, ethnicities and offenders that commit particular categories of crimes and again these findings are discussed in detail.

Recommendations are made based upon the data available and the results of the analysis. The recommendations made also take into account previous research and interventions that are being developed and instigated currently.

### **Summary of Areas that Require Interventions**

#### **Areas of Offender Need (In no particular order).**

- Alcohol – Male young offenders in particular.
- Drugs – Female offenders in particular.
- Mental Health
- Finances
- Relationships

#### **Areas of Offender Need that increase Risk (In no particular order).**

- Alcohol
- Mental Health
- Thinking and Behaviour
- Combinations of pathways involving Alcohol
- Combination of pathways involving Mental Health

## **OUTLINE**

Forensic Pathways has been commissioned by the Regional Offender Manager West Midlands to undertake a 'Pilot Project' aimed at assessing the extent to which the analysis of data connected with 'offender need' can inform the commissioning of services from providers.

### **Project Aim**

The aim of the project is to collect, process, analyse and interpret complex data and to give an understanding of offenders needs using data derived from Probation Boards, the Prison Service, contracted prisons, and other providers and stakeholders. The analysis is designed to play a critical role in the delivery of relevant, timely and quality assured information to assist with evidence based decision making for the commissioning plan.

### **Project Objective**

The objective of the project is to scope the extent that analysis of offender need in the West Midland's region can inform the commissioning of services from providers based on offender need.

### **Project Outcome**

The outcome of the project is to:

1. To identify data gaps, and to identify data as necessary to fill those gaps.
2. To present data in appropriate, user-friendly, formats for use by the Regional Offender Manager and providers.
3. Identify need based on:
  - Risk of offending
  - Risk of harm
  - Holistic social skills
  - The seven Pathways

4. To enable the ROM and providers to prioritise and sequence interventions by identifying:

- Clusters within the Pathway;
- Clusters across the Pathways;
- Clusters outside the Pathways;
- Clusters that cross boundaries between the Pathways and analyse the significance of the findings.

As part of this work a range of data sources have been identified as potentially being in a position to supply data in support of the aims and objectives of this work. These are discussed later in the Report.

### **Project Database - *Pathway***

The databases and data sources considered for analysis within this project are managed by different organisations. In all cases these data sets are not being used to their full potential and the way they are being used currently is not ideal for the performance of analytical tasks. Each organisation has a range of functions to perform including:-

- Assessments conducted with beneficiaries and project clients
- Performance management and targets
- Financial management
- Resource management

There is a major opportunity to engage in analysis with each of these data sources and to date this opportunity seems to have been missed. Furthermore, it is interesting to note that some key staff in organisation seem uninformed about the potential power the data has to empower organisations to undertake better decision making and policy. In some cases data is being protected to the point where its legitimate use is being inhibited. These are all awareness and training issues.

Each organisation contacted has clearly developed the capability to collect data and in some cases very large data sets are available. However, this ability to collect data needs to be matched with the ability and a commitment to conduct useful analysis to ensure the data informs decision making and policy making processes. In some cases discussed below staff expressed concern about their readiness to use their data for analytical purposes. This is clearly a question of analytical capability rather than a question of the relevance of the data for the purpose. Another problem encountered was a reluctance

in some cases to share data and concerns were expressed by some organisations about which other partner organisations would be given access to the data. This is clearly an inhibitor to the use of the data for sharing and analytical purposes. Many of the gaps encountered concerned data sharing and a lack of understanding of what could be achieved if the data were to be analysed and indeed made available for expert analysis. In some cases there is no analysis taking place yet large stock piles of data is being collected and in some cases at great expense.

It is clear from the work that there is a wealth of data available. However, this needs to be harnessed within a philosophy that understands the power analysis can bring to their data sets for decision making and policy formulation process.

As a result of what was found a new database has been built (*Pathway*) for the project to enable data to be stored for analytical purposes. This has been built to store, manage and analyse data collected and it is available for use. The database was built specifically for analytical purposes and now contains almost 2 Billion items of data. This has been used for the analysis conducted within the project and is available for further analysis, further querying and for the inclusion of new data sets as they become available. A range of correlations have been performed and these have been stored for further analytical purposes. Over 5,000 advanced queries were constructed and run, and later stored in the database as stored procedures. The total number of advanced queries that could be used extends to several thousand. They simply require launching.

### **Analysis of Pathways**

Particular attention has been paid to the analysis of Pathways to offender need. These have been managed in such a way that allows correlations to be run across any single Pathway, across any sequence of Pathways and across any combination of Pathways. As a result, new Pathways have been identified in the form of combinations and sequences of older Pathways.

## **Connect**

This data is managed by West Mercia Probation Service and covers West Midlands, Staffordshire, West Mercia and Warwickshire. The Data was supplied by Connect and has been analysed. In Connect alone there is over 3,798,046 items of data (3.7 Million data items) and these have been analysed and fully embedded in *Pathway*.

## **OASys**

This data is managed by the Home Office and is a national data set. Data was supplied by OASys and has been analysed. The *Pathways* database now contains over 1,870,000,000 items of data extracted and is available for analysis.

## **LIDS**

This database is managed by the Prison Service and contains information about Prisoners. This was not made available to the Project for security reasons. The data could be useful for assessing a range of offender characteristics as well as statistical purposes.

## **DIRWEB**

This is an IT system used for the management of data collected for drugs treatment purposes both in community and prison sentencing regimes. Extensive discussions were undertaken about this data and it is clear that it has not been subjected to the analytical processes that could reveal highly valuable information about offender need. Data was supplied by DIRWEB and this was analysed as part of the project. It has not been included in the *Pathway* database because concerns were expressed about relevance and reliability by the staff concerned in its management. The data is stored separately currently. Excellent assistance was provided by the staff. This data could be used after cleansing.

## **Government Office of West Midlands**

The GOWM is collecting large quantities of data particularly in the field of drug rehabilitation. These data sources use DIRWEB, DIPS and other sources. Data was supplied for analysis of the drugs issues in this project. This has not been included in the *Pathway* database but with some manipulation this would be readily achievable. Timescales on this project prevented that but this could be undertaken with relative ease.

## Linked Data sets

A number of data sets are of particular interest to rehabilitation and offender need and especially in the area of drug abuse and they are listed as follows. Senior staff managing these data sets expressed the view that NDPDU had not yet verified the data and that more work was needed before this data in raw form would be released for analysis. It was recommended that the project use the data supplied by Mr Nicholas Cleverley of GOWM as this data was believed at this stage to be the most credible and reliable. This has been done. Jackie Roberts expressed interest in taking the work further and engaging in more detailed analytical work around these data sets. This view was supported by senior staff at GOWM. The data sets include:-

1. **IDTS** – Integrated Drug Treatment System. The project was told that this is not effectively established yet and the data needs further assessment before it would be released.
2. **CARATS** – Counselling Assessment Referral Advice Treatment. Used for psychosocial intervention in prisons.
3. **CSIP** - Care Service Improvement Partnership. This data has many uses for assessments of mental health and drug abuse.
4. **NDPDU** – National Programme Delivery Unit. This is the operational delivery arm of CARATS but is largely of use for performance management. However, it is the view of the project that this data has other analytical opportunities attached to it and it should be considered further.

## Clinical Healthcare Data

The project was informed that this data will be available within months to inform clinical healthcare concerning substance abuse and hepatitis. However, the project was told that this data would require special access rights and that these should be made available for future reference.

## West Midlands Observatory

The Observatory referred the project to data supplied by GOWM and took the view that further work would be needed to understand exactly which data sets should be included in the analysis.

## **Drugs Intervention Programme – DIPS**

This data is currently being prepared for analysis by John Moore's University, Liverpool. The project had extended discussions about the quality and content of this data. There has been no national or regional analysis of this data. Much of this data refers to high crime areas nationally but the data is being used exclusively at present for the management and preparation of Key performance Indicators. This data could be made available but requests for access were declined due to the work currently being undertaken by John Moore's University.

This data combined with the *Pathway* dataset would provide valuable insights into offender need in particular around drugs and related crime.

Forensic Pathways has been engaged to undertake analysis of data to inform the Commissioning Plan for the Regional Offender Manager. A range of data sets have been examined and a range of people have been interviewed including the Connect Database managed by Connect, West Midlands and the OASys Database managed by the UK Home Office. Other data sources are being added.

Forensic Pathways specialises in the provision of advanced analytical services and business intelligence for both the public and private sector. The company performs work for clients engaged in complex and/or sensitive analytical work including UK and foreign governments. A significant proportion of this work is undertaken within the criminal justice and security domain.

Forensic Pathways has been given access to a number of datasets as part of work for the Regional Offender Manager in Birmingham. Forensic Pathways has so far built three new databases and analytical platforms. Other datasets are being incorporated and work is ongoing.

## **Contents**

<b>Page 14</b>	<b>Table – Connect Content Analysis</b>
<b>Page 20</b>	<b>Table – Gender</b>
<b>Page 21</b>	<b>Graph – Gender</b>
<b>Page 22</b>	<b>Table - Ethnicity</b>
<b>Page 23</b>	<b>Graph – Ethnicity</b>
<b>Page 24</b>	<b>Table - Accommodation situation of Offenders on Connect</b>
<b>Page 26</b>	<b>Graph – Accommodation situation of Offenders on Connect</b>
<b>Page 27</b>	<b>Table - Education, Training and Employment situation of Offenders on Connect</b>
<b>Page 28</b>	<b>Graph – Education, Training and Employment situation of Offenders on Connect</b>
<b>Page 29</b>	<b>Table – Alcohol problems at the time of enrolment on Connect</b>
<b>Page 30</b>	<b>Graph – Alcohol problems at the time of enrolment on Connect</b>
<b>Page 31</b>	<b>Table – Drug problems at the time of enrolment on Connect</b>
<b>Page 33</b>	<b>Graph – Drug problems at the time of enrolment on Connect</b>
<b>Page 34</b>	<b>Table – Alcohol and Drug problems at the time of enrolment on Connect</b>

<b>Page 35</b>	<b>Graph – Alcohol and Drug problems at the time of enrolment on Connect</b>
<b>Page 36</b>	<b>Table - Most Common Crimes committed by Offenders on Connect</b>
<b>Page 41</b>	<b>Graph – Class A drug volumes in the West Midlands over April 06 – March 07. All Cocaine and Opiate Use (GOWM)</b>
<b>Page 42</b>	<b>Graph – Class A drug use % in West Midlands CJITs over April 06 – March 07. All Cocaine and Opiate Use. (GOWM)</b>
<b>Page 44</b>	<b>Table – Accommodation and Drug use situation of Offenders who commit Theft</b>
<b>Page 46</b>	<b>Graph – Accommodation and Drug use situation of Offenders who commit Theft</b>
<b>Page 47</b>	<b>Table – Risk and Alcohol Use</b>
<b>Page 48</b>	<b>Graph – Risk and Alcohol Use</b>
<b>Page 49</b>	<b>Table –Risk and Drug Use</b>
<b>Page 50</b>	<b>Graph – Risk and Drug Use</b>
<b>Page 51</b>	<b>Table – Risk and the Pathways</b>
<b>Page 53</b>	<b>Graph – Risk to Others and the Pathways</b>
<b>Page 54</b>	<b>Graph – Risk and a Range of Existing and New Pathways</b>

<b>Page 55</b>	<b>Table – Risk and Combinations of Pathways</b>
<b>Page 57</b>	<b>Graph – Drugs, Alcohol and Drugs and Alcohol Combined and their effect on Risk</b>
<b>Page 58</b>	<b>Graph – Risk to Others</b>
<b>Page 59</b>	<b>Table – Risk and the Pathways, Male Adults and Male Young Offenders</b>
<b>Page 63</b>	<b>Tables – Most Common Crimes (OASys)</b>
<b>Page 65</b>	<b>Table – Offender Need and the Pathways</b>
<b>Page 66</b>	<b>Graph – Offender Need and the Pathways</b>
<b>Page 71</b>	<b>Table – Offender Need and Combinations of Pathways</b>
<b>Page 74</b>	<b>Graph – Offender Need and Combinations of Pathways</b>
<b>Page 75</b>	<b>Table – Offender Need and the Pathways – Persistent and Non Persistent Offenders</b>
<b>Page 76</b>	<b>Table – Offender Need and the Pathways – Community and Custodial Sentences.</b>
<b>Page 78</b>	<b>Table – Risk to Self and the Pathways</b>
<b>Page 80</b>	<b>Table – Risk to Self and Combinations of Pathways</b>
<b>Page 81</b>	<b>Table – Risk to Self and Combinations of Pathways</b>

<b>Page 83</b>	<b>Table – Risk to Others and the Pathways</b>
<b>Page 84</b>	<b>Graph – Risk to Others and the Pathways</b>
<b>Page 88</b>	<b>Table – Risk to Others and Combinations of Pathways</b>
<b>Page 89</b>	<b>Table – Risk to Others and Combinations of Pathways</b>
<b>Page 92</b>	<b>Table – Needs of Male Offenders split by Ethnic Group</b>
<b>Page 96</b>	<b>Table – Offender Need. Custodial sentence in the West Midlands</b>
<b>Page 96</b>	<b>Table – Offender Need. Custodial sentences Nationwide.</b>
<b>Page 97</b>	<b>Table – Offender Need. Community sentences in the West Midlands.</b>
<b>Page 97</b>	<b>Table – Offender Need. Community sentence - Nationwide</b>
<b>Page 98</b>	<b>Table – Offender Need Nationwide compared to the West Midlands.</b>
<b>Page 102</b>	<b>Table – Summary of Main Recommendations</b>

## **Timescales – Connect**

- All offenders on the Connect programme enrolled between 30/03/2004 and 02/07/2007.
- All offenders on the Connect programme were released from prison between 04/06/2004 and 07/06/2007.
- Therefore all data pertaining to Connect relates to the following dates:
- 30/03/2004 – 12/07/2007.
- All Offenders were sentenced to custodial sentences of less than 12 months.

**Table 1 – Connect Database**

<b>Table Name</b>	<b>Rows</b>	<b>Columns</b>	<b>Fields with Null Values</b>	<b>Total Fields</b>	<b>% Fields With Null Values</b>
<b>AccomodationTracking</b>	<b>2164</b>	<b>5</b>	<b>6204</b>	<b>10820</b>	<b>57%</b>
<b>Areas</b>	<b>8</b>	<b>2</b>	<b>2</b>	<b>16</b>	<b>12.50%</b>
<b>BeneficiaryDetails</b>	<b>7720</b>	<b>206</b>	<b>837193</b>	<b>1590320</b>	<b>52.60%</b>
<b>CollectedFiles</b>	<b>1</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>100%</b>
<b>Comments</b>	<b>40931</b>	<b>5</b>	<b>21503</b>	<b>204655</b>	<b>10.50%</b>
<b>ConnectProjectWorkers</b>	<b>69</b>	<b>14</b>	<b>594</b>	<b>1216</b>	<b>48.90%</b>
<b>Documents</b>	<b>34</b>	<b>11</b>	<b>2</b>	<b>374</b>	<b>0.50%</b>
<b>DocumentsCollected</b>	<b>90590</b>	<b>11</b>	<b>223137</b>	<b>996490</b>	<b>22.40%</b>
<b>EarlyLeaverReasons</b>	<b>13</b>	<b>2</b>	<b>0</b>	<b>26</b>	<b>0%</b>
<b>HDCBoardLookUp</b>	<b>13</b>	<b>12</b>	<b>82</b>	<b>156</b>	<b>52.60%</b>
<b>Locations</b>	<b>16</b>	<b>3</b>	<b>0</b>	<b>48</b>	<b>0%</b>
<b>MentorContacts</b>	<b>17069</b>	<b>28</b>	<b>232743</b>	<b>477932</b>	<b>48.70%</b>
<b>MentorTimesheets</b>	<b>932</b>	<b>5</b>	<b>0</b>	<b>4660</b>	<b>0%</b>
<b>Mentors</b>	<b>365</b>	<b>6</b>	<b>365</b>	<b>2190</b>	<b>16.70%</b>
<b>Offences</b>	<b>98</b>	<b>3</b>	<b>0</b>	<b>294</b>	<b>0%</b>

<b>OffencesCommitted</b>	<b>8111</b>	<b>4</b>	<b>6732</b>	<b>32444</b>	<b>20.70%</b>
<b>PremCodes</b>	<b>17</b>	<b>2</b>	<b>0</b>	<b>34</b>	<b>0%</b>
<b>PWTimesheets</b>	<b>49824</b>	<b>7</b>	<b>24852</b>	<b>348768</b>	<b>7.10%</b>
<b>SPSuitability</b>	<b>12</b>	<b>2</b>	<b>0</b>	<b>24</b>	<b>0%</b>
<b>TblActivityRecord</b>	<b>47</b>	<b>4</b>	<b>0</b>	<b>188</b>	<b>0%</b>
<b>TblARAttended</b>	<b>1029</b>	<b>7</b>	<b>1108</b>	<b>7203</b>	<b>15.40%</b>
<b>TblAreas</b>	<b>10</b>	<b>11</b>	<b>55</b>	<b>110</b>	<b>50%</b>
<b>TblCarsAppArea</b>	<b>166</b>	<b>5</b>	<b>136</b>	<b>22576</b>	<b>0.60%</b>
<b>TblAttemptedPlacements</b>	<b>1303</b>	<b>16</b>	<b>6268</b>	<b>20848</b>	<b>30.10%</b>
<b>TblCarsComments</b>	<b>6223</b>	<b>10</b>	<b>6250</b>	<b>62230</b>	<b>10.10%</b>
<b>TblCarsReqArea</b>	<b>491</b>	<b>3</b>	<b>6</b>	<b>1473</b>	<b>0.40%</b>
<b>TblEmploymentOutcomes</b>	<b>94</b>	<b>3</b>	<b>0</b>	<b>282</b>	<b>0%</b>
<b>TblHDCBoardRecord</b>	<b>1394</b>	<b>5</b>	<b>775</b>	<b>6795</b>	<b>11.40%</b>
<b>TblHousingAssoc</b>	<b>6</b>	<b>15</b>	<b>20</b>	<b>90</b>	<b>22.20%</b>
<b>TblMentalHealthIssues</b>	<b>67</b>	<b>3</b>	<b>0</b>	<b>203</b>	<b>0%</b>
<b>TblMhIssueAssigned</b>	<b>828</b>	<b>3</b>	<b>0</b>	<b>2484</b>	<b>0%</b>
<b>TblProviders</b>	<b>189</b>	<b>11</b>	<b>1382</b>	<b>2079</b>	<b>66.50%</b>
<b>TblReferralStatus</b>	<b>15</b>	<b>1</b>	<b>0</b>	<b>15</b>	<b>0%</b>
<b>TblReports</b>	<b>72</b>	<b>10</b>	<b>72</b>	<b>720</b>	<b>10%</b>
<b>TblTarget</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>3</b>	<b>0%</b>
<b>TblTempYSS</b>	<b>92</b>	<b>3</b>	<b>8</b>	<b>276</b>	<b>2.90%</b>
<b>TOTAL</b>	<b>230014</b>	<b>445</b>	<b>1369493</b>	<b>3798046</b>	<b>36%</b>

Table 1 illustrates the structure of the Connect database as well as the amount of null values in the database.

Connect rely on information from external sources for their assessments, such as OASys data. Therefore if this data is not available, it cannot be recorded on Connect accounting for some of the null values present in the dataset.

Some examples of this include:

- The information missing from the Offences Committed table is primarily offence dates. Connect obtain this information from OASys. There are many records on OASys that do not have this information or the information has been inputted incorrectly.
- The CARS project has only been up and running for 18 months. Beneficiaries enrolled before this date will therefore have null information in these fields. All tables with the prefix "tbl" relate to CARS.
- Only 12% of beneficiaries get to HDC boards and not all beneficiaries will get through all the stages. This accounts for the null information in any fields relating to HDC.
- 22% of the fields in the documents collected table are null. This is partly accounted for by the fact that only around 68% of beneficiaries have a Pre Sentence Report (PSR) so Connect can only collect reports for these beneficiaries. This highlights the issue of PSRs generally and the fact that the number of offenders that have a PSR is low nationwide. This is an area that needs addressing.
- Information relating to Connect Project Workers (CPWs) is only 52% complete. This information was not considered as critically important so Connect have stopped recording this information.
- 57% of the fields in the accommodation tracking table are null. This figure of 57% is perfectly acceptable. The data for these people is recorded elsewhere.
- Connect is primarily an employment project and was never intended to directly reduce reoffending. Therefore PNC numbers were not routinely collected. However, a recent report showed that Connect reduced reoffending by around 8%. PNC numbers were needed to research this so 6 months ago, PNC numbers were obtained for many beneficiaries. PNC numbers are now routinely collected.
- Connect was conceived as an employment project and the lack of information available about other pathways reflects this.

It is important to note that null values do not mean that data is not being collected properly or that information is missing. The points explained above illustrate some of the reasons for null values being present in the Connect dataset.

## **Sample Information**

This section describes the data sources and information about samples that have been used. There are two main sources of data that have been analysed in this Report. The first is the Connect database which contains details of offenders who have been imprisoned for less than 12 months.

The second source of information is the OASys database which contains information about offenders. Forensic Pathways has looked at those offenders in custody, starting their sentence. There are 12239 offenders in this sample.

## **Connect – Sample Size**

All the data on the Connect database was analysed so the sample size = 7720. All offenders on the Connect program enrolled between 30/03/2004 and 02/07/2007. All offenders were released from prison between 04/06/2004 and 07/06/2007. All offenders were serving sentences of less than 12 months. The sample breakdown is as follows:

Total sample size = 7720

Adult Male Offenders = 5703

Adult Female Offenders = 437

Male Young Offenders = 1550

Female Young Offenders = 30

## **OASys – Sample Size**

There are over 1.7 million records on OASys and some records refer to different stages of an offender's sentence. For example, OASys assessments can be carried out for a variety of reasons including starting custody, reviewing a sentence plan, starting a licence or before an offender's release from prison. Unless stated, all the records analysed refer to the assessment carried out at the start of custody. The breakdown of the sample is as follows:

Total sample size = 12,239

Adult Male Offenders = 9502

Adult Female Offenders = 617

Male Young Offenders = 2007

Female Young Offenders = 108.

All assessments were carried out between 2002 and 2007. The sample size of female young offenders is small simply because there are a lower number of female young offenders in custody than in any other offender group. Some variables could not be analysed because of the sample size. The main example of this is the section on risk and the Pathways. The low number of female young offenders considered a risk meant that any findings would be based on a very small sample size. Therefore a decision was made not to include these results in some cases to avoid presenting misleading results.

## **Data Gaps**

A large amount of data was analysed for the report, however there was still some data missing. The main problem was the number of null values present in the data set. Once these had been excluded from the sample, the sample size did decrease in some cases.

Forensic Pathways also uncovered potential problems in the way data is being recorded on OASys in section 8 which assesses drug use. There is a particular question which requires 2 to be entered if an offender is using a class A drug, 0 to be entered if an offender is using any other drug and left blank if the offender is not using any drugs. There seemed to be a very low number of offenders that were considered completely drug free. Forensic Pathways suggests that 0 is being entered mistakenly when drug use is not a problem. Further research is needed to clarify this issue and consequently only Class A drugs were considered in this study.

The Connect database has null values in 36% of the fields. The particular tables of interest are the beneficiary details table which has 52% null values and the offences committed table which has 20% null values. Information such as PNC and CRO numbers is missing in many cases and this is needed to link the database to OASys. Offence date is missing from many records in the offences committed table. This is problematic for investigating issues such as reoffending and identifying patterns of offending.

Connect are now collecting PNC numbers as routine. Connect was originally an employment project so PNC numbers were not collected. Some research has been conducted recently to assess reoffending rates for beneficiaries on Connect and as a result PNC numbers are now collected.

Forensic Pathways understands that the database was designed to track and record information for budgetary purposes. However, we recommend that more effort is made to ensure all available information gets recorded on Connect.

Some information is missing on OASys on many records. This could be because not all sections of OASys are filled out at every assessment. However, it would be useful to have information such as PNC and CRO numbers on every

record to ensure that they can be cross-referenced to other sources of information such as Connect. Sentence date is also missing in many cases and has been recorded as 01-01-1900. This was problematic when looking at potential re-offenders as it was difficult to determine the order in which offences were committed.

Forensic Pathways did not have access to some personal information on OASys such as names and addresses of offenders. This meant that detailed analysis of geographical trends could not be conducted. We suggest that this information be made available to allow analysis to be conducted.

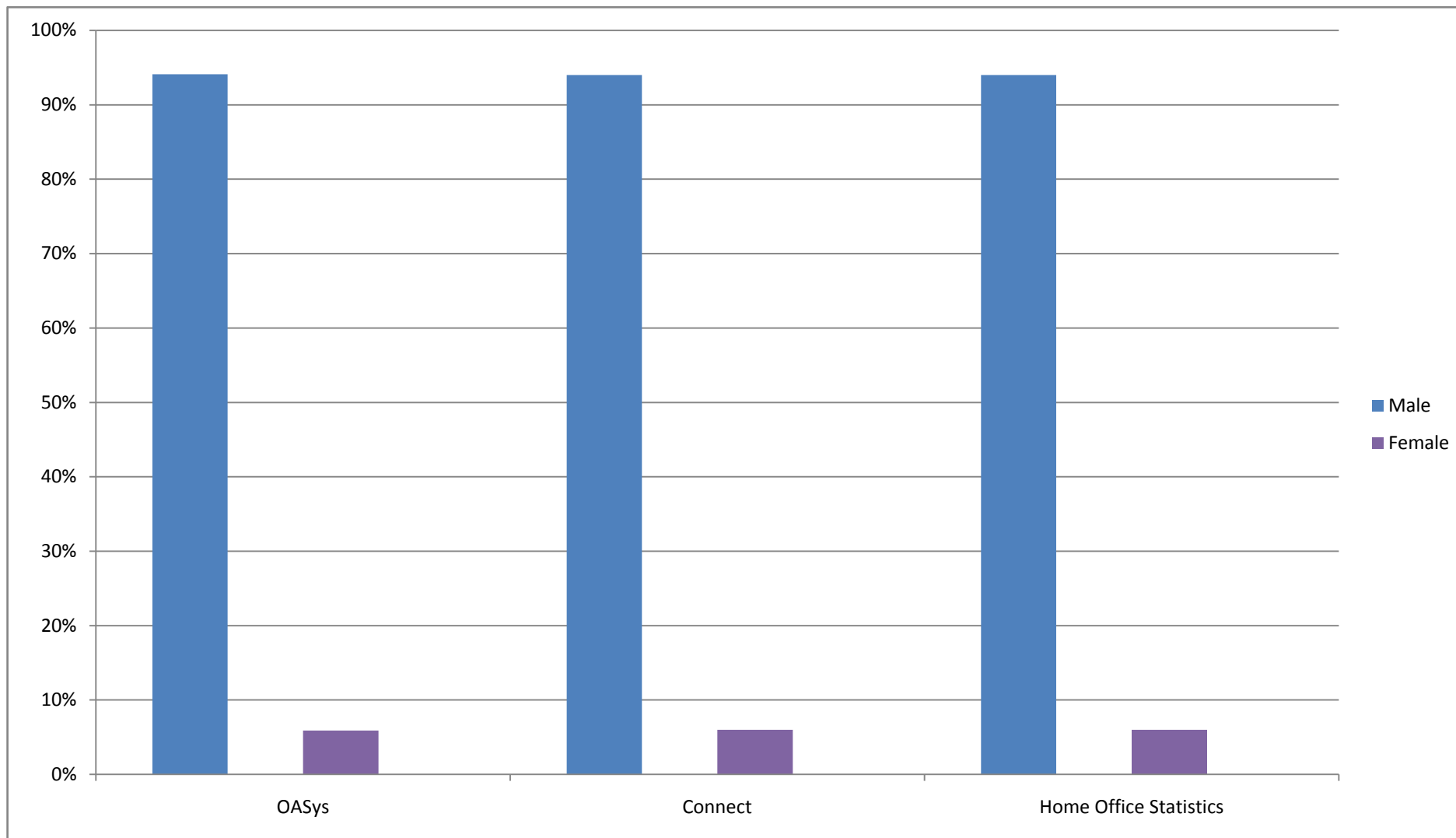
**NOTE: Throughout, "Example statistics" are presented. These are intended to put the percentages in context and make the interpretation of the percentages clear and unambiguous. They are not designed to highlight a "stand out" issue or statistic. Please refer to the accompanying text for this discussion.**

### Demographic Information

This section outlines the demographic information about the offenders on Connect and OASys.

**Table 2 – OASys, Connect Databases and Home Office Statistics On Gender and Crime.** Home Office Statistics\* taken from *Women and the Criminal Justice System* (2003) published by the Home Office.

	OASys	Connect	Home Office Statistics
Male	94%	94%	94%
Female	6%	6%	6%



**Figure 1. OASys, Connect Databases and Home Office Statistics On Gender and Crime. Home Office Statistics\* taken from *Women and the Criminal Justice System* (2003) published by the Home Office.**

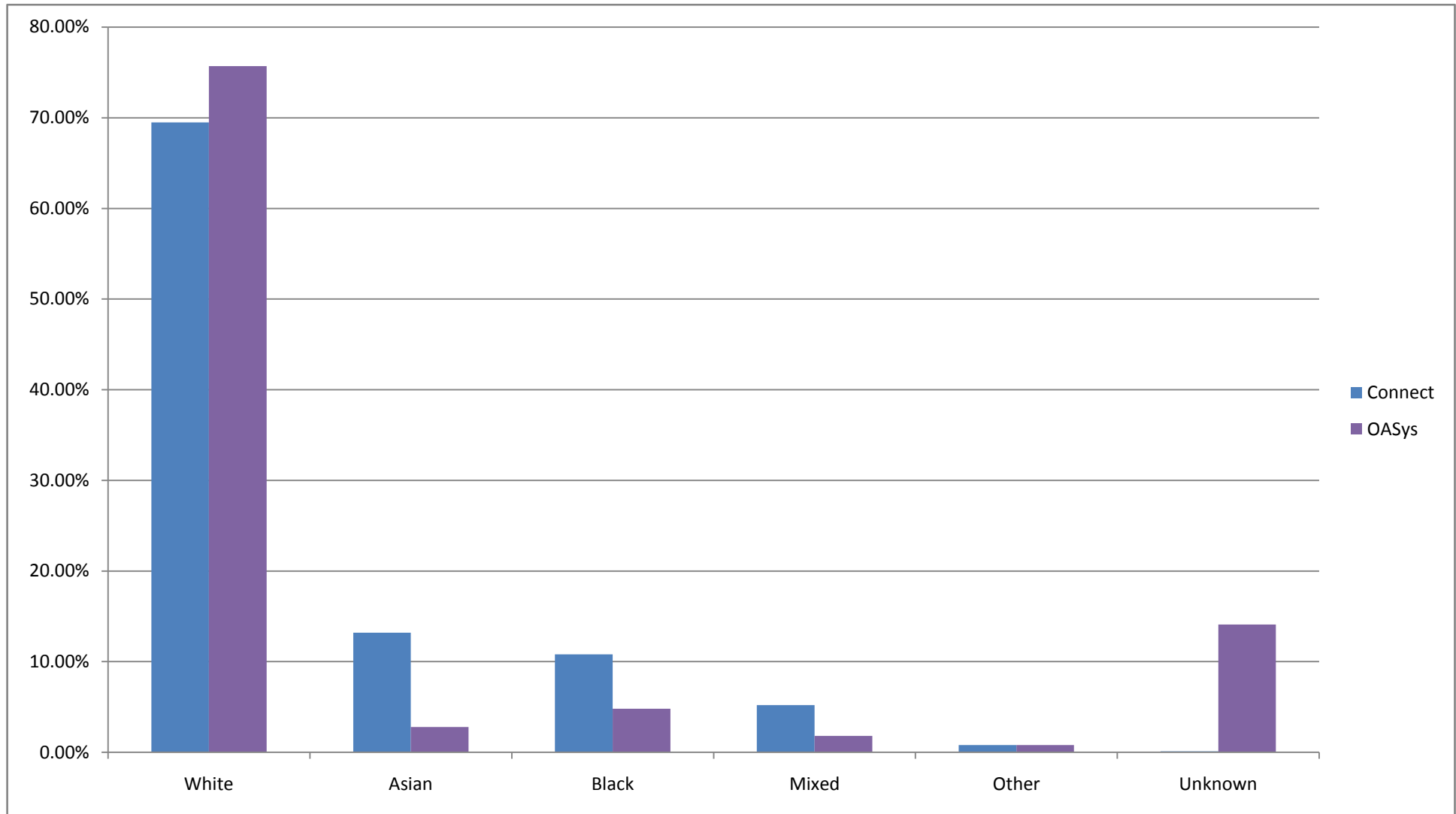
Table 2 and Figure 1 show the percentage of offenders and gender information. 94% of offenders registered with Connect are male and 6% female. This correlates with official Home Office information. 94% of offenders on OASys are male compared to 6% being female again correlating well with Home Office statistics. This means that the findings regarding gender can be interpreted with a high level of confidence.

**Table 3 - Ethnicity Information from the Connect and OASys databases.**

<b>Ethnicity</b>	<b>Connect</b>	<b>OASys</b>	<b>Oasys West Midlands</b>
<b>White</b>	<b>69.50%</b>	<b>75.70%</b>	<b>71.60%</b>
<b>Asian</b>	<b>13.20%</b>	<b>2.80%</b>	<b>6.30%</b>
<b>Black</b>	<b>10.80%</b>	<b>4.80%</b>	<b>5.90%</b>
<b>Mixed</b>	<b>5.20%</b>	<b>1.80%</b>	<b>2.90%</b>
<b>Other</b>	<b>0.80%</b>	<b>0.80%</b>	<b>1.10%</b>
<b>Unknown</b>	<b>0.10%</b>	<b>14.10%</b>	<b>12.20%</b>

The majority of offenders enrolled on Connect are white. Asian people make up the second largest group followed by black people. This is interesting because a common assumption is that black people are over represented in the prison population. This may well be the case, but the number of Asian prisoners has risen dramatically. A Home Office study into Race and the Criminal Justice System (2004) showed that 16% of prisoners were black and 3.4% of prisoners were Asian. The statistics gained from Connect show that the numbers of Asian prisoners are rising and they now outnumber black prisoners. It could be the case that the number of Asian prisoners is higher in this particular sample because sentences of under twelve months are considered.

The fact that there are more black offenders in the OASys sample supports this view. It is likely to be the case that there are more Asian people being sentenced to less than 12 months but that the numbers of Asian people being sentenced to longer sentences has stayed the same. The OASys data on ethnicity needs to be interpreted with some caution because there are a large proportion of offenders for which there is no information about their ethnicity. It could be that some information is being obscured by this. Figure 2 illustrates the differences between the two samples with regards to ethnicity.



**Figure 2. Percentage of offenders and the ethnic category they fall into from the Connect and OASys samples.**

**Offender Need - Analysis of the Connect Sample**

This section looks at the needs of offenders using the Connect sample. The needs are classified according the seven Pathways. Because there was only limited information available some of the Pathways were not analysed. This information is available in the OASys section of the Report.

**Table 4 – The Accommodation situation of all 7720 offenders registered on Connect between 2004 – 2007 and differences between offender groups.**

	All Offenders	Adult Male	Adult Female	Male Young Offenders	Female Young Offenders
No Fixed Abode	15.30%	16.90%	25.90%	9.10%	20%
Transient / Short Term	9.90%	9.20%	18.20%	9.90%	20%
Bail / Probation	1.30%	1.10%	2.10%	1.30%	20%
Hostel	0.70%	0.60%	0%	0.70%	40%
Supported Housing	0.04%	0.06%	0%	0%	0%
Unsure					

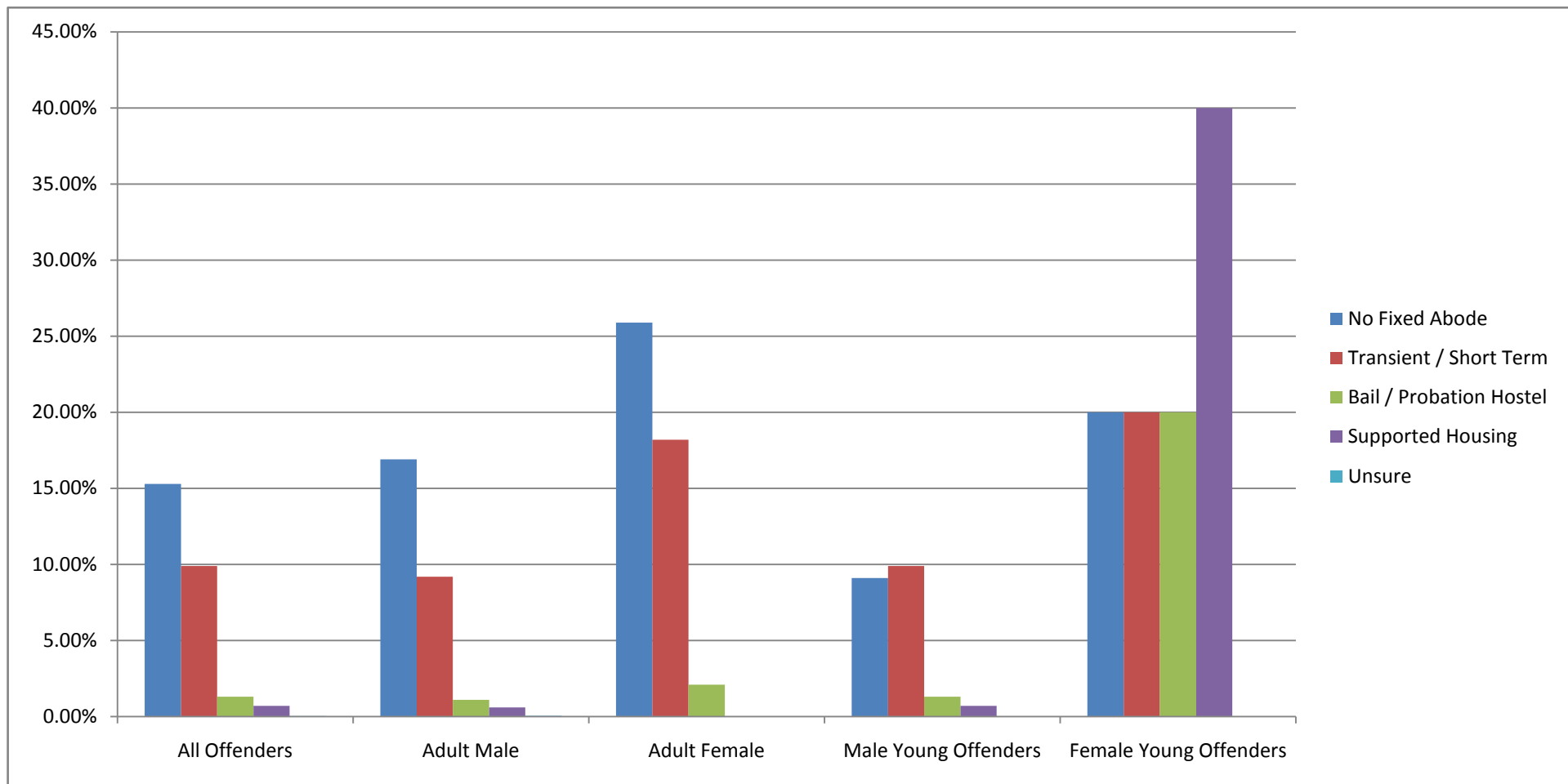
**Example Statistic:**

**25.9% of adult female offenders have no fixed abode.**

Table 4 shows the accommodation situation of all 7720 offenders registered on Connect. It also shows differences between offender groups. Offenders with permanent independent housing are not shown on Table 4 because they are not considered to have an accommodation need.

The majority of offenders have permanent independent housing at the time of enrolment on Connect. In particular, Male young offenders are more likely to have permanent independent housing than other offender types. A possible reason for this is that they live with their parents.

In terms of need, adult female offenders are more likely to be homeless than any other group. This is perhaps an area where intervention is needed. It is important to take into account the fact that offenders may report their accommodation situation inaccurately to avoid problems that are associated with being homeless and claiming benefits. Figure 3 illustrates the differences apparent in the table.



**Figure 3. Accommodation Situation of All Offenders registered on Connect between 2004 – 2007.**

**Table 5 – Education, Training and Employment Situation of all Offenders on Connect registered between 2004 – 2007 and the difference between offender groups.**

	All Offenders	Adult Male	Adult Female	Male Young Offenders
Unemployed	70%	72.40%	74%	65.40%
Full Time / Self Employed	19.90%	20.40%	4.90%	21.80%
Unavailable for Work	3.20%	2.80%	15.40%	1.60%
Part Time Employed / Self Employed	2.10%	2%	2.80%	2%
New Deal Programme	1.90%	0.50%	2.10%	3.90%
Full Time Education or Training (16hrs +)	1.30%	0.80%	0%	2.80%
Temp / Casual Work	0.90%	0.60%	0%	2%
Part Time Education or Training (<16hrs)	0.50%	0.50%	0.70%	0.40%

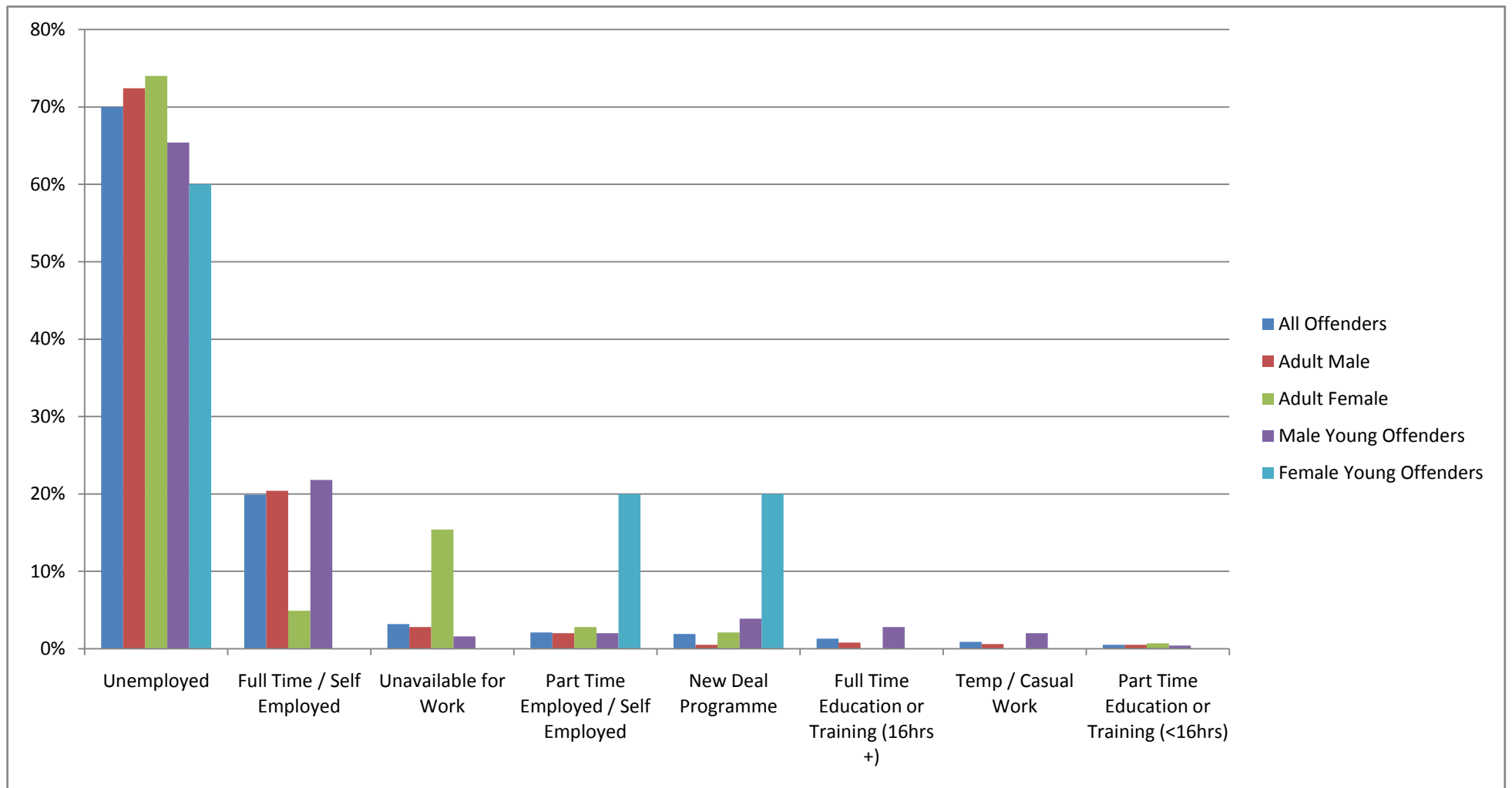
**Example Statistic:**

**74% of adult female offenders are unemployed.**

Table 5 shows the education, training and employment situation of all 7720 offenders registered on Connect. It shows each offender group and the differences between them.

The statistics show that the overwhelming majority of offenders are unemployed at the time of their enrolment on Connect. This is true for all offender groups. Employment is an area where intervention is needed. A large proportion of women are considered as unavailable for work perhaps because they are more likely to be at home caring for children.

It is interesting that a relatively large number of male young offenders and male adult offenders are in employment. This is area where further research is needed. It is possible that offenders report their employment situation inaccurately.



**Figure 4. Education, Training and Employment Situation of All Offenders registered on Connect between 2004 – 2007.**

**Table 6 - Alcohol Problems at Time of Enrolment on Connect. All Offenders registered between 2004 – 2007.**

	All Offenders	Male Adult	Female Adult	Male Young Offender	Female Young Offender
<b>Problems</b>	<b>19.80%</b>	<b>16.10%</b>	<b>24.80%</b>	<b>27.90%</b>	<b>20%</b>

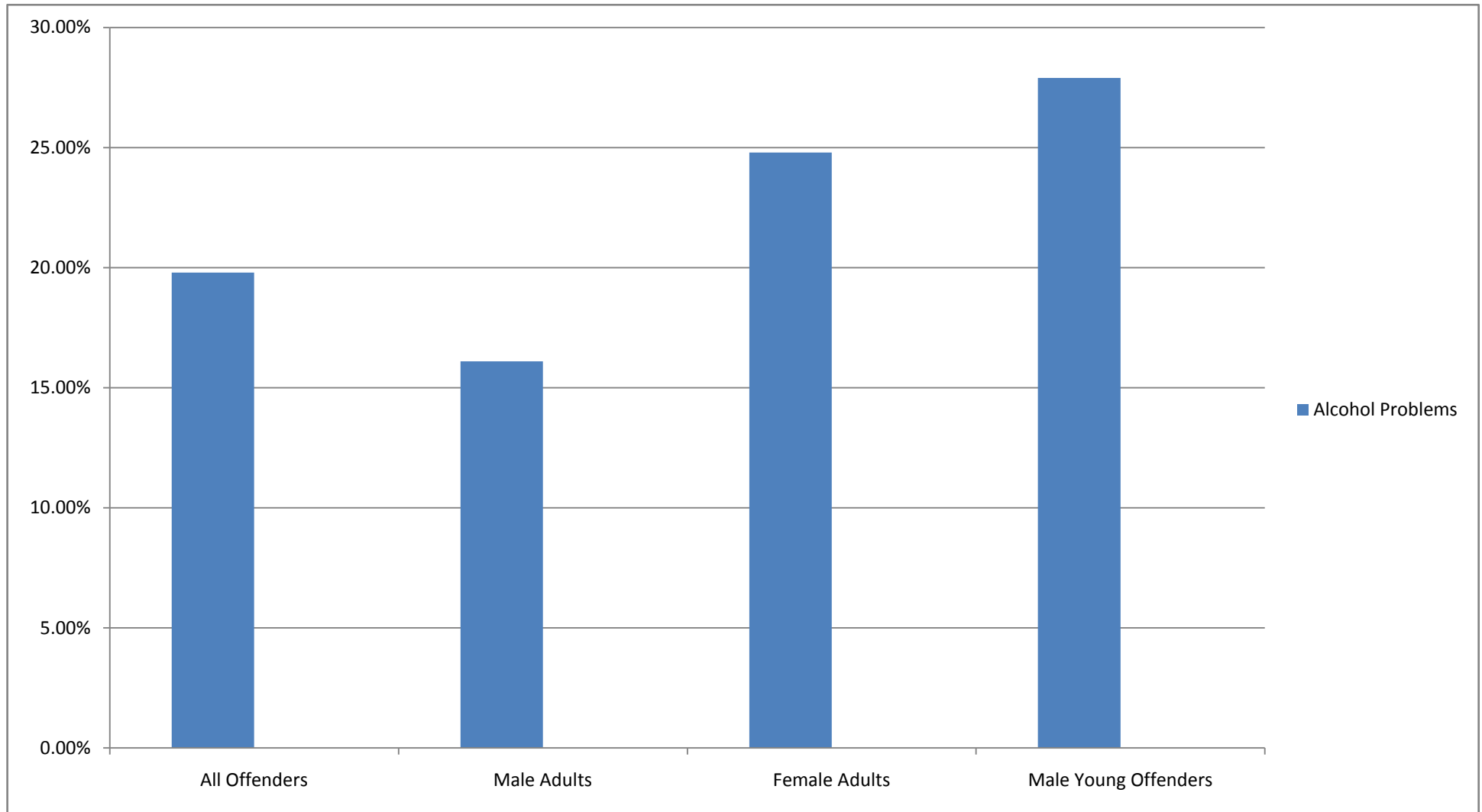
**Example Statistic:**

**27.9% of male young offenders have an alcohol problem at the time of enrolment on Connect.**

Table 6 shows the percentage of offenders that have an alcohol problem at the time of their enrolment on Connect. It also shows the differences between offender groups. Figure 5 illustrates the differences between groups.

Table 6 clearly shows that male young offenders have the highest rate of alcohol problems, followed by female adults. Alcohol treatment programs seem to be clearly in need and could be targeted at the groups most at risk. Alcohol also plays an important role in risk to self and others and is discussed later. Detailed analysis revealed that male young offenders were far more likely to engage in alcohol induced violent behaviour than any other group. A specific intervention for male young offenders is recommended here to reduce violence related to alcohol consumption.

Female adults are also more likely to have alcohol problems than their male counterparts. Again a specific intervention is recommended here to reduce the frequency of alcohol problems in the female population. Other research supports this finding. Borrill et al (2003) found that a third of women prisoners in their sample were considered to have a problem with alcohol.



**Figure 5. Alcohol Problems of Offenders registered on Connect between 2004 – 2007 assessed at the Time of Enrolment.**

**Table 7 – Percentage of all Offenders on Connect that have a drug problem at the time of enrolment. (2004 – 2007).**

	All Offenders	Male Adult	Female Adult	Male Young Offender	Female Young Offender
<b>Problems</b>	<b>40.10%</b>	<b>39.70%</b>	<b>68.50%</b>	<b>34.70%</b>	<b>60%</b>

**Example Statistic:**

**68.5% of female adults have a drug problem at the time of enrolment on Connect.**

Table 7 shows the percentage of offenders that have a drug problem at the time of their enrolment on Connect. Figure 6 illustrates the differences between offender groups.

Drug use is high across all offender groups but there are important differences to note. The most worrying statistic is that 68.5% of women offenders for which this information is available, are considered to have a drug problem at the time of enrolment on Connect. Previous research has found that drug use amongst women in prison is high with 72% of women in one study reporting drug use in the twelve months prior to their assessments. (Borrill et al, 2003). The need for intervention here is obvious. It is perhaps worth noting that almost 40% of women imprisoned are serving sentences for theft or shoplifting (see table 10). There is possibly a link between drug use and these particular offences. It would be of vital importance to address the underlying drug issues when examining offending behaviour.

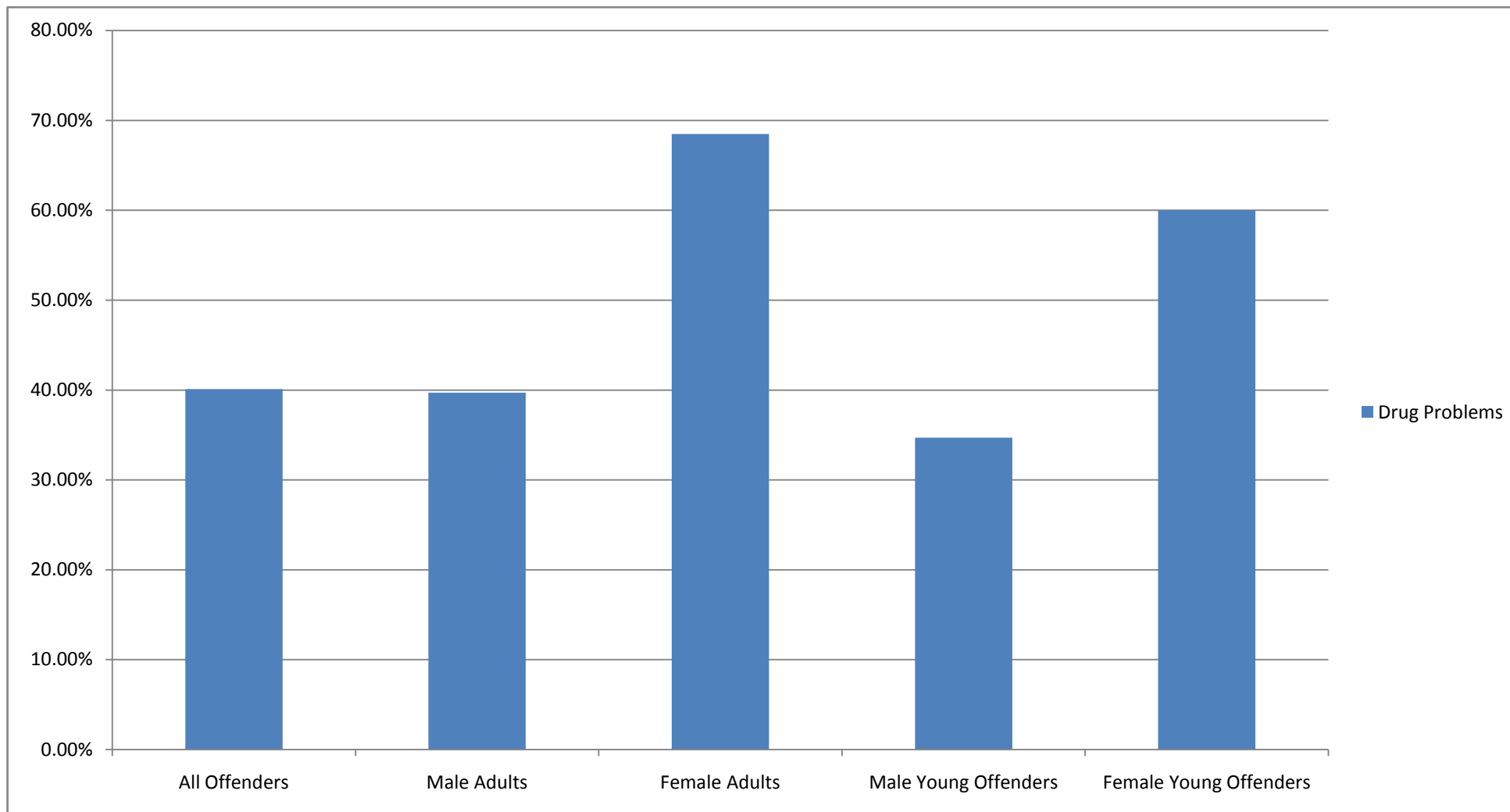
It is possible that these women are going through the system repeatedly and are not in receipt of the help they need to address their drug problems. This brings into question the need for detailed analysis of the drugs data mentioned at the beginning of the Report and the identification of need. It appears clear from the data that needs are clearly identified.

Information gained from the Annual Report of the National Drug Treatment Monitoring System (NDTMS) shows that in the period 1<sup>st</sup> April 2005 to 31<sup>st</sup> March 2006 the ratio of male to female drug users seeking treatment was 3:1. The difference between this and our statistics shows that with regards to drug treatment, more males gained help. However, the data from Connect shows that a higher proportion of female adults have a drug problem.

A possible explanation for this is that men are more likely to seek help for their drug problems. It could also be the case that there is a direct link between the female adults that do not seek help for their drug problem and those that are enrolled on the Connect program. Both sets of data refer to the same geographical area. Either way, the data suggests that female adult offenders are in need of drug interventions and that female drug use is possibly linked to offending behaviour.

There is an issue of availability and access to drug treatment services for female offenders. It is possible that the practicalities of getting treatment act as a barrier for many women who have a drug problem. They may struggle to balance treatment, work and childcare or they may simply be afraid of the consequences of seeking treatment. Often assessments will ask detailed questions about child care and associated issues. Many women may be afraid that their children will be taken into care as a result of their drug problem. These issues apply to all women not just the offending population. It is possible that these barriers result in more women drug addicts going on to commit crime rather than seeking help. A practical intervention here would be to look at how existing drug intervention programmes can be improved for all women, not just women offenders.

Male young offenders have the lowest rate of drug problems. This is interesting because it suggests that there may well be other factors behind their offending behaviour. Previous statistics revealed that the highest rate of alcohol abuse was in the male young offender category.



**Figure 6. Percentage of Offenders that have a drug problem at the time of enrolment on Connect. (Enrolled on Connect between 2004 – 2007).**

**Table 8. A Comparison of the Percentage of Offenders with a Drug or Alcohol problem at the time of enrolment on Connect. (2004 – 2007).**

	All Offenders - Drugs	All Offenders - Alcohol	Male Adults- Drugs	Male Adults - Alcohol	Female Adults - Drugs	Female Adults - Alcohol	Male Young Offender - Drugs	Male Young Offenders - Alcohol	Female Young Offender - Drugs	Female Young Offenders - Alcohol
<b>Problems</b>	<b>40.10%</b>	<b>19.80%</b>	<b>39.70%</b>	<b>16.10%</b>	<b>68.50%</b>	<b>24.80%</b>	<b>34.70%</b>	<b>27.90%</b>	<b>60%</b>	<b>20%</b>

**Example Statistic:**

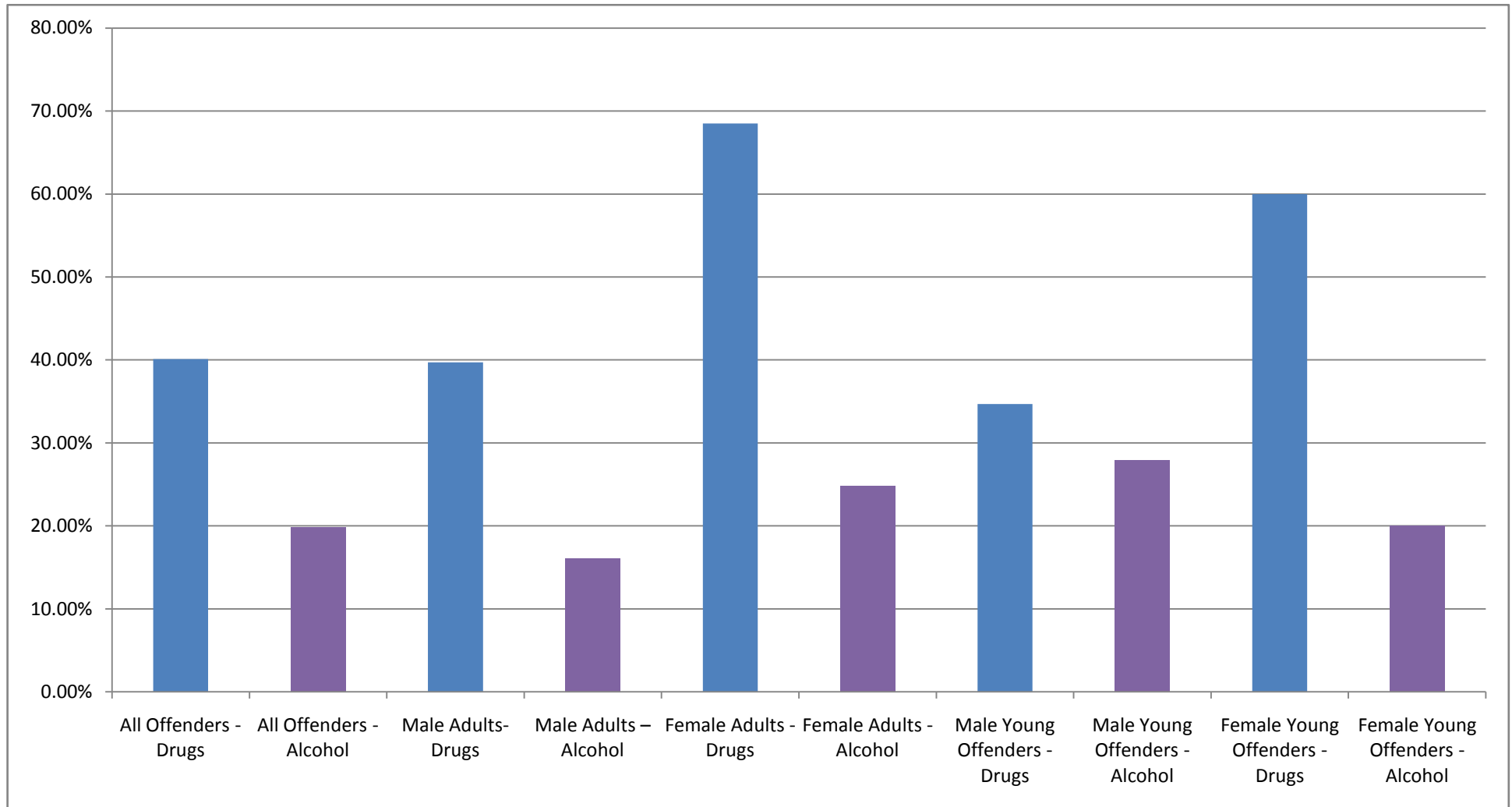
**40.1% of all offenders have a drug problem at the time they enrol on Connect. 19.8% of all offenders have an alcohol problem at the time of enrolment on Connect. Therefore more offenders have a drug problem than an alcohol problem at the time of enrolment on Connect.**

Table 8 shows the percentage of offenders who have a drug or alcohol problem at the time of enrolment on Connect. It is interesting to compare the two factors. Figure 7 illustrates the differences.

The comparison of alcohol and drug issues highlights some important issues. Firstly, more people have drug problems at the time of enrolment on Connect than have alcohol problems. This is particularly true of male adult offenders. Twice as many adult males have a drug problem than an alcohol problem.

There is a clear need here and this illustrates that there is a difference between alcohol and drugs problems. It may be better to consider them as separate issues with regards to treatment and risk. At present drugs and alcohol are considered together as a Pathway. It may be more prudent to separate them completely.

The following section looks at offences committed by offenders registered on Connect.



**Figure 7. A Comparison of the Percentage of Offenders with a Drug or Alcohol problem at the time of enrolment on Connect. (2004 – 2007).**

### **Offences Committed by Offenders registered on Connect. (2004 – 2007).**

In order to assess offender need, there should be an understanding of the issues surrounding crime and offending behaviour. It was therefore felt appropriate to undertake analysis of crimes being committed to see if there were any important issues that need to be highlighted. This section presents the most common crimes committed by offender groups and discusses issues related to offender need.

**Table 9 - Adult Males (Most Common Crimes Committed by Age and Gender) – Connect**

<b>Theft</b>	A horizontal bar chart showing the percentage of most common crimes committed by adult males. The bars are blue and extend to the right. The values are: Theft (23%), Driving Whilst Disqualified (16.40%), Common Assault (5.30%), Burglary (5.70%), and Breach Of Probation Order (4.70%).	<b>23%</b>
<b>Driving Whilst Disqualified</b>		<b>16.40%</b>
<b>Common Assault</b>		<b>5.30%</b>
<b>Burglary</b>		<b>5.70%</b>
<b>Breach Of Probation Order</b>		<b>4.70%</b>

**Table 10 - Adult Females**

<b>Theft</b>	A horizontal bar chart showing the percentage of most common crimes committed by adult females. The bars are blue and extend to the right. The values are: Theft (30.62%), Shoplifting (10.40%), Common Assault (5.30%), Driving Whilst Disqualified (5.70%), and Breach of Probation Order (4.70%).	<b>30.62%</b>
<b>Shoplifting</b>		<b>10.40%</b>
<b>Common Assault</b>		<b>5.30%</b>
<b>Driving Whilst Disqualified</b>		<b>5.70%</b>
<b>Breach of Probation Order</b>		<b>4.70%</b>

**Table 11 - Male Young Offenders**

Theft	13.5
Driving Whilst Disqualified	13.3
Common Assault	7.5
Taking a Motor Vehicle	6.3
Burglary	5.7

**Table 12 - Female Young Offenders**

Theft	37.10%
Burglary	8.60%
Breach of Probation Order	8.60%
Offensive Weapon Handling	5.70%

The above tables (9, 10, 11 and 12) show that the most common crime is theft for all offenders. However, the second most common crime changes depending on the group. It is interesting to note that nearly 40% of women offenders are imprisoned for theft and shoplifting, offences that are considered minor. This highlights an area that needs further examination. More information is needed to ascertain exactly why so many women are imprisoned for minor offences especially given the disruption to their own lives and those of their families and children that a prison sentence causes. Wider use of community sentences may be more appropriate here.

This is a problem that is recognised. "Women in Prison" published by HM Inspectorate of Prisons (2005) recognises that,

*"Much of the literature surrounding the sentencing of women stresses concern about the over-use of custodial sentences for female offenders. A woman convicted of theft or handling at Crown Court is now twice as likely to go*

*to prison as in 1991. At the Magistrates' Court, custodial sentencing of women has increased seven-fold since 1991 (Carter, 2004)".*

Interestingly, drug offences are considered to be the most common offence across the whole female prison population.

*"Among the population of sentenced female offenders, the main offence groups tended to be drug offences (41% at the end of June 2002) followed by theft and handling (18%)."*

This is not the case with the Connect statistics. This is probably because women serving sentences for drug offences are sentenced to longer than one year. This is probably more accurate now because of the new sentencing guidelines introduced regarding drug offences. The HM Inspectorate of Prisons Report recognises this.

*"Home Office research showed that 50% of the increase in the female prison population could be explained by an increase in the number of convictions for drug offences (Woodbridge and Frosztega, 1998). This was felt to be due in part to the Crime (Sentences) Act of 1997, in which the extension of mandatory minimum sentences for drug offending has had a major impact on the treatment of women offenders."*

The second most committed crime for adult males and male young offenders is driving whilst disqualified. This might be considered a minor offence and it might be considered surprising that so many people are imprisoned for this offence. A possible intervention here is to embark upon a publicity campaign to highlight the consequences of committing driving offences. Other community sentences, extended driving bans or fines might also be more appropriate here. It is also possible that many of these offenders have problems with alcohol and / or drugs. Interventions may be needed here to address any underlying issues. Offenders may have been disqualified for a particular offence in the first place and it may be sensible to look at the issues that relate to driving bans to try and reduce the number of offenders who drive whilst disqualified in the first place. Many offenders are disqualified for not holding a license and this is often a consequence of the chaotic lifestyle that many offenders lead.

New powers came into force on 31<sup>st</sup> March 2006 as part of the Drugs Act 2005 giving police the power to carry out drugs tests on offenders at the point of arrest. Currently offenders are drug tested when they commit a "trigger

offence". These offences are generally acquisitive offences and drug possession offences as well as begging offences. A list of trigger offences can be found at [http://www.west-midlands.police.uk/dip/trigger\\_offences.htm](http://www.west-midlands.police.uk/dip/trigger_offences.htm). This policy was introduced due to the fact that over half of acquisitive offences are committed by people with a drug problem. ([http://www.west-midlands.police.uk/dip/drug\\_crime.htm](http://www.west-midlands.police.uk/dip/drug_crime.htm))

Statistics gained from analysis of the Connect database broadly support this. 50% of offences committed by offenders with a drug problem were acquisitive offences. However Forensic Pathways has discovered that a relatively large proportion of offenders with a drug problem serving a sentence of less than twelve months have committed driving offences. 14% of all crimes committed by offenders with a drug problem were driving offences and 19% of all crimes committed by offenders with an alcohol problem were also driving offences. This seems high and suggests an area for intervention.

A recommendation here is that certain driving offences should be regarded as trigger offences, if not at the point of arrest then at the point of conviction. Offenders could be offered treatment programs as an alternative to custodial sentences especially in cases where the offender is not considered a risk to the community. This may decrease the number of prisoners serving custodial sentences for driving whilst disqualified if interventions are implemented early. Addressing the causes of driving disqualifications may have a significant impact on reducing the number of offenders convicted of driving whilst disqualified. It may also be the case that intervening at this point may prevent offenders committing further, more serious crimes as their drug use escalates.

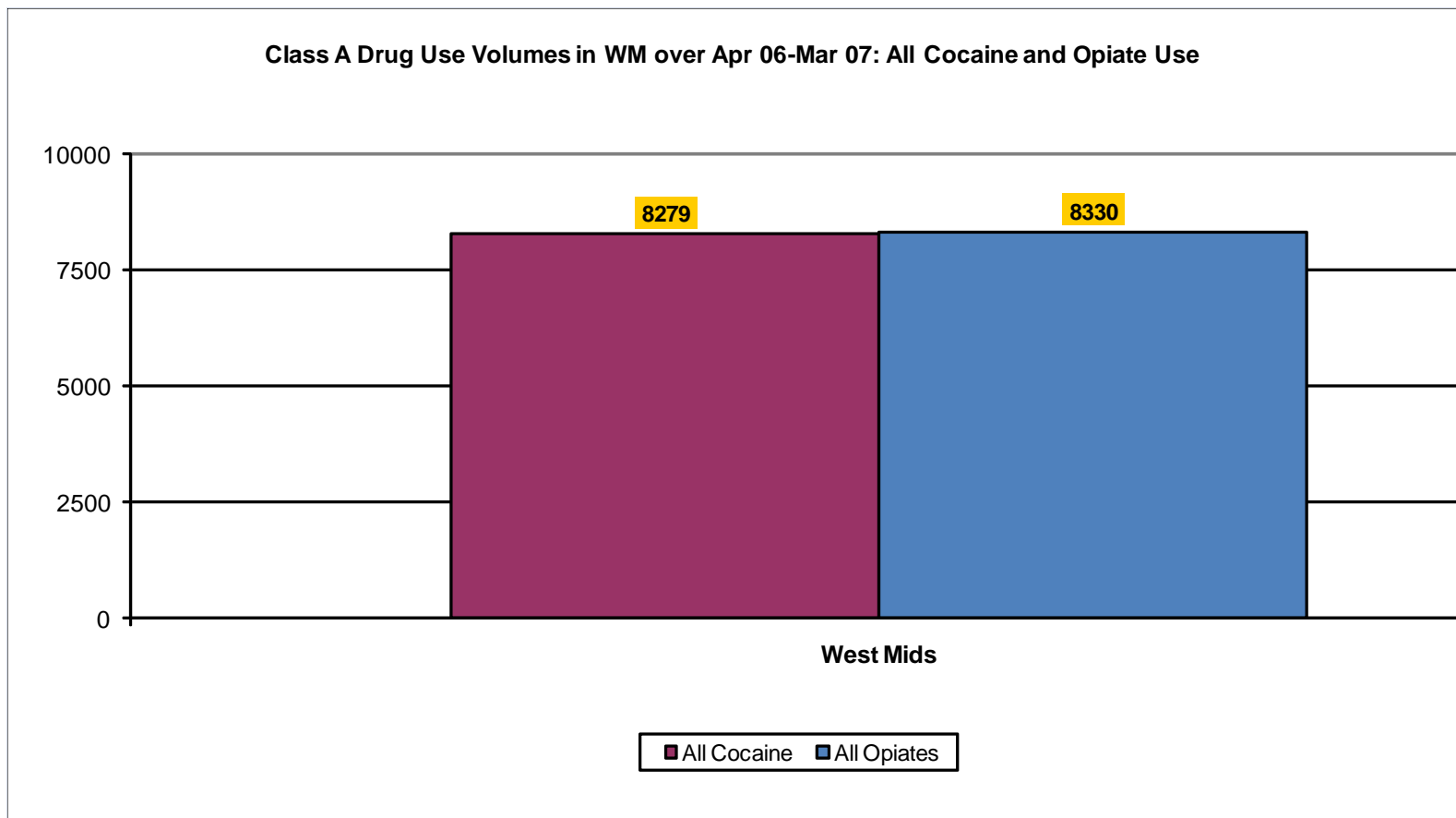
There is certainly a link between drink / drug driving and other offences. An Institute of Alcohol Studies Factsheet (2007) suggests that 40% of convicted drink drivers have previous convictions for other offences.

Cunliffe and Sheperd (2007) assessed the effectiveness of Drug Treatment and Testing Orders (DTTOs) that were handed out in 2004. They found that the second most committed crime by re-offenders was driving offences. This again shows that there is a link between driving offences and drug taking.

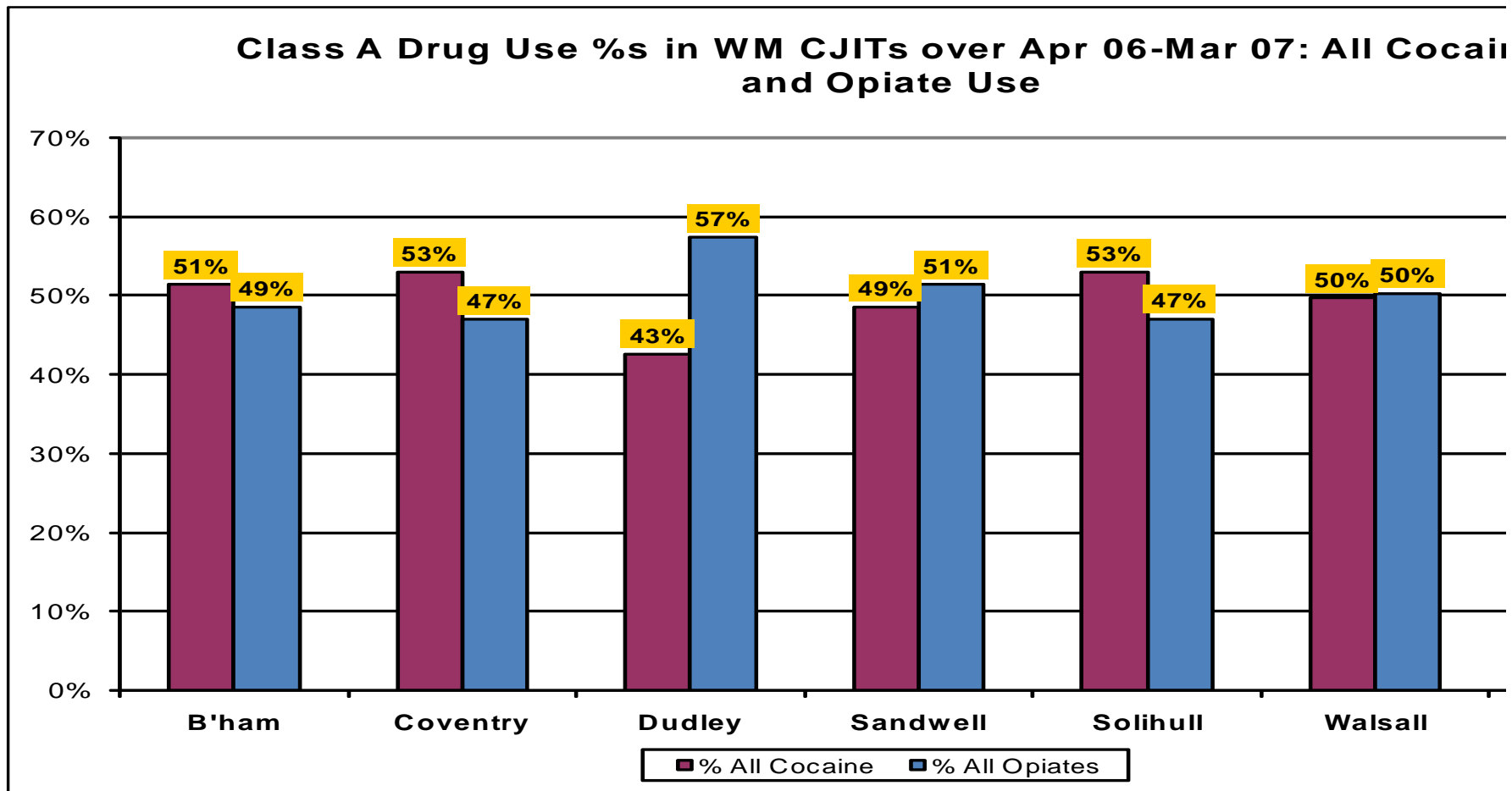
The offences regarded as trigger offences are chosen because there is a direct link between the offence committed and the offender's drug use. This is not the case with driving offences and drug and / or alcohol consumption. Offenders do not commit these offences because of their addiction in the same way that theft is committed to fund a heroin addiction. It would therefore be understandable if driving offences were not added to the list of trigger offences. However, the data suggests that people with drug and alcohol problems commit driving offences frequently and this offers a possible opportunity to intervene earlier to prevent more serious offences being committed. One possible intervention may be to put an arrest referral scheme in place to assess offenders for drug and alcohol problems when they are arrested for driving offences.

Forensic Pathways has obtained research and statistics from the Government Office of West Midlands (GOWM). The information refers to drug tests carried out at the point of arrest for certain trigger offences.

Some important findings are relevant to this study, firstly the types of drugs that are being used in the West Midlands. It may be the case that there is a link between drug type and types of crime being committed. GOWM statistics show that crack and cocaine use is becoming more prevalent especially in more affluent areas. It could be suggested that people using these drugs are more likely to commit non – acquisitive crimes such as public order, domestic or violent offences. Figure 8 shows that crack and cocaine use is now on a similar scale to opiate use. Figure 9 shows the differences between opiate and cocaine use in different regions of the West Midlands.



**Figure 8. Class A Drug Volumes in the West Midlands over April 06 – March 07: All Cocaine and Opiate Use. (GOWM).**



**Figure 9. Class A Drug Use % in West Midlands CJITs over April 06 – Mar 07: All Cocaine and Opiate Use. (GOWM).**

Figure 8 demonstrates the fact that there is an almost 50 – 50 split between opiate and cocaine use in the West Midlands. This has clear implications for offender need and drug treatment programs in prisons. Different

approaches may be needed to treat cocaine use. The area into which offenders are being released may also have an effect on their likelihood of using drugs again and reoffending.

Kothari, Marsden and Strang (2002) looked at drug users in the criminal justice system and raised a number of interesting points which are relevant here. They found that in one pilot study around half of all people arrested for shoplifting tested positive for opiates. This again highlights the link between particular crimes and offender need.

The data shows that offence type is an important variable that needs to be addressed. Often offender needs relating to one or more of the pathways will be directly linked to the offence or offences they have committed and this needs to be addressed when implementing interventions.

Forensic Pathways suggests that a new pathway is introduced specifically to address offending behaviour and the circumstances surrounding offending behaviour. This may have close links to drugs and alcohol interventions and to the thinking and behaviour pathway. However, it would be beneficial to develop specific interventions to address the underlying issues that cause offending.

Forensic Pathways also recommends that drugs and alcohol are split into two distinct pathways. The data suggests that there are significant differences between offenders that have alcohol and drug problems. It is possible that drug interventions are overshadowing alcohol interventions. Offenders with a drug and alcohol problem are probably having their drug addiction addressed but their alcohol problems go undetected and untreated. It is also possible that people with alcohol problems in isolation are being overlooked and their problems are being left untreated. These issues may lead to people reoffending.

The next section looks at combinations of variables in an attempt to highlight offender need.

## **Combinations of Variables and Offender Need**

The following table provides information about a combination of factors. In this instance, the percentage of theft offences that are committed by all offenders and offenders with a drug problem along with housing difficulties.

Theft is the most committed crimes across all offender groups so offenders committing theft were investigated further to see if there were any underlying causes that need addressing.

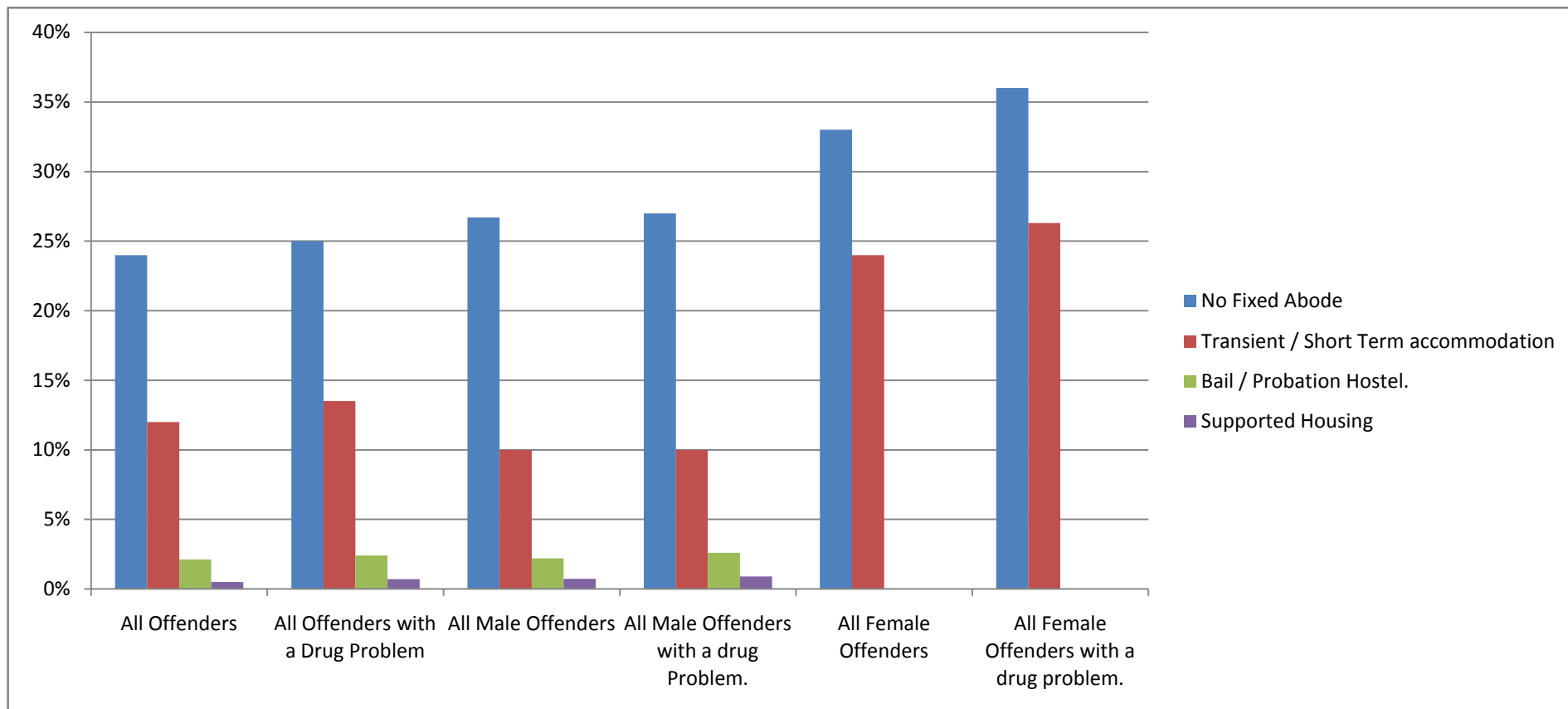
**Table 13 – The accommodation and drug use situation of offenders who commit theft. (2004 – 2007).**

	All Offenders	All Offenders with a Drug Problem	All Male Offenders	All Male Offenders with a drug Problem.	All Female Offenders	All Female Offenders with a drug problem.
No Fixed Abode	24%	25%	26.70%	27%	33%	36%
Transient / Short Term accommodation	12%	13.50%	10%	10%	24%	26.30%
Bail / Probation Hostel.	2.12%	2.40%	2.20%	2.60%	0%	0%
Supported Housing	0.50%	0.70%	0.73%	0.90%	0%	0%

### **Example Statistic:**

**33% of female offenders that have committed theft are homeless. 36% of female offenders that have committed theft and have a drug problem are homeless.**

Table 13 shows that 33% of female adults that commit theft are homeless. If the person has a drug problem, this figure rises to 36%. This suggests that accommodation may be related to offending behaviour. Referring back to table 4, the percentage of female offenders with no fixed abode in the sample was 25% showing firstly that female offenders who commit theft are more likely to be homeless. Secondly, if a female offender has committed theft and has a drug problem, they are even more likely to be homeless. These statistics demonstrate the fact that different factors may influence offending behaviour and that offender need may actually differ depending on offence type.



**Figure 10. Accommodation Situation of All Offenders that commit theft and those with a Drug Problem on the Connect Database. (2004 – 2007).**

The next section looks at risk and a variety of variables to try and pinpoint specific areas that need intervention to try and reduce risk.

## **Connect Risk Factors**

This section looks at risk and a variety of factors. Risk is measured on Connect using very reliable methods. All risk information is evidential rather than subjective and is assessed by a probation officer resulting in reliable information that can be interpreted with a high level of confidence.

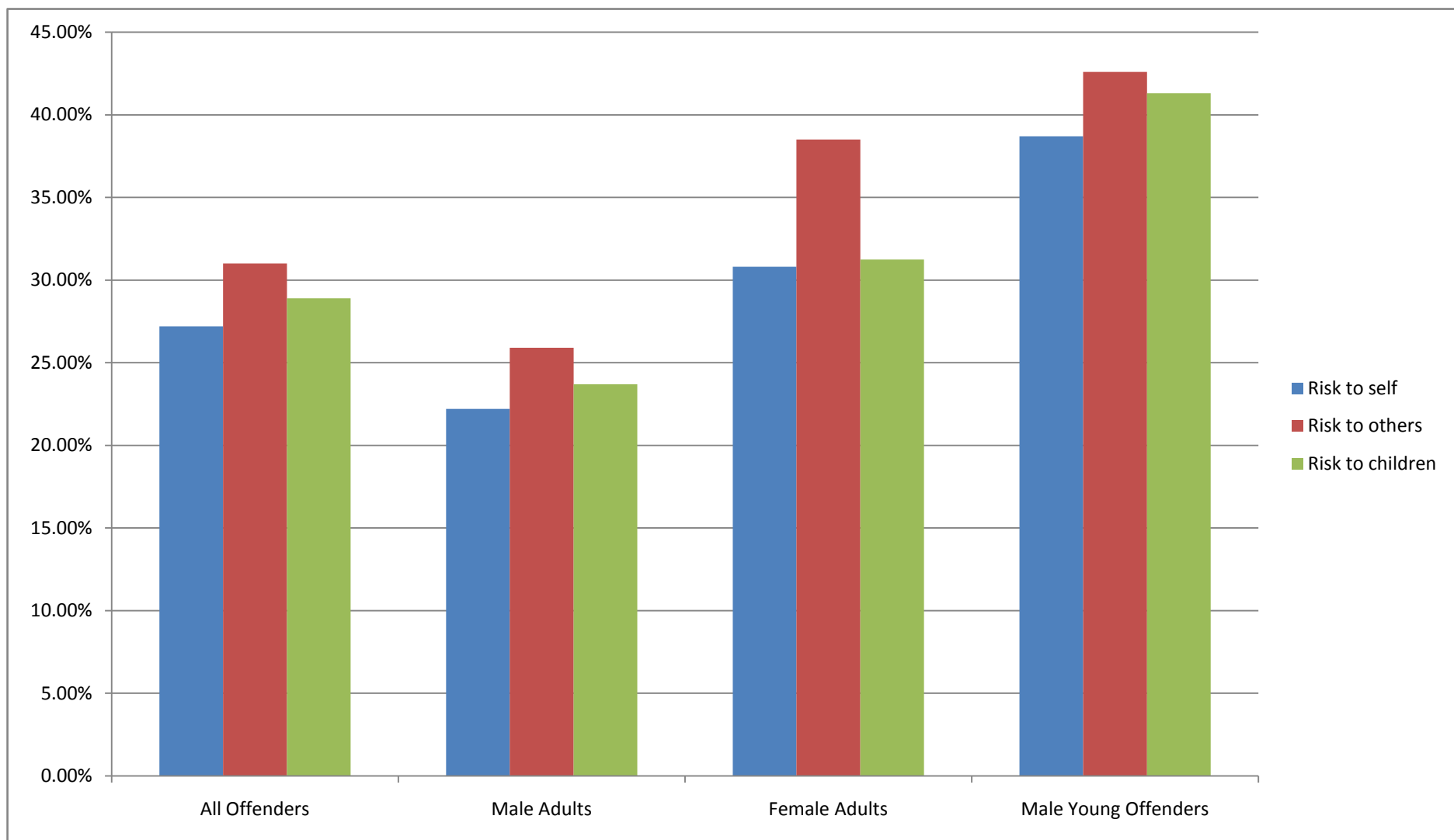
**Table 14. Risk and Alcohol Use for All Offenders. Offenders that are considered a Risk and the Percentage that have an Alcohol Problem. (2004 – 2007).**

<b>Offender Type</b>	<b>Risk to self</b>	<b>Risk to others</b>	<b>Risk to children</b>
<b>All Offenders</b>	<b>27.20%</b>	<b>31%</b>	<b>28.90%</b>
<b>Male Adults</b>	<b>22.20%</b>	<b>25.90%</b>	<b>23.70%</b>
<b>Female Adults</b>	<b>30.80%</b>	<b>38.50%</b>	<b>31.25%</b>
<b>Male Young Offenders</b>	<b>38.70%</b>	<b>42.60%</b>	<b>41.30%</b>
<b>Female Young Offenders</b>	<b>No Data Available</b>	<b>No Data Available</b>	<b>No Data Available</b>

### **Example Statistic:**

**31% of all offenders that are considered a risk to others have an alcohol problem.**

Table 14 shows offenders that are considered a risk and the proportion that have an alcohol problem. Proportionately more male young offenders have alcohol problems and are considered a risk than any other group. This highlights an area where intervention is needed. When examining risk to others, alcohol seems to play an important role. People that have an alcohol problem present a higher risk to other people than themselves. This is true across all offender groups. The implication here is that alcohol interventions need to address offending behaviour especially with regards to offences that put other people at risk. Figure 11 illustrates the levels of risk and alcohol use and shows the differences between offender groups.



**Figure 11. Percentage of Offenders Considered a Risk that have an Alcohol Problem. (2004 – 2007).**

**Table 15. Risk and Drug Use for All Offenders. Percentage of Offenders that are considered a Risk and have a Drug Problem. (2004 – 2007).**

	Risk to self	Risk to others	Risk to children
All Offenders	55%	35.50%	38.70%
Male Adults	51.80%	34.60%	48.40%
Female Adults	81.50%	61.50%	81.30%
Male Young Offenders	52.70%	35.30%	37.70%
Female Young Offenders	No Data Available	No Data Available	No Data Available

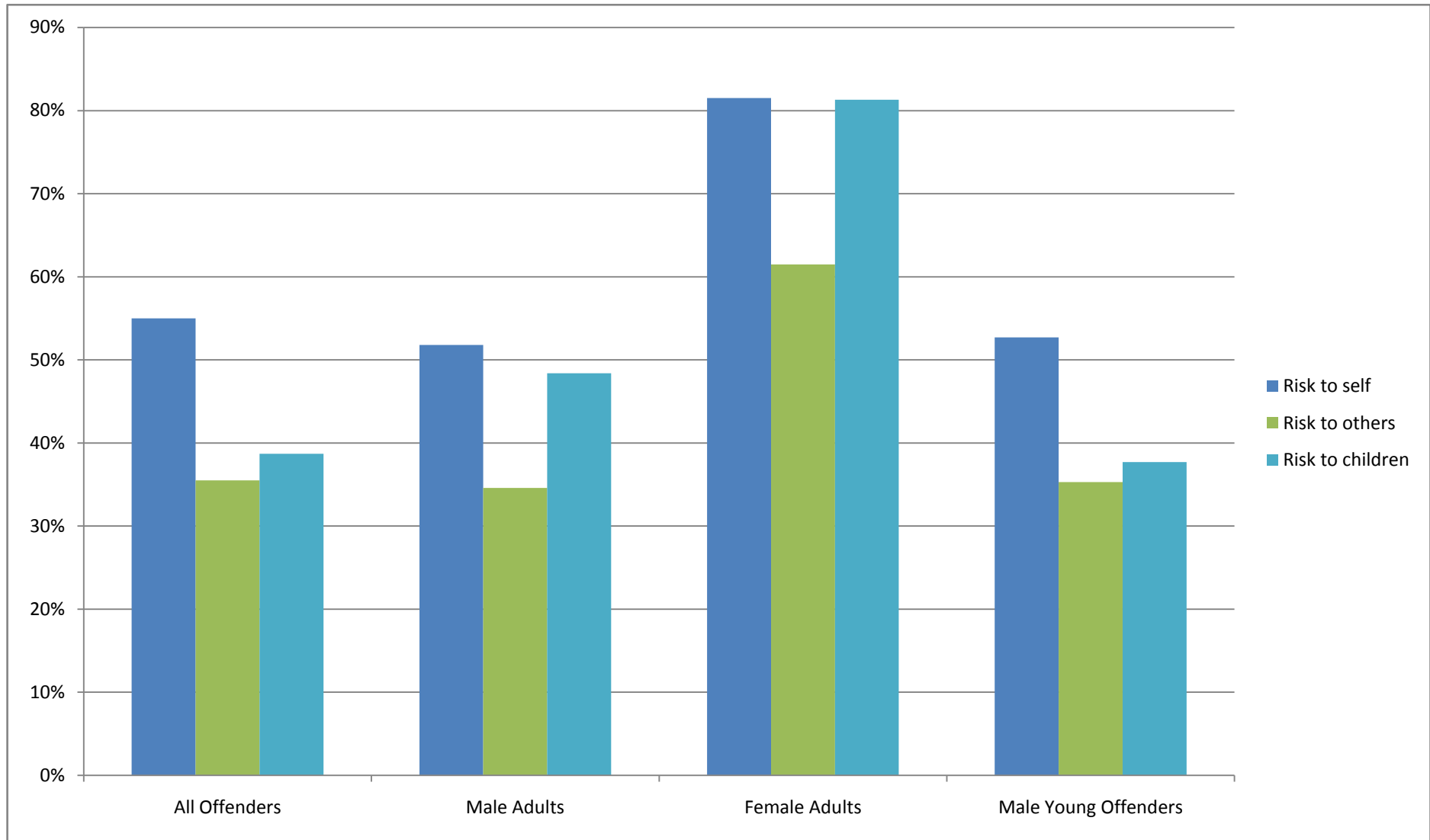
**Example Statistic:**

**61.5% of adult female offenders that are a risk to others have a drug problem.**

Table 15 shows the people that are a risk to others and the proportion that have a drug problem.

Table 15 shows that women who have a drug problem are considered a high risk. The level of risk is far higher than that of adult males or male young offenders. However, levels of risk amongst male adults and male young offenders are still high. A possible intervention here would be to ensure that existing and future drug intervention programs address issues linked to risk.

A worrying statistic is that 81.5% of women that are considered a risk to themselves have a drug problem suggesting that drug use and self harm is directly linked. Tackling female drug use should be a priority in order to reduce all types of risk.



**Figure 12. Risk and Drug Use for Offenders registered on Connect between 2004 – 2007.**

This section examines combinations of Pathways and risk to ascertain if there are any particular combinations of needs that dramatically increase risk.

**Table 16. Risk and the Pathways – All Offenders registered on Connect between 2004 – 2007.**

	Risk to Self	Risk to Others	Risk to Children
<b>Drugs</b>	<b>13.60%</b>	<b>19.50%</b>	<b>6.90%</b>
<b>Alcohol</b>	<b>14.30%</b>	<b>34.60%</b>	<b>10.90%</b>
<b>Unemployment</b>	<b>10.60%</b>	<b>19.60%</b>	<b>7.30%</b>
<b>Accommodation</b>	<b>15.20%</b>	<b>22.90%</b>	<b>8.70%</b>
<b>Unemployment and Alcohol</b>	<b>16.30%</b>	<b>31.30%</b>	<b>10.10%</b>
<b>Unemployment and Drugs</b>	<b>14.10%</b>	<b>17.50%</b>	<b>7%</b>
<b>Drugs and Alcohol</b>	<b>15.80%</b>	<b>30.20%</b>	<b>10.40%</b>
<b>Drugs and Accommodation</b>	<b>16.30%</b>	<b>19.30%</b>	<b>6.80%</b>
<b>Alcohol and Accommodation</b>	<b>19.40%</b>	<b>33.70%</b>	<b>11.20%</b>
<b>Accommodation and Unemployment</b>	<b>15.60%</b>	<b>22%</b>	<b>9.60%</b>
<b>Drugs, Alcohol and Accommodation</b>	<b>20.70%</b>	<b>26.40%</b>	<b>9.20%</b>
<b>Unemployment, Drugs and Alcohol</b>	<b>17.30%</b>	<b>26.50%</b>	<b>8.60%</b>
<b>Accommodation Unemployment and Alcohol</b>	<b>21.90%</b>	<b>34.50%</b>	<b>11.80%</b>
<b>Accommodation, Unemployment and Drugs</b>	<b>16%</b>	<b>17.70%</b>	<b>7.30%</b>
<b>Accommodation, Unemployment, Alcohol and Drugs</b>	<b>21.90%</b>	<b>28.10%</b>	<b>9.40%</b>

**Example Statistic: 19.5% of offenders with a drug problem are considered to be a risk to others.**

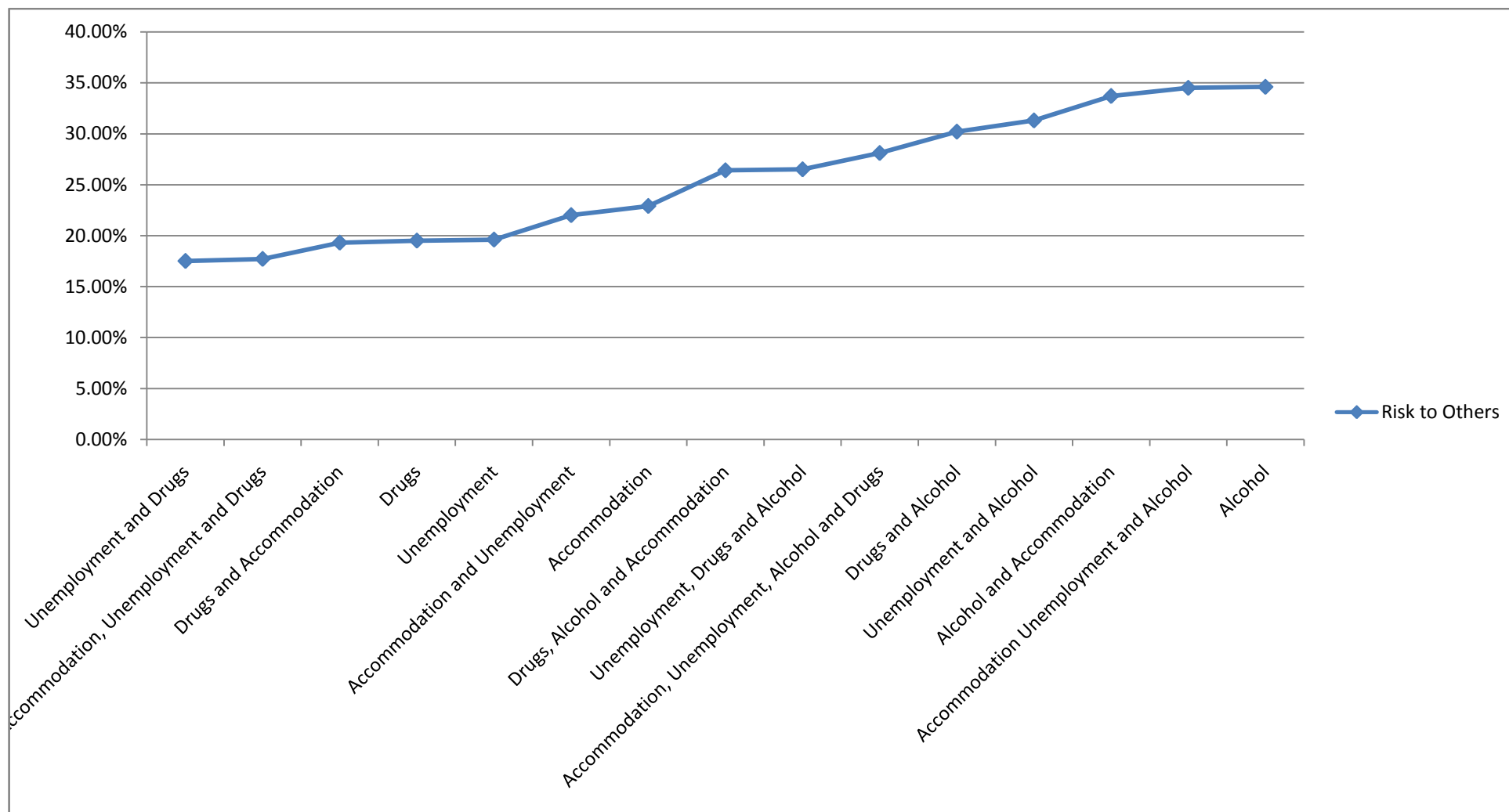
Table 16 examines risk to self, risk to others and risk to children for all offenders on the Connect program. It looks at some of the Pathways individually and also combinations of Pathways. Only some of the Pathways are included because of the information that was available on Connect. Connect was originally conceived to address

employment and housing issues so it is to be expected that information regarding these pathways is not as detailed. This information is available from OASys.

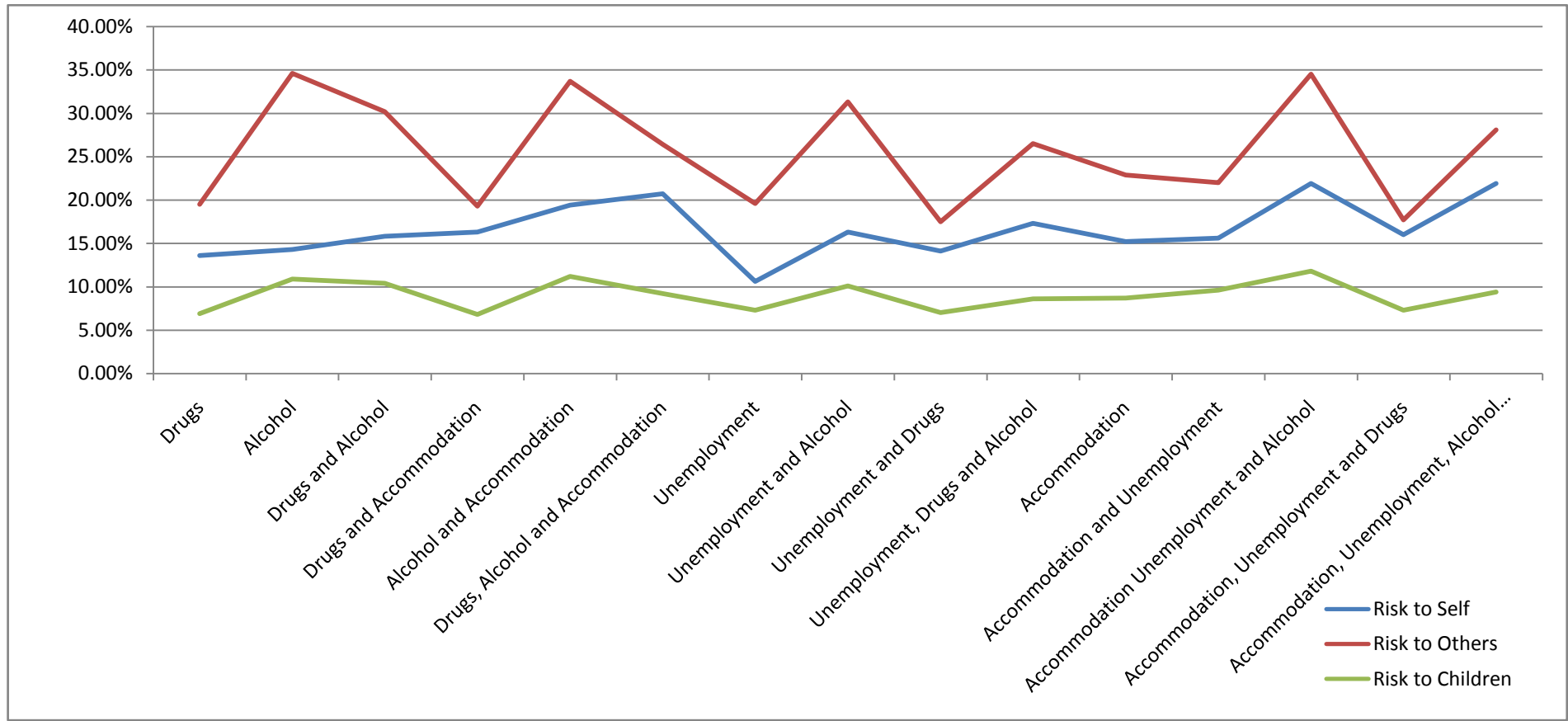
Interestingly, alcohol poses the greatest risk to others for this particular group of offenders. It might be expected that as need increases across Pathways, risk may increase but this is not necessarily the case. Risk is very much dependent on the particular Pathways rather than there being an accumulation of risk.

Alcohol in combination with other needs seems to have a significant effect on risk. Alcohol, accommodation and / or unemployment raise risk to other people. It is possible that these three needs are interlinked. Interventions should recognise the issue of need across Pathways to have a good chance of success.

Figure 13 shows the combinations of Pathways in order of increasing risk highlighting the detrimental effect of alcohol use.



**Figure 13. Risk to Others and the Pathways for All Offenders registered on Connect between 2004 - 2007.**



**Figure 14. Risk and A Range of Existing and New Pathways – All Offenders registered on Connect between 2004 – 2007.**

**Table 17. Risk and the Pathways – Male and Female Adults registered on Connect between 2004 – 2007.**

	Risk to Self - Male	Risk to Self - Female	Risk to Others - Male	Risk to Others - Female	Risk to Children - Male	Risk to Children - Female
Drugs	12.60%	21.40%	19.80%	8.70%	6%	12.60%
Alcohol	14.60%	24.20%	37%	15.20%	11%	15.20%
Drugs and Alcohol	14.80%	35%	31.50%	20%	8.30%	20%
Drugs and Accommodation	15%	20.80%	20.10%	9.40%	6.60%	7.50%
Alcohol and Accommodation	17.20%	35.30%	33%	23.50%	9.10%	11.80%
Drugs, Alcohol and Accommodation	15.40%	50%	23.10%	25%	5.80%	8.30%
Unemployment	10.80%	18.90%	20.40%	7.50%	7.20%	11.30%
Unemployment and Alcohol	16.60%	33.30%	33.10%	14.30%	9.90%	9.50%
Unemployment and Drugs	13.40%	22.20%	18.30%	7.40%	6.30%	11.10%
Unemployment, Drugs and Alcohol	16.70%	42.90%	25.60%	21.40%	7.70%	7.10%
Accommodation	14.60%	19.70%	24.10%	9.10%	8.20%	9.10%
Accommodation and Unemployment	15.60%	20.80%	23.60%	7.50%	8.90%	11.30%
Accommodation, Unemployment and Alcohol	20.30%	46.20%	34.20%	23.10%	8.90%	15.40%
Accommodation, Unemployment and Drugs	15.60%	22.20%	18.50%	8.90%	7%	8.90%
Accommodation, Unemployment, Alcohol and Drugs	18.40%	54.50%	23.70%	27.30%	5.30%	9.10%

**Example Statistic: 24.2% of adult female offenders with an alcohol problem are considered a risk to themselves.**

This section examines gender differences with regards to risk.

Table 17 examines Pathways and various combinations and risk. It shows differences between male and female offenders. In terms of risk to self, male offenders have a consistent risk level across all Pathways whereas

women's risk differs with need. This suggests that the risk male offenders pose to themselves is determined by other factors perhaps mental health issues. On the other hand female risk seems to be influenced by external factors most notably accommodation, unemployment, and alcohol and drugs issues.

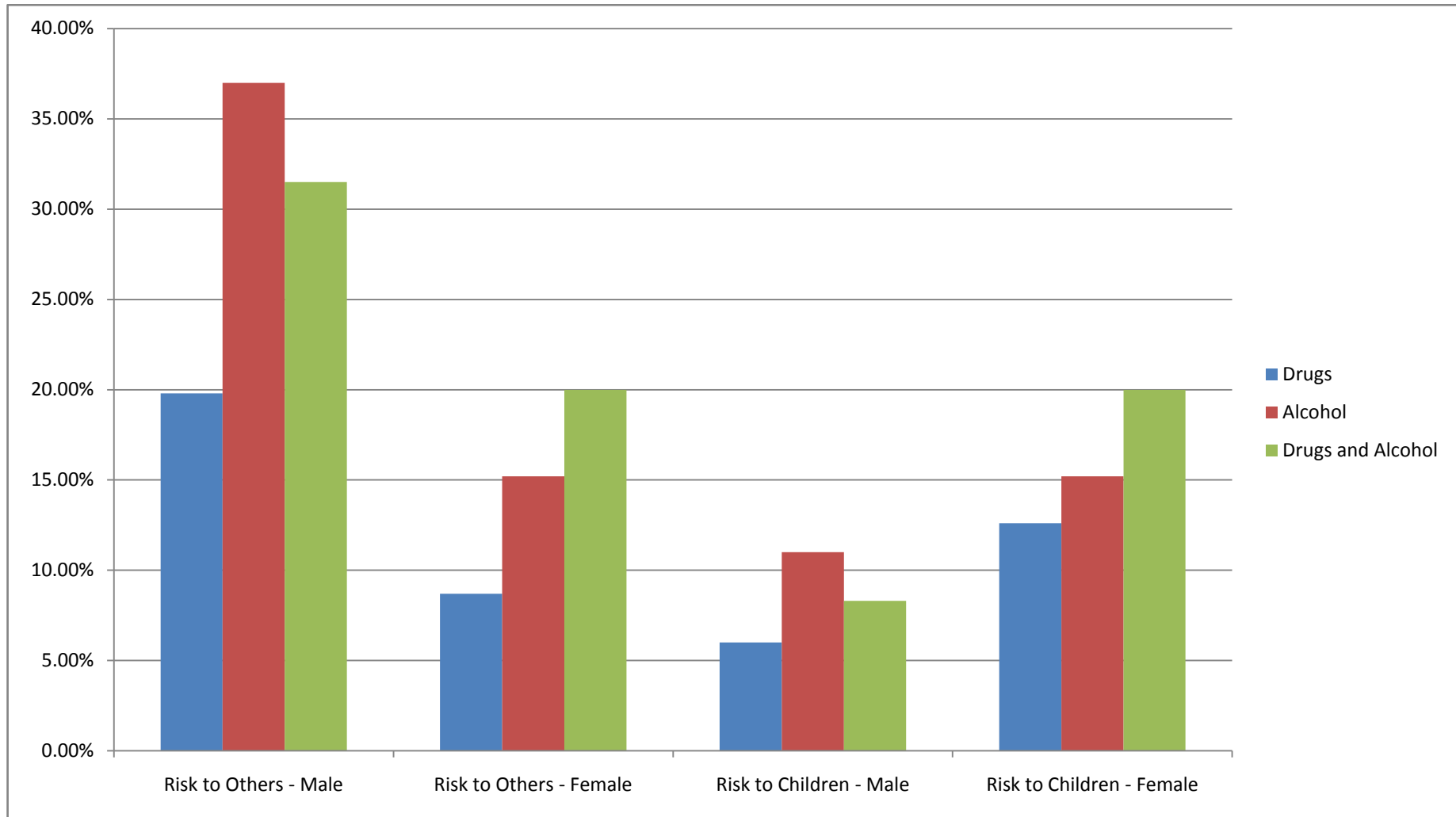
Risk to others presents a different picture. Male offenders' risk to other people does appear to be connected to external factors. Of all the male offenders that have an alcohol problem, 37% are considered a risk to other people. This suggests that alcohol plays a part in their offending behaviour. This is an important issue and should be recognised by alcohol treatment programs.

Figure 15 illustrates the differences in risk between drug problems, alcohol problems and both drug and alcohol problems. It is interesting to note that for these factors there appears to be an accumulative effect for female offenders. This means that female offenders with drug and alcohol problems present more of a risk than female offenders with a drug or alcohol problem respectively. This is a significant finding because it suggests that drugs and alcohol problems need to be assessed carefully to ensure that those offenders with multiple substance abuse problems are treated properly simply because of the fact that risk is significantly increased for this group of offenders.

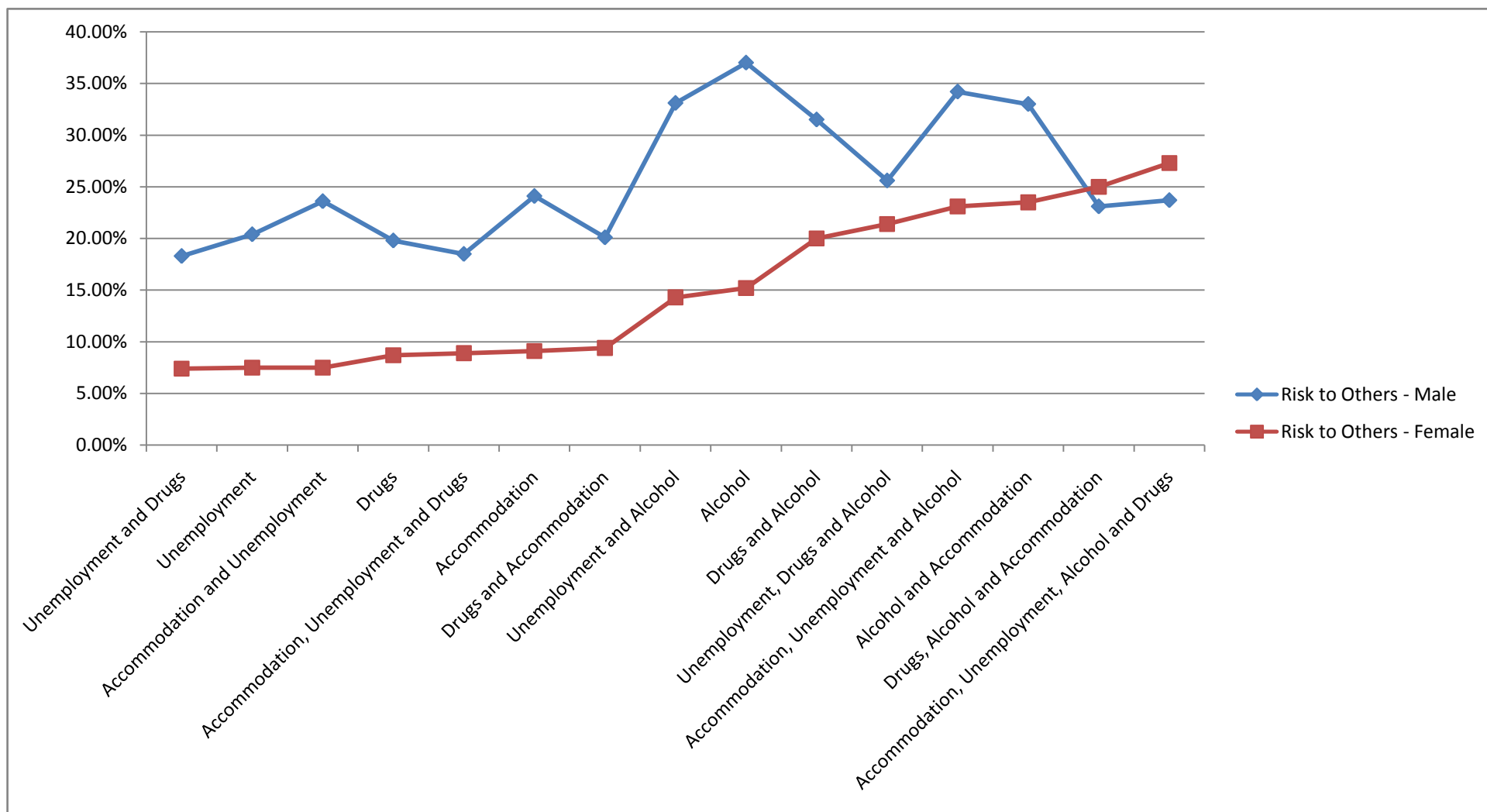
### **GOWM – Risk and Pathways in Table 17 and Figure 13 (Drugs, Alcohol and Accommodation)**

The results of the analysis have been compared with data supplied by GOWM (Nicholas Cleverley). There is some variance and further analysis is ongoing to clarify this. The view at GOWM was that results indicating high risk in connection with alcohol abuse and accommodation were surprising and of great interest especially if they can be connected with drugs.

Additional work is needed and is being undertaken to compare the findings with new data recently available from GOWM. This will be included in an Addendum to this Report. The data concerned is sourced from NDPDU, DIRWEB and DIPS. The intention of this work is to attempt to 'drill' further into the data concerning Figure 13 and Table 17 using GOWM data. Assistance is being provided with this work by GOWM. Project data will be used combined from all data sources, Connect and OASys.



**Figure 15. Alcohol, Drugs and Alcohol and Drugs Combined and their effect on Risk to Others and Risk to Children. Offenders registered on Connect between 2004 – 2007.**



**Figure 16. Risk to Others, Pathways Split by Gender. Offenders registered on connect between 2004 – 2007.**

**Table 18. Risk and Pathways - Male Young Offenders compared with Male Adults. Offenders registered on Connect between 2004 – 2007.**

	Risk to Self – Male	Risk to Self – Male YO	Risk to Others - Male	Risk to Others – Male YO	Risk to Children – Adult Male	Risk to Children – Male YO
Drugs	12.60%	13.10%	19.80%	23.40%	6%	7.10%
Alcohol	14.60%	11.60%	37%	35%	11%	10.10%
Drugs and Alcohol	14.80%	5.80%	31.50%	31.20%	8.30%	10.80%
Drugs and Accommodation	15%	17%	20.10%	24.30%	6.60%	7.10%
Alcohol and Accommodation	17.20%	16.30%	33%	39.50%	9.10%	16.30%
Drugs, Alcohol and Accommodation	15.40%	13.60%	23.10%	36.40%	5.80%	18.20%
Unemployment	10.80%	8.50%	20.40%	20.50%	7.20%	6.90%
Unemployment and Alcohol	16.60%	12.90%	33.10%	31.50%	9.90%	10.50%
Unemployment and Drugs	13.40%	13.30%	18.30%	19.70%	6.30%	7.40%
Unemployment, Drugs and Alcohol	16.70%	12.90%	25.60%	28.60%	7.70%	10%
Accommodation	14.60%	15.20%	24.10%	26.20%	8.20%	10.30%
Accommodation and Unemployment	15.60%	13.30%	23.60%	23.80%	8.90%	11.40%
Accommodation, Unemployment and Alcohol	20.30%	23.50%	34.20%	64.70%	8.90%	29.40%
Accommodation, Unemployment and Drugs	15.60%	13.20%	18.50%	22.60%	7%	7.50%
Accommodation, Unemployment, Alcohol and Drugs	18.40%	6.70%	23.70%	40%	5.30%	20%

**Example Statistic:**

**6% of adult males with a drug problem are considered a risk to children.**

Table 18 outlines the differences in risk between male adults and male young offenders. Risk to self is quite consistent but risk to others seems to be affected by accommodation, unemployment and alcohol. Alcohol and accommodation also presents a high risk for male adults and male young offenders.

## **OASys**

### Timescales and Other Important Information about the OASys Data

- Information was gained from OASys documents filled in by the probation service.
- All Offenders were assessed at the start of custody and were therefore serving custodial sentences.
- The majority of the data does not include any community services unless labelled specifically.
- The data represents a seven year period between 16/03/2000 – 01/07/2007.

### Methodology

All information on risk was gained from OASys. In terms of the Pathways, variables on OASys were chosen that were believed to be accurate. The sample consists of 12,126 offenders. 9502 male adults, 617 female adults, 2007 male young offenders and 107 female young offenders. Due to the small sample size of female young offenders, the results need to be treated with care.

All OASys assessments were carried out between October 2002 and June 2007.

When looking at risk levels, many records had no information available. Therefore records with null values were excluded from the analysis of each Pathway. This may result in risk being slightly over exaggerated. However, including records with null values would have resulted in risk levels being dramatically under-estimated. A decision was made here to exclude the null values to ensure that risks were visible.

## Drugs

Section 8 on OASys was used to assess an offender's need in this category. The drugs considered were Heroin, Methadone, Other Opiates, Crack / Cocaine, Cocaine Hydrochloride and other misused prescription drugs. The reasoning for this is that the OASys manual describes item 8.4 as being "designed to pick up those offenders who are currently using hard (class A) drugs, or used hard drugs before being received into custody." Therefore only offenders using the drugs listed above are considered to have a drug problem.

## Alcohol

Current alcohol use was measured using section 9 on OASys. OASys measures alcohol use in three categories: no problems, some problems or significant problems. For the purposes of the research here "alcohol problems" is defined as having some problems or significant problems as measured by OASys.

## Finances

Evidence of financial need was taken from section 5 on OASys. The item considered measures the offenders' financial situation and is scored as no problems, some problems or significant problems. A problem with finances in this research is defined as any offender with some problems or significant problems as measured by OASys.

## Unemployment

Unemployment was defined as an offender being rated as unemployed on section 4 of OASys. The offender's situation at reception into custody was considered.

## Accommodation

Offenders were considered to have an accommodation need if their accommodation situation was anything other than having a permanent independent housing as measured by section 3 on OASys. The offender's situation at reception into custody was considered.

## Relationships

An offenders' current relationship with close family members was considered here. This is rated in section 6 of OASys and an offender is considered to have no problems, some problems or significant problems. Relationship need is defined as offenders with some problems or significant problems.

## Thinking and Behaviour

This variable was measured using section 11 on OASys and the offender's level of interpersonal skills. There were many variables to choose from here but this was chosen as it was felt to be the most appropriate and acts almost as a summary of the other variables on OASys. Offenders are scored as having no problems, some problems or significant problems. As with other items, need was defined as offenders considered to have some problems or significant problems.

## Mental Health

Mental health was measured using section 10 on OASys. Two items were considered, current psychological problems / depression and current psychiatric problems. These items were chosen because offenders considered to have a problem have to have been diagnosed by a GP. It was felt that these items made the results more reliable than using self report variables.

Offenders were considered to have a mental health problem if they scored some problems or significant problems on either of the items.

The following section examines the most common offences committed by offenders in the OASys sample.

## **Most Common Offences Committed by Offenders in the OASys Sample**

**Table 19. Adult Males**

<b>Offence Category</b>	<b>Percentage</b>
<b>Violence Against the Person</b>	<b>24.60%</b>
<b>Burglary</b>	<b>15.60%</b>
<b>Drug Offences</b>	<b>13.60%</b>
<b>Other</b>	<b>13.30%</b>
<b>Sex Offences</b>	<b>12.70%</b>
<b>Robbery</b>	<b>8.70%</b>
<b>Theft and Handling</b>	<b>6.90%</b>
<b>Fraud and Forgery</b>	<b>2.80%</b>
<b>Criminal Damage</b>	<b>1.90%</b>

**Table 20. Adult Females**

<b>Offence Category</b>	<b>Percentage</b>
<b>Violence Against the Person</b>	<b>24.20%</b>
<b>Drug Offences</b>	<b>22.20%</b>
<b>Theft and Handling</b>	<b>12.30%</b>
<b>Other</b>	<b>11.30%</b>
<b>Robbery</b>	<b>10.50%</b>
<b>Burglary</b>	<b>9.30%</b>
<b>Fraud and Forgery</b>	<b>5.50%</b>
<b>Criminal Damage</b>	<b>2.80%</b>
<b>Sex Offences</b>	<b>1.80%</b>

**Table 21. Male Young Offenders**

Offence Category	Percentage
Violence Against the Person	27.20%
Other	22.70%
Burglary	13.80%
Theft and Handling	12.60%
Robbery	12.30%
Drug Offences	5.20%
Sex Offences	2.80%
Criminal Damage	2.50%
Fraud and Forgery	0.90%

**Table 22. Female Young Offenders**

Offence Category	Percentage
Violence Against the Person	32.60%
Robbery	15.70%
Theft and Handling	15.70%
Other	15.70%
Drug Offences	11.20%
Burglary	4.50%
Criminal Damage	3.40%
Sex Offences	1.10%

The above four tables show the most commonly committed crimes by offenders in the OASys sample.

It is interesting to note the differences between this sample and the sample taken from the Connect database. The most common offence category in the OASys sample is violence against the person compared to theft in the Connect sample. This may be explained by the fact that OASys includes offenders who are serving sentences longer than 12 months.

An important point here is that driving offences are considered in the “Other” category on OASys. This makes comparisons with the Connect data difficult. It may be the case that a high proportion of the offences in the “Other” category here are driving offences.

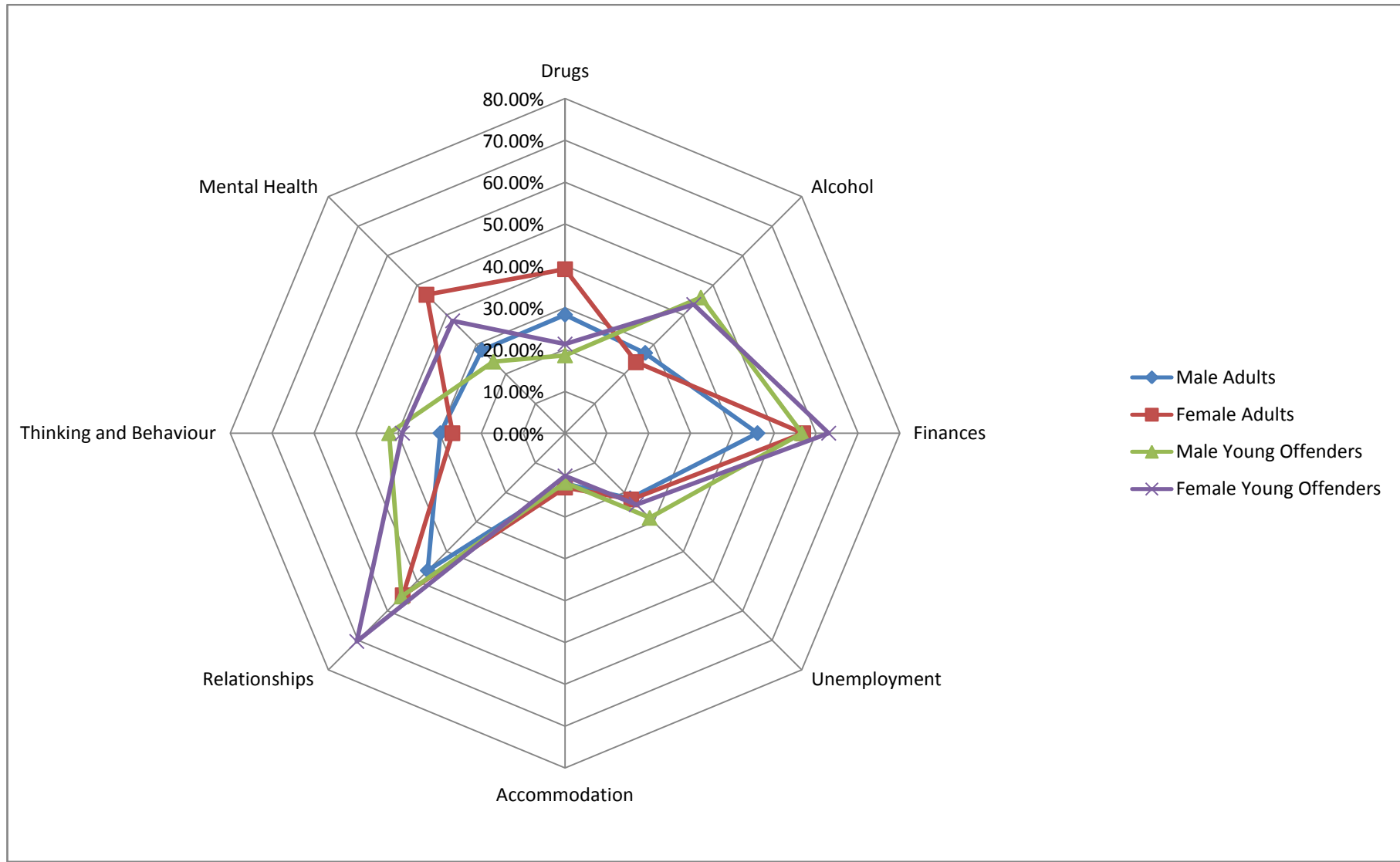
### **Offender Need and the Pathways.**

This section examines the needs of offenders relating to the Pathways. The analysis was intended to be as detailed as possible therefore drugs and alcohol have been split into separate categories.

**Table 23. Offender need and the Pathways, split by Age and Gender.**

	Male Adults	Female Adults	Male Young Offenders	Female Young Offenders
<b>Drugs</b>	28.30%	39.20%	18.60%	21.30%
<b>Alcohol</b>	27.10%	24%	45.90%	43.50%
<b>Finances</b>	46%	56.90%	56.60%	63%
<b>Unemployment</b>	22%	22.40%	28.60%	24.10%
<b>Accommodation</b>	12%	13%	11.80%	10.20%
<b>Relationships</b>	46.40%	54.80%	55.20%	70.40%
<b>Thinking and Behaviour</b>	29.80%	26.90%	42.00%	38.90%
<b>Mental Health</b>	28.10%	46.80%	24.20%	38%

Table 23 indicates the percentage of offenders that have a need related to the Pathways. There are differences across offender groups and each group is therefore discussed separately.



**Figure 17. Offender Need and the Pathways**

Forensic Pathways Ltd. 19B Sandy Way, Amington Industrial Estate, Tamworth B77 4DS: 01827.312812 Fax: 01827.312912.

[www.Forensic-Pathways.com](http://www.Forensic-Pathways.com)

[enquiries@forensic-Pathways.com](mailto:enquiries@forensic-Pathways.com)

## Male Adults

Relationship problems present the greatest need for this offender group. Relationship problems were measured using an item on OASys that assesses relationships with close family members therefore a possible reason for the results is that simply being sentenced to custody strains offender's relationships with their close family. The second greatest need relates to finances. This is perhaps not surprising as many offenders will lose their jobs as a result of their custodial sentence.

The next four needs are drugs, alcohol, mental health and thinking and behaviour. These are areas where intervention is needed and it may well be the case that the issues are linked. A discussion of the links between Pathways is conducted later. However, it may well be the case that existing drugs and alcohol programs are not effective. It could also be the case that offenders are not motivated to change their behaviour relating to alcohol and drug use and this then reduces the efficacy of intervention programs. 27.1% of adult males in this sample are considered to have a problem with alcohol. This corresponds to previous research which has suggested that 18 – 30% of adult male prisoners have an alcohol problem. (Fazel, Bains and Doll, 2006).

It is interesting to note that accommodation need is low. A possible reason for this is because the sample consists of offenders starting custody and accommodation is not a problem whilst they are in prison. It may be that analysis of offenders due to released would present a different picture.

## Female adults

Financial issues present the greatest need for female offenders. There may be a link between financial problems and offending behaviour. The fact that over half the women in the sample have a need relating to this Pathway highlights an area where urgent intervention is needed. Women also have a high rate of relationship problems. This could be because female offenders are more likely to be primary caregivers to children and this then causes a problem when they are sent to prison. Home Office statistics show that 56% of female prisoners are mothers to children under 18. (Statistics on Women and the Criminal Justice System, 2003).

According to Home Office statistics, over a quarter of female prisoners were living as lone parents before their imprisonment. (Statistics on Women and the Criminal Justice System, 2003). This subgroup of offenders would have a higher level of relationship problems due to the negative effect their imprisonment has on their children.

Female offenders also have a high level of mental health problems suggesting that intervention is needed here. In this sample 46.8% of female offenders were considered to have a mental health problem. Home Office figures published in 2003 suggest that 40% of women in prison had received help for a mental health problem in the twelve months prior to entering prison. (Statistics on Women and the Criminal Justice System, 2003). Drug problems are also high and it is possible that the two problems are linked. This is discussed later. Is it also possible that female offenders with undiagnosed mental health problems would further increase the number.

Adult female offenders also have a relatively high level of alcohol problems. 24% of people in this sample are considered to have a problem. This supports previous research that has found the percentage of adult females with an alcohol problem to vary between 10 – 24%. (Fazel, Bains and Doll, 2006).

### Male Young Offenders

Male young offenders have a high frequency of problems with their close family. This could be due to the fact that their offending has caused problems between themselves and their parents. Male young offenders also have a high rate of financial problems. This could be because they have lost their job due to their prison sentence. It could also be because they have not had a job in the first place perhaps because of their age.

Nearly half of the male young offenders in the sample have alcohol problems and this represents the highest amount of alcohol problems out of all the offender groups. This compares well to the data obtained from Connect. This data revealed that male young offenders were more likely to engage in alcohol induced violent behaviour and this could also be true of the OASYS sample.

Research carried out at Brinsford Young Offender's Institute supports the findings of this report regarding alcohol use and male young offenders. Over half the offender's assessed at HMYOI Brinsford were considered as having a

need for intervention with regards to alcohol. However, there is no specific alcohol intervention. Instead interventions are carried out by CARATS which primarily focuses on drug interventions. A recommendation of their report is that an alcohol awareness program is introduced supporting our suggestion that the drug and alcohol pathway should be separated into two distinct pathways.

Drug use amongst young offenders was not particularly high in this study. However, there is a possibility that drug use amongst male young offenders was underestimated because only Class A drugs were considered. Wincup, Buckland and Bayliss (2003) conducted a study to look at youth homelessness and drug use. They found that the majority of young people in their sample were using cannabis, amphetamines and ecstasy. This may account for the relatively low number of male young offenders considered to have a drug problem in our sample. They may have been using drugs other than Class A drugs. Further research is needed to discover the true extent of drug use in the male young offender population. However, it could well be the case that male young offenders do have low rates of Class A drug use. If this is the case, interventions could be targeted specifically to prevent these offenders moving on to Class A drugs.

This finding is supported by Borrill et al (2003). They found that male young offenders tended to have tried a variety of drugs and used alcohol but did not consider themselves to have an addiction problem. With regards to alcohol, they found that male young offenders were consuming harmful amounts of alcohol but did not recognise this as a problem. Interventions are needed to prevent male young offenders becoming dependent on drugs or alcohol. Interventions could also address drinking behaviour and educate young offenders about safe drinking levels.

### Female Young Offenders

The sample size of female young offenders was small (n = 108) however this is to be expected as there are generally low numbers of female young offenders in prison.

It is interesting that this group has an extremely high level of relationship problems presumably with their parents or guardians. This could well be a causal factor in their offending behaviour. It is noteworthy that this group also has a high level of financial issues suggesting a link between the two.

This group also has a high level of mental health issues as well as high levels of alcohol and drug use. It is likely that these factors are linked. Research has shown that female drug use in particular is linked to mental health (Borrill et al, 2003). This is especially true if the female has been a victim of physical violence. Previous research also supports the finding that mental health problems amongst female young offenders are also high. (Chitsabesan et al, 2006)

The next section looks at combinations of Pathways and offender need. When investigating offender need (NOT risk), many records had null values and these were included in the sample for the following reasons.

- Excluding null values results in need being dramatically over exaggerated.
- This increases as pathways are combined.
- It is better to look at the data as representing proportions of a given population rather than looking at the percentages alone.
- The percentages represent the absolute minimum number of people with a given need. The true number could be higher. However, this could not be investigated because of the number of null values in the data set.
- We did not assume that a null value meant “no problems” as OASys specifically states that 0 is to be entered when there are no problems.
- The following table relates to offender need. The following question was asked.
- “What percentage of people in any given group has a need in this category including all those records with null values?”

**Table 24. Offender need and combinations of Pathways split by age and gender**

	Male Adults	Female Adults	Male Young Offenders	Female Young Offenders
Drugs and Alcohol	7.90%	10%	9.60%	6.50%
Drugs and Accommodation	5.20%	9.10%	3%	1.90%
Alcohol and Accommodation	4.60%	4.50%	6.70%	4.60%
Unemployment and Alcohol	7.90%	7.40%	15.30%	11.10%
Unemployment and Drugs	9.70%	13.60%	6.50%	5.50%
Accommodation and Unemployment	8.10%	9.10%	9.40%	7.40%
Finances and Alcohol	16.80%	17.20%	30.80%	30.60%
Finances and Drugs	21.20%	31.90%	14.30%	20.40%
Finances and Accommodation	8.30%	11.50%	9.30%	8.30%
Finances and Unemployment	15.10%	18%	21.40%	14.80%
Mental Health and Drugs	9.70%	18.80%	6%	9.30%
Mental Health and Alcohol	12%	17.20%	14.20%	20.40%
Mental Health and Unemployment	8.10%	13.80%	8.70%	9.30%
Mental Health and Accommodation	5.20%	8.90%	4.20%	0.90%
Mental Health and Finances	18%	32.90%	17.80%	27.80%
Relationships and Mental Health	19.80%	33.40%	18.80%	28.70%
Relationships and Drugs	18.30%	28%	14.30%	16.70%
Relationships and Alcohol	17.30%	17.80%	30.70%	36.10%
Relationships and Finances	30.30%	41%	41.50%	50.90%
Thinking and Behaviour and Mental Health	14.40%	17.80%	14.80%	16.70%
Thinking and Behaviour and Alcohol	12.30%	9.40%	23.40%	20.40%
Thinking and Behaviour and Drugs	11.70%	13.10%	10%	13%
Thinking and Behaviour and Finances	20.10%	19.80%	30.50%	29.60%
Thinking and Behaviour and Unemployment	9.20%	10.20%	15.20%	13%
Thinking and Behaviour and Accommodation	5.40%	6.50%	6.30%	3.70%
Thinking and Behaviour and Relationships	14.10%	17.80%	14.80%	16.70%

## **Offender Need and Combinations of Pathways**

### Male Adults

The combination of relationship problems and financial issues results in the greatest need for this offender group. 30.3% of male adults have a need in this category. It is possible that there is a degree of interaction between these variables. It could be the case that financial problems affect an offender's relationships. Alternatively it could just be the case that this result simply reflects the fact that a high proportion of offenders have a need relating to these Pathways separately. A high proportion (21.2%) of male adults had a need relating to drugs and finances and it is possible that these two variables are directly related. A drug problem may have a detrimental effect on finances. Alternatively, financial problems may be a factor in the development and maintenance of a drug problem. The implication here is that drug interventions need to address underlying causes of drug use. Drug interventions also need to address associated issues such as financial problems.

### Female Adults

The greatest need for female adult offenders is the combination of relationships and financial issues. As with adult males there is a potential link between the two variables. Again, as with male adults the second greatest need is drugs and finances. The most interesting point is that proportionately more females have a need than male adults. This suggests that female adults are in greater need of intervention generally across all Pathways. Women also have relatively high rates of need relating to combinations of pathways that involve drugs, alcohol and mental health. This finding is consistent with previous research. It is entirely possible that the issues are interlinked. Borrill et al (2003) suggest that many female offenders with multiple needs "*fall between the two stools of mental health and drug treatment services, neither of which wants to address the other service's problems.*"

It is likely that this applies to all offenders with multiple needs and interventions need to recognise and address this problem.

## Male Young Offenders

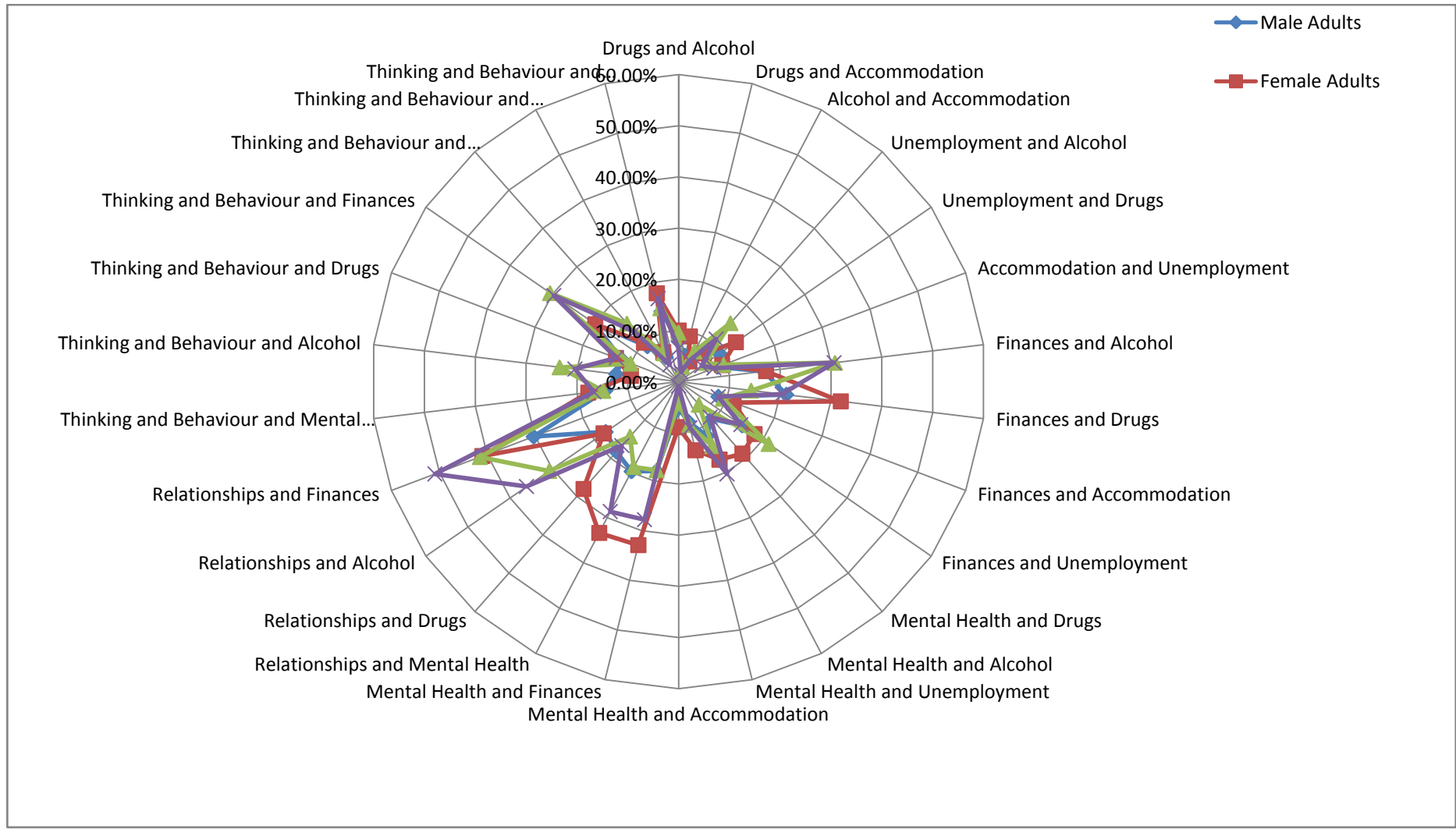
The pattern of need for male young offenders is quite similar to that of male and female adults however, it is important to note the need for alcohol interventions. Table 23 showed that male young offenders have a higher level of alcohol need and table 24 confirms this and highlights other issues that appear to be interlinked with alcohol use. Male and female adults had a high level of need relating to drugs and finances. This is different for male young offenders – they have a greater need for help with alcohol and financial problems.

## Female Young Offenders

Female young offenders have the greatest proportion of problems relating to relationships and finances, as with other offender groups. As with their male counterparts, alcohol use and finances present a high level of need.

The fact that certain combinations of need are present across offender groups suggests that the offending population in general has a need for intervention. However, it is important that differences between offender groups are taken into account and interventions allocated accordingly.

Many interventions require offenders to be drug free. Often, supported housing and education programs require the offender to be clean, but as the statistics show, these problems often occur with drug use. Accommodation and employment needs may need to be met at the same time as drug interventions are occurring. This may lead to success on all three fronts.



**Figure 18. Offender Need and Combinations of Pathways.**

**Table 25. Offender need and the Pathways. Persistent and Non Persistent Offenders.**

	Male Persistent Offenders	Male Non Persistent	Female Persistent Offenders	Female Non Persistent
<b>Drugs</b>	<b>46.70%</b>	<b>18.10%</b>	<b>66.60%</b>	<b>25.70%</b>
<b>Alcohol</b>	<b>39.10%</b>	<b>38.90%</b>	<b>25%</b>	<b>29.40%</b>
<b>Finances</b>	<b>74.30%</b>	<b>51.80%</b>	<b>82.30%</b>	<b>63.70%</b>
<b>Unemployment</b>	<b>66.40%</b>	<b>44%</b>	<b>63.80%</b>	<b>46.80%</b>
<b>Accommodation</b>	<b>45%</b>	<b>27%</b>	<b>45.10%</b>	<b>26.20%</b>
<b>Relationships</b>	<b>64.90%</b>	<b>45.20%</b>	<b>73.30%</b>	<b>53.20%</b>
<b>Thinking and Behaviour</b>	<b>44.40%</b>	<b>27.70%</b>	<b>32.70%</b>	<b>23%</b>
<b>Mental Health</b>	<b>34.90%</b>	<b>31.70%</b>	<b>53.90%</b>	<b>52.50%</b>

Table 25 looks at offenders on OASys that have been identified as persistent offenders by the police. The variable on OASys considered was the following question,

*"Has the offender been identified by police as a persistent offender? (Effective from June 2002)."*

The statistics take into account all offenders on OASys with this information available; therefore the sample consists of 15154 offenders serving a variety of sentences, custodial and non-custodial.

Table 25 shows offender need for both persistent offenders and non persistent offenders. It is interesting to compare these statistics with the data on offender need based on the prison population. The first finding is that persistent offenders have higher levels of need across all the pathways. There are some important differences to note between persistent and non-persistent offenders. Class A drug problems are much higher amongst persistent offenders, as are financial problems. This suggests that persistent offenders may be motivated to offend by their financial and drug situation. It is interesting to see that alcohol use is quite consistent for both persistent and non-persistent offenders suggesting that while alcohol and risk may be linked, alcohol may not play a huge role in re-

offending. However alcohol problems are still relatively high for both persistent and non-persistent offenders highlighting an area where intervention is required.

The data suggests that the needs of persistent offenders are not all that dissimilar from those of other offenders. However, it is important to recognise that persistent offenders have greater levels of need generally. As these offenders are responsible for disproportionate levels of crime, it might be sensible to ensure that these offenders have priority access to interventions if reducing re-offending is the primary target.

**Table 26. Offenders Need. Community Sentences and Custodial Sentences.**

	Male Adults - Comm	Male Adults	Female Adults - Comm	Female Adults	MYO - Comm	MYO	FYO - Comm	FYO
Drugs	20%	28.30%	28.10%	39.20%	8.90%	18.60%	21%	21.30%
Alcohol	43.30%	27.10%	32.60%	24%	42.20%	45.90%	38.20%	43.50%
Finances	52.60%	46%	64.50%	56.90%	51.10%	56.60%	60.40%	63%
Unemployment	26.10%	22%	29.40%	22.40%	33.90%	28.60%	38%	24.10%
Accommodation	13.60%	12%	12.90%	13%	12.50%	11.80%	17.60%	10.20%
Relationships	43.90%	46.40%	52.20%	54.80%	44.70%	55.20%	60.40%	70.40%
Thinking and Behaviour	26.30%	29.80%	22.70%	26.90%	32.50%	42.00%	29.70%	38.90%
Mental Health	35%	28.10%	55.90%	46.80%	19.30%	24.20%	41.00%	38%

The data in table 26 relating to offenders serving community sentences refers to 328232 community sentences handed down in the same time period as all the other data analysed from OASys.

Table 26 shows the differences between offenders serving custodial sentences and offenders serving community sentences. An interesting observation here is that alcohol problems are greater than drug problems presumably because the illicit nature of Class A drug use results in the wider use of custodial sentences. The alcohol problems of male young offenders are again particularly high and support the argument for allocating resources towards interventions for this group of offenders. Apart from the issues outlined above, it is interesting to note that the pattern of need is similar for offenders serving custodial and community sentences suggesting that offender need is consistent and wide ranging.

## **Risk**

This section examines the Pathways and risk. Risk was determined using OASys and was defined as follows.

### Risk of Suicide

This was assessed using the Risk of Serious Harm section of OASys. There were multiple variables to choose from, but it was felt most appropriate to use the information from the Full Analysis section and to consider suicide as being separate from self harm issues. The particular item in question assesses current risk of suicide.

### Risk of Self Harm

The variable used to assess risk of self harm was taken from the same section as the risk of suicide variable describes above. Current risk of self harm is considered.

### Risk to Others

To assess risk to others the Full Analysis section was used. The actual question is phrased, "*[Is there anything to] indicate a risk of serious harm to others?*"

### Risk to Children

The item used to assess risk to children was taken from the Risks of Serious Harm section of OASys and from the part of OASys used to screen offenders rather than analyse their risk in depth. The actual question is phrased, "*Are there any concerns in relation to children?*" There were some null values present in the dataset. Therefore a decision was made to exclude these values from the analysis. If the null values had been included, it was possible that any risks would have been obscured. Excluding the null values may have result in a slight over-exaggeration of the risk posed. However, it was decided that it was better to overestimate risk than underestimate it. The next section looks at risk individuals pose to themselves.

## GOWM – Risk and Pathways (Drugs, Alcohol and Accommodation)

As stated previously, results of the analysis have been compared with data supplied by GOWM (Nicholas Cleverley). Additional work is needed and being undertaken to compare the findings with new data recently available from GOWM. This will be included in an Addendum to this Report. The data concerned is sourced from **NDPDU, DIRWEB and DIPS**. The intention of this work is to attempt to 'drill' further into the data concerning Table 27, 28 using GOWM data. Assistance is being provided with this work by GOWM. Project data will be used combined from all data sources, Connect and OASys.

**Table 27. Risk to Self and the Pathways – All Offenders**

	Risk of suicide - Male	Risk of suicide - Female	Risk of suicide - Male YO	Risk of self harm - Male	Risk of self harm - Female	Risk of self harm - Male YO
<b>Drugs</b>	19.30%	30.60%	21.80%	22.80%	46.60%	33.60%
<b>Alcohol</b>	28.80%	47.30%	20.90%	30.40%	56.90%	24.10%
<b>Unemployment</b>	22.40%	36.50%	14.80%	24.80%	40.30%	21.60%
<b>Accommodation</b>	26.50%	38.90%	20.40%	28.50%	50%	22.20%
<b>Finances</b>	25%	37.30%	21.10%	27.50%	46.40%	25.50%
<b>Relationships</b>	25.70%	39.60%	22.60%	27.40%	50.70%	28.10%
<b>Thinking and Behaviour</b>	25.30%	47.50%	19.50%	29.50%	55.80%	24.20%
<b>Mental Health</b>	38.70%	49.30%	37.20%	40.20%	58%	41%

This section looks at the risk offenders pose to themselves.

Table 27 shows the percentage of people with a problem that are considered a risk to themselves. For example, 19.3% of male adults with a drug problem are considered a suicide risk. Offenders with mental health problems pose the highest risk to themselves. In terms of risk reduction, investment is needed in mental health services both in terms of diagnosis and treatment. As discussed later, there may be other issues such as alcohol and drug problems that exacerbate mental health problems. It is interesting to note that those offenders with alcohol

problems are generally considered to pose more of a risk to themselves than offenders with a drug problem. The only exception to this is male young offenders at risk of self harm.

The main finding here is that females have a higher risk of self harm across all the Pathways. This may suggest that female offenders are more at risk of self harm regardless of their needs relating to the Pathways. This is significant because it suggests that intervention is needed to prevent self harm. Female offenders also have a greater risk of suicide and again this is an issue that needs further examination. It is possible that this correlates with the fact that female offenders have higher levels of mental illness than any other offender group.

It is important that the risk offenders pose to themselves is reduced when the offender is released as well as in prison. Pratt et al (2006) looked at suicide rates amongst offenders recently released from prison and found that recently released prisoners are at a much higher risk of suicide than the general population. They also found that this risk is related to accommodation, mental health and employment issues and that female offenders are particularly at risk.

**Table 28. Risk to Self and Combinations of Pathways**

	Risk of suicide - Male	Risk of suicide - Female	Risk of suicide - Male YO	Risk of self harm - Male	Risk of self harm - Female	Risk of self harm - Male YO
Drugs and Alcohol	27.20%	53.60%	20%	29.40%	63%	24.40%
Drugs and Accommodation	22.40%	47.60%	15.80%	25.70%	50%	17.90%
Alcohol and Accommodation	30.20%	41.70%	21.20%	31.40%	76.90%	23.80%
Unemployment and Alcohol	28.50%	41.70%	18.60%	28.80%	54.50%	23.20%
Unemployment and Drugs	19.30%	41.70%	14.90%	23.20%	47.40%	32.30%
Accommodation and Unemployment	26.60%	41.70%	16.70%	27.80%	48%	16%
Finances and Alcohol	31.40%	51%	23.90%	33.60%	61.50%	27.50%
Finances and Drugs	19.30%	35.70%	21.50%	23.70%	47.50%	29.80%
Finances and Accommodation	27%	34.40%	20%	30.70%	47.10%	22.50%
Finances and Unemployment	23.40%	35.30%	14.30%	26.50%	39.60%	19.60%
Mental Health and Drugs	35.40%	53.70%	37.30%	39.50%	61.40%	50%
Mental Health and Alcohol	44.20%	52.40%	36.30%	45.50%	63.30%	37.70%
Mental Health and Unemployment	37.60%	47.70%	26.70%	40.40%	53.50%	30.30%
Mental Health and Accommodation	39.80%	50%	31.10%	42.60%	63.30%	37.50%
Mental Health and Finances	40.20%	46.90%	37.80%	41.60%	57%	41.20%
Relationships and Mental Health	38.80%	48.10%	37.50%	40.10%	60.50%	42.10%
Relationships and Drugs	20.10%	37.50%	20.80%	24.90%	47.10%	35.60%
Relationships and Alcohol	32.60%	44.10%	23.60%	34%	61.70%	27.40%
Relationships and Finances	27.10%	39%	23.90%	29.60%	50%	28.90%
Thinking and Behaviour and Mental Health	37.20%	60.60%	35%	41.30%	68.70%	39.10%
Thinking and Behaviour and Alcohol	30.20%	54.50%	21.60%	33.80%	65.70%	24.90%
Thinking and Behaviour and Drugs	21%	45.70%	23.90%	27.30%	56.40%	36.80%
Thinking and Behaviour and Finances	26.60%	44.60%	21.20%	30.70%	55.70%	24%
Thinking and Behaviour and Unemployment	25.10%	41.40%	17.20%	29.50%	50%	20.90%
Thinking and behaviour and Accommodation	29.30%	57.90%	14%	35%	75%	16.40%
Thinking and Behaviour and Relationships	27%	53%	22.20%	31.80%	62%	26.90%

**Table 29. Risk to Self and Combinations of Pathways – All Offenders**

	Risk of suicide - Male	Risk of suicide - Female	Risk of suicide - Male YO	Risk of self harm - Male	Risk of self harm - Female	Risk of self harm - Male YO
Drugs, Alcohol and Accommodation	27.10%	50%	15.40%	24.70%	66.70%	16.70%
Unemployment, Drugs and Alcohol	24.80%	46.20%	17.20%	25.40%	61.50%	25.70%
Accommodation, Unemployment and Alcohol	33.10%	37.50%	20.50%	28.70%	62.50%	20%
Accommodation, Unemployment and Drugs	23.40%	44.40%	16.70%	25.70%	47.50%	16.70%
Accommodation, Unemployment, Alcohol and Drugs	29%	40%	22.20%	22.20%	60%	23.10%
Finances, Drugs and Alcohol	26.90%	54.70%	20.70%	30.40%	62.50%	24.60%
Finances, Drugs, Alcohol and Unemployment	27%	40%	15.40%	28.70%	60%	24.20%
Finances, Accommodation and Alcohol	31.60%	45.50%	22.20%	32.50%	75%	25.40%
Finances, Accommodation and Drugs	22.40%	42.10%	16.70%	26.70%	50%	20%
Finances, Unemployment and Drugs	19.80%	38.70%	13.90%	24.60%	47.10%	26.90%
Finances, Unemployment and Alcohol	29.60%	43.80%	20.60%	30.40%	56.30%	25.80%
Finances, Drugs, Alcohol, Unemployment and Accommodation	31.60%	40%	22.20%	24.10%	60%	23.10%
Finances, Drugs, Alcohol and Accommodation	28.60%	50%	15.40%	26%	66.70%	17.60%
Finances, Accommodation and Unemployment	28.60%	40.90%	15%	29.90%	47.80%	14.50%
Mental Health, Drugs and Alcohol	41.40%	63.60%	36.10%	44.20%	76.20%	43.20%
Relationships, Drugs and Alcohol	28.30%	56.50%	21.10%	31.50%	65.20%	28.10%
Relationships, Mental Health, Drugs and Alcohol	41.70%	63.10%	35.50%	45.50%	73.70%	45.50%
Thinking and Behaviour, Alcohol and Drugs	27.30%	56.30%	25%	31.70%	68.80%	27.10%
Thinking and Behaviour, Mental Health and Unemployment	37.30%	57.10%	32.70%	42%	66.70%	31.70%
Thinking and Behaviour, Relationships, Drugs and Alcohol	28.80%	66.70%	27%	34.30%	76.90%	29.30%

Tables 28 and 29 show risk levels for combinations of Pathways. Table 28 shows combinations of two Pathways whereas Table 29 shows combinations of three or more Pathways. They are split purely to improve readability and the findings will be discussed together.

As with the individual Pathways, female offenders have the highest risk of self harm and suicide. In terms of self harm risk, particular combinations that stand out are alcohol and accommodation as well as thinking and behaviour and accommodation. This may suggest that these issues are linked and must be considered together when intervening.

For male adults, suicide risk and risk of self harm are quite consistent across variables apart from those combinations that involve mental health. This could suggest that mental health in isolation is the main factor here rather than any particular combination. This is significant because it highlights the fact that more mental health interventions may be required for adult male offenders.

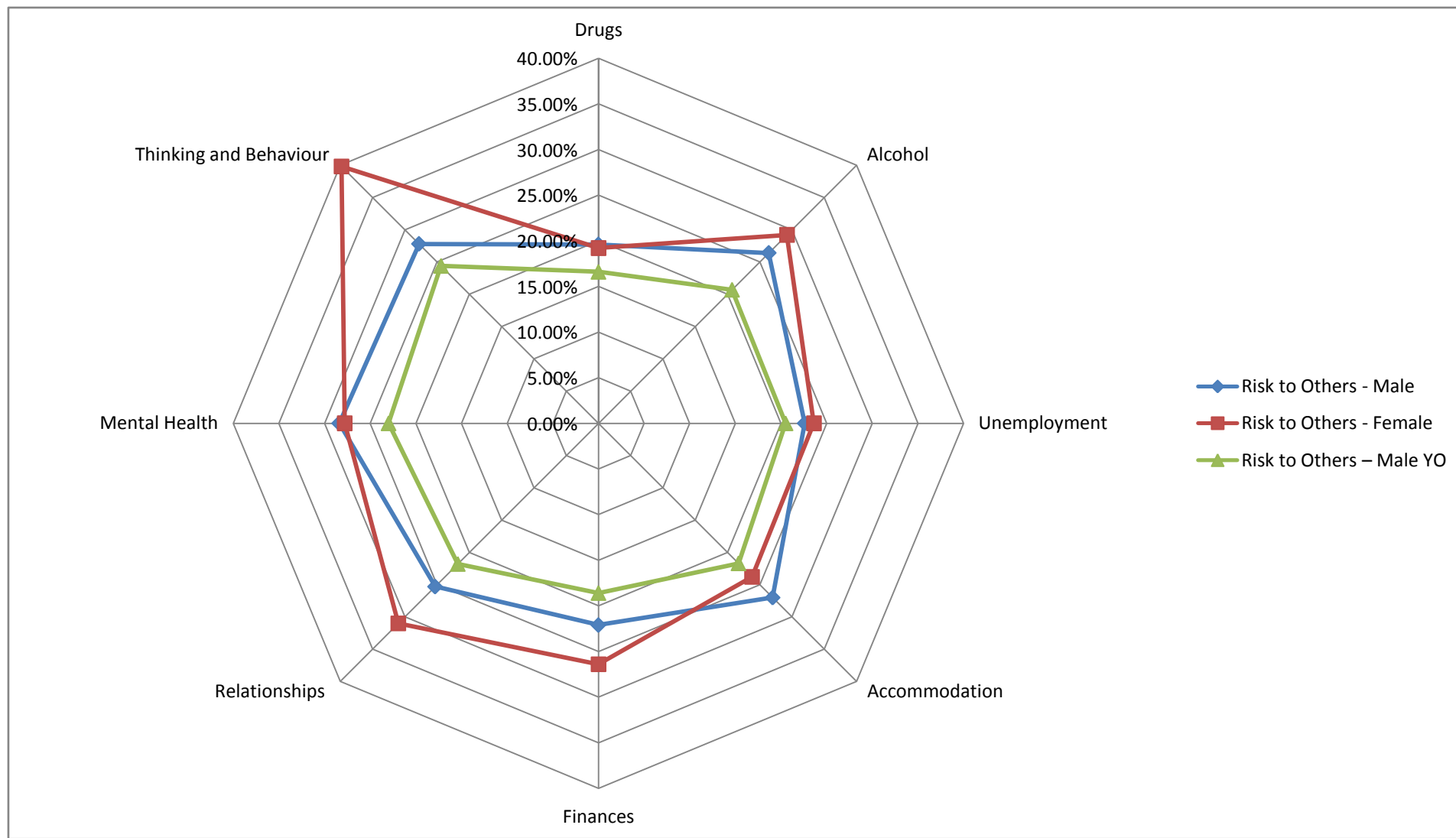
The same can be said of male young offenders and in addition, a particular combination of note appears to be mental health and drugs. A possibility here is that the two factors are linked. This is significant because it suggests that drugs use might exacerbate mental conditions. Alternatively it may be that offenders with mental health problems are self medicating with illegal drugs. Either way, the implication here is that drug interventions and mental health interventions should perhaps be combined for this group of offenders.

Table 29 shows combinations of three or more Pathways. This table shows again that female offenders have a much higher risk of suicide and self harm.

Male risk – adults and young offenders is quite consistent although there appears to be two categories that significantly raise risk. These are firstly mental health, alcohol and drugs, and secondly, relationships, mental health, drugs and alcohol.

**Table 30. Risk to Others and the Pathways**

	Risk to Others - Male	Risk to Others - Female	Risk to Others - Male YO	Risk to Children - Male	Risk to Children - Female	Risk to Children - Male YO
<b>Drugs</b>	19.60%	19.20%	16.60%	12.90%	25.60%	12.70%
<b>Alcohol</b>	26.40%	29.20%	20.70%	24%	25.50%	12.30%
<b>Unemployment</b>	22.60%	23.60%	20.50%	22.30%	29.70%	12.70%
<b>Accommodation</b>	27%	23.80%	21.70%	25.30%	25.90%	14.60%
<b>Finances</b>	22.10%	26.40%	18.60%	21.20%	26.30%	11.80%
<b>Relationships</b>	25.30%	31%	21.80%	28.40%	27.50%	12.80%
<b>Mental Health</b>	28.40%	27.80%	23%	28.70%	22.60%	17.40%
<b>Thinking and Behaviour</b>	27.80%	39.80%	24.40%	27.30%	30.10%	13.90%



**Figure 19. Risk to Others and the Pathways.**

Table 30 shows risk to others and risk to children for the different offender groups.

An interesting finding is that alcohol appears to be a greater risk factor than drug use. Referring back to the statistics regarding alcohol and drug use, drug use was more prevalent than alcohol use. This could suggest that offenders with drug problems pose a low level of risk to others and that alternatives to custody may be appropriate here. On the other hand, alcohol is a high risk factor suggesting that intervention is needed here, not only to reduce the number of offenders with alcohol problems but also to address offending behaviour linked to alcohol consumption.

Another possible explanation for this finding is that in terms of risk to others, the risk of relatively minor offences occurring is higher with alcohol than it is with drugs. So an offender with a drug problem may be at risk of causing serious harm but the prevalence of offences may be lower.

On the other hand offenders with an alcohol problem may be at risk of causing less serious harm to others but the prevalence of offences may be higher.

The extent of the drug problem amongst offenders may be considered surprising considering the fact that drug use has been falling over the past decade according to recently released Home Office figures that show drug use is at its lowest since 1997. Cannabis use has declined; however, the use of Class A drugs has increased slightly over the past ten years, from 2.7% of the population using them in 1997 to 3.4%. This is attributed to the rise in Cocaine use. Interesting this corresponds to the data collected by Government Office West Midlands (GOWM). It is likely that this trend will continue and present different challenges with regards to offending behaviour than those presented by opiate users.

Interesting statistics can be gained from the most recent British Crime Survey (BCS) especially with regards to risk. Our research showed that drug use was more prevalent in the offending population than alcohol use but that alcohol use was linked to a higher level of risk to other people.

This compares well to statistics gained from the BCS. Alcohol was judged to be a factor in 46% of all cases of violence against the person however drug use was only considered at factor in 17% of cases. BCS figures broadly support the finding that alcohol has a greater impact on risk. This figures need to be treated with a degree of caution because alcohol use is probably easier to detect than drug use. BCS figures rely on the judgement of victims and are collated using self report measures.

Additionally, perceived drug involvement in crimes has decreased from 23% to 17% recently. Reasons for this might be improvements in drug treatments. It is also possible that the introduction of Drug Intervention Programmes (DIPS) has resulted in a drop in drug related crime.

Information from the BCS supports the view that alcohol use is a problem that needs addressing and that drug use is not the greatest risk factor with regards to violence and risk.

In terms of risk of reoffending, there are some interesting issues to raise. It may be that drugs raise the risk of reoffending more than alcohol. However it was difficult to conduct analysis to investigate this issue because of the way OASys assessments are structured. In terms of reoffending, OASys measures risk of committing a violent, sexual or "other" offence, with "other" being considered as a non violent or non sexual offence. Obviously this encompasses a whole range of offences and makes assessing harm subjective. Some offences such as shoplifting cause no serious harm to other people but offences such as burglary, whilst not causing physical harm may still have a serious affect on the victim. It would be useful to have an assessment of an offender's risk of committing a similar offence after their release or a more detailed breakdown of risk. It is entirely understandable why OASys is structured in the way it is, but for analytical purposes, extra items, or different ways of recording information could be introduced.

There are important differences between offender groups and risk to others. Male adults with mental health problems pose the highest risk to other people. Female adults and male young offenders with thinking and behaviour problems pose the highest risk to other people. The need for intervention here is clear. All offenders, including male adults could benefit from interventions that address their thinking and behaviour and the

associated offending behaviour. Although mental health is the greatest risk factor for male adults, the second highest risk factor is thinking and behaviour and the difference is small. Interventions designed to address thinking and behaviour issues may improve mental health problems and also misuse of alcohol and drugs. At the very least interventions here may make other interventions more likely to be a success.

Successful intervention here may improve an offenders' chance of successfully tackling alcohol and drugs issues. Mental health problems may also be improved by developing thinking and behaviour programmes.

It is also possible that offenders with thinking and behaviour problems actually have underlying mental health issues that have not been diagnosed. The items used to assess mental health on OASys specify that any mental health condition must have been diagnosed by a GP. It may be the case that mental health issues are higher because they have not been diagnosed. They may correlate with thinking and behaviour issues.

A sensible and simple intervention may be to use the thinking and behaviour section of OASys to indicate potential mental health issues and to act as a "warning system". Any offenders with a need in this section could be referred for a mental health assessment. It is entirely possible that offenders with mental health problems are not having their needs met. This could be because they are reluctant to seek help or because the help that is available is either inadequate or resources are overstretched.

In terms of risk to children, the main risk factors are mental health, relationships and thinking and behaviour. Male young offenders generally present a low risk to children. It may be the case that offenders classified as having relationship problems may actually be family offenders and this may explain why their risk to children is high.

The findings here support the suggestion made previously to introduce a new pathway to address offending behaviour. Specifically addressing this may reduce risk.

**Table 31. Risk to Others and Combinations of Pathways**

	Risk to Others - Male	Risk to Others - Female	Risk to Others - Male YO	Risk to Children - Male	Risk to Children - Female	Risk to Children - Male YO
Drugs and Alcohol	25.90%	21.90%	17.40%	18.30%	28.80%	14.10%
Drugs and Accommodation	19.50%	11.50%	17.20%	15.50%	23.20%	13.60%
Alcohol and Accommodation	31%	25%	27.90%	26.90%	32.10%	18.80%
Unemployment and Alcohol	28.40%	20%	22.10%	26.30%	30.40%	15.60%
Unemployment and Drugs	17.80%	16.30%	17.50%	14.10%	25%	14.20%
Accommodation and Unemployment	27.10%	21.40%	23%	24.70%	28.60%	15.70%
Finances and Alcohol	25.60%	30%	21.10%	24.80%	30%	13.90%
Finances and Drugs	18.10%	23%	14%	13.70%	28.60%	12.80%
Finances and Accommodation	27%	24.30%	21.70%	22.10%	26.80%	15%
Finances and Unemployment	21.30%	26.20%	20.40%	21.10%	32.40%	13.10%
Mental Health and Drugs	26.30%	16.40%	12.30%	17.70%	21.90%	19.70%
Mental Health and Alcohol	30.80%	31%	24.50%	28.90%	18.10%	17.90%
Mental Health and Unemployment	29.70%	25.40%	21%	27.40%	30.60%	19.70%
Mental Health and Accommodation	34.50%	26.50%	25%	30.40%	27.30%	19.30%
Mental Health and Finances	27.90%	26.10%	21.60%	27.60%	27.30%	18.20%
Relationships and Mental Health	30.20%	31.80%	24.80%	32.40%	25.50%	18.20%
Relationships and Drugs	20.80%	24.70%	17.30%	14.80%	26.50%	15.80%
Relationships and Alcohol	27.70%	32.40%	22.60%	28.50%	25.20%	14%
Relationships and Finances	24.90%	30.50%	19.40%	24%	28.60%	12.80%
Thinking and Behaviour and Mental Health	33.50%	41%	27.70%	31.80%	25.40%	19.70%
Thinking and Behaviour and Alcohol	30.80%	40%	22.90%	28.40%	29.30%	15.10%
Thinking and Behaviour and Drugs	25.30%	33.30%	23.10%	17.40%	27.20%	15.70%
Thinking and Behaviour and Finances	27.50%	37.70%	23.20%	25.50%	31.10%	14.70%
Thinking and Behaviour and Unemployment	29%	28.20%	26.60%	26.40%	38.10%	16.20%
Thinking and behaviour and Accommodation	32.10%	34.80%	25.70%	28.90%	32.50%	20.80%
Thinking and Behaviour and Relationships	29.60%	42%	25.50%	30.10%	28.70%	15.30%

**Table 32. Risk to Others and Combinations of Pathways**

	Risk to Others - Male	Risk to Others - Female	Risk to Others – Male YO	Risk to Children - Male	Risk to Children - Female	Risk to Children – Male YO
Drugs, Alcohol and Accommodation	23.30%	11%	15%	20.90%	33.30%	20%
Unemployment, Drugs and Alcohol	23%	20%	16.70%	18.90%	28.60%	14.80%
Accommodation, Unemployment and Alcohol	30%	18.20%	31.50%	28.20%	31.80%	19.30%
Accommodation, Unemployment and Drugs	20.10%	13%	20%	16.40%	25%	14.90%
Accommodation, Unemployment, Alcohol and Drugs	22.20%	12.50%	20%	20.70%	31.30%	21.40%
Finances, Drugs and Alcohol	23.10%	25%	16.90%	19%	32.10%	15.20%
Finances, Drugs, Alcohol and Unemployment	21.60%	25%	15.10%	18.80%	33.30%	15.40%
Finances, Accommodation and Alcohol	32.30%	26.70%	31.60%	25.40%	30.80%	18.60%
Finances, Accommodation and Drugs	17.10%	12.50%	15.40%	15.60%	23.50%	13.50%
Finances, Unemployment and Drugs	17%	18.40%	11.50%	14.60%	27.80%	12.60%
Finances, Unemployment and Alcohol	26.40%	26.30%	25.20%	26%	33.30%	16.80%
Finances, Drugs, Alcohol, Unemployment and Accommodation	17.20%	12.50%	20%	19.40%	33.30%	23.10%
Finances, Drugs, Alcohol and Accommodation	19.20%	11.10%	15.80%	19.30%	35.30%	18.80%
Finances, Accommodation and Unemployment	24.30%	23.10%	24.70%	22.80%	27.40%	16.60%
Mental Health, Drugs and Alcohol	32.30%	23.10%	13.60%	23%	15.80%	18.70%
Relationships, Drugs and Alcohol	25.90%	25%	17.10%	20.20%	25.50%	17.40%
Relationships, Mental Health, Drugs and Alcohol	32.10%	27.30%	10.50%	25.60%	12.90%	21.40%
Thinking and Behaviour, Alcohol and Drugs	31.20%	27.80%	22%	22.60%	32.10%	17%
Thinking and Behaviour, Mental Health and Unemployment	34%	34.40%	28.40%	30.60%	35.60%	20%
Thinking and Behaviour, Relationships, Drugs and Alcohol	30.50%	31.20%	22.70%	24.40%	27.30%	20.70%

Combining the Pathways and assessing risk highlights more important issues.

In terms of adult males presenting a risk to others, the main combination of note is mental health and accommodation problems. It could be the case that these two issues are directly linked. Offenders with mental health issues may find it difficult to gain and keep good quality accommodation because of the difficulties having a mental health issue can cause. On the other hand, they have accommodation issues exacerbating a mental health problem. It is probable that both of these explanations are true to an extent because mental illness in this analysis covers a variety of conditions from depression and anxiety through to more disruptive conditions such as schizophrenia.

Macpherson, Sheperd and Edwards (2004) suggest that many mentally ill offenders are inappropriately sent to prison because the NHS is not equipped to deal with the risk that they pose. It may be the case that prison actually exacerbates mental health conditions and a lack of accommodation on release again worsens the situation. Macpherson, Sheperd and Edwards (2004) suggest that housing is an important factor in helping people with severe mental illnesses cope with their condition. This especially applies to offenders being released from prison. A suggestion here is that offenders with mental health problems are given specialist advice about accommodation in the time leading up to their release. This may then decrease the risk that these offenders pose.

Need relating to the thinking and behaviour pathway also raises risk when combined with mental health issues and accommodation issues respectively. There may be direct link between thinking and behaviour needs and mental health needs. An offender with mental health problems may find their thinking and behaviour adversely affected by their underlying mental health issue and this may in turn raise their risk to other people.

Offenders with alcohol and accommodation problems also pose a relatively high risk to other people. This is an area where intervention could be extremely effective. As with other combinations of pathways it may be that one issue is being treated but underlying issues are remaining hidden and therefore cause more problems later on.

Female adults present an interesting pattern in those combinations of need involving thinking and behaviour suggesting that this particular pathway raises risk for female adults. Female adults with mental health and alcohol issues also present a higher risk to others. This suggests that alcohol and mental health interventions should be considered together and in detail in case there is a direct link between the two which is probably the case for some offenders.

It is interesting that female offenders with needs across the pathways generally pose a higher level of risk to children. This is probably because female adults are more likely to be primary caregivers to children than their male counterparts. The children at risk are probably their own.

Accommodation need combined with other factors is important. Previous research has indicated that accommodation need is often linked to other factors such as drug use. In particular, homelessness may actually be caused by need on the other pathways. Wincup, Buckland and Bayliss (2003) describe barriers that offenders experience when attempting to access accommodation services such as supported housing. These include financial issues, waiting lists and supported housing that requires offenders to be drug free. A better approach may be to understand that offender needs are interlinked and that interventions should be holistic across all the pathways to improve the levels of success. Offender need and the pathways are all interlinked and interventions need to be as well.

**Table 33. Needs of Male Offenders split by Ethnic Group**

Pathway	White	Black	Asian	Other
Drugs	31.20%	23%	23.30%	28%
Alcohol	30.30%	12.70%	17.90%	16.10%
Mental Health	30.10%	23.60%	19.30%	25%
Finances	45.50%	43.30%	42.60%	49.80%
Accommodation	12.60%	10.10%	8.80%	12.10%
Unemployment	22.70%	26%	25.00%	24.70%
Relationships	49.70%	38.40%	38.20%	43.50%
Thinking and Behaviour	32%	26.60%	21.60%	23.30%

Table 33 shows the differences in need between different ethnic groups. Interestingly the pattern of need is quite similar for different groups. The need for drug and alcohol interventions is highest for white males. Financial need appears to be consistent across offender groups. Black men have the highest unemployment rate. Mental health problems also appear to be higher for white males.

## **Combination and Creation of New Pathways**

The combination of pathways correlations reveal interesting underlying potential causes and explanations leading to offender new needs. These issues can be analysed further using additional correlations and comparisons and across different data sets. Risk issues raised in connection with alcohol, drugs and accommodation in various sections of the Report raise what appear to be very important new issues for analysis. These are being subjected to additional correlations with the assistance of GOWM.

These results will be reported in an Addendum to this Report. Conclusions and recommendations are affected by the new access gained to data and discussions with GOWM and the findings in relation to risk especially in relation to drugs, alcohol and accommodation. Conclusions will be updated upon completion of the additional analytical work with GOWM around risk.

## **Conclusions and Recommendations**

The following section outlines the conclusions and recommendations in relation to the objectives set out at the beginning of the project.

### **Objective 1: Identification of Data Gaps and Data Necessary to Fill Those Gaps**

There was a great deal of information missing on OASys and Connect. It would have been useful to have access to this.

**FINDING: Review the way in which data is recorded on Connect and OASys. Review and improve access to data for all parties and implement a new policy on data sharing.**

All parties would benefit from greater sharing of information. This would result in more detailed information being available for relevant agencies to make decisions on.

## **Objective 2: To Present Data in Appropriate User Friendly Formats for Use by the Regional Offender Manager and Providers**

All statistics throughout the report are presented clearly and explained in detail. The main findings are outlined in the conclusion and summarised.

The following section discusses conclusions and recommendations in relation to objectives 3 and 4.

## **Objective 3: Identify Need Based on the:**

- Risk of Offending
- Risk of Harm
- Holistic Social Skills
- The Seven Pathways

## **Objective 4: To Enable the ROM and providers to prioritise and sequence interventions by indentifying:**

- Clusters within pathways
- Clusters across the pathways
- Clusters outside the pathways
- Clusters that cross boundaries between the pathways.

Table 34. Need on the Pathways for male adult offenders serving a custodial sentence, split by Ethnicity. West Midlands area.

Pathway	White (n = 1126)	Black (n = 95)	Asian (n = 116)	Other (n = 62)
Drugs	37.80%	20%	28.40%	32.30%
Alcohol	30.60%	14.70%	20.70%	21%
Mental Health	31.20%	25.30%	11.20%	27.40%
Finances	55.70%	46.30%	44.80%	51.60%
Accommodation	13.40%	8.40%	7.60%	3.20%
Unemployment	26.60%	31.60%	25%	29%
Relationships	54%	35.80%	36.20%	48.40%
Thinking and Behaviour	33.90%	30.50%	17.20%	21%

Table 35. Needs on the Pathways for male adult offenders serving a custodial sentence, split by Ethnicity. Nationwide.

Pathway	White (n = 7192)	Black (n = 466)	Asian (n = 296)	Other (n = 223)
Drugs	31.20%	23%	23.30%	28%
Alcohol	30.30%	12.70%	17.90%	16.10%
Mental Health	30.10%	23.60%	19.30%	25%
Finances	45.50%	43.30%	42.60%	49.80%
Accommodation	12.60%	10.10%	8.80%	12.10%
Unemployment	22.70%	26%	25.00%	24.70%
Relationships	49.70%	38.40%	38.20%	43.50%
Thinking and Behaviour	32%	26.60%	21.60%	23.30%

Tables 34 and 35 show offender need and ethnicity for the West Midlands and Nationwide. All offenders in these two tables were serving a custodial sentence. The pattern of need appears to be fairly consistent across all

ethnicities. Areas of note are mental health – the rate of mental health problems differs depending on ethnicity. Financial problems are high across all ethnic groups. There are few differences between the nationwide and West Midlands data. There are some differences to note including the fact that drug problems are higher for white males in the West Midlands than nationwide. Alcohol problems are also slightly higher in the West Midlands sample than for offenders nationwide.

Table 36. Need on the Pathways for offenders serving a community sentence. West Midlands area.

	Male Adults	Female Adults	Male YO	Female YO
<b>Drugs</b>	<b>24.60%</b>	<b>32.30%</b>	<b>10.40%</b>	<b>26.80%</b>
<b>Alcohol</b>	<b>41.30%</b>	<b>30.80%</b>	<b>39.20%</b>	<b>33.90%</b>
<b>Mental Health</b>	<b>33%</b>	<b>54.80%</b>	<b>18.50%</b>	<b>38%</b>
<b>Finances</b>	<b>56%</b>	<b>65.20%</b>	<b>52.80%</b>	<b>65.90%</b>
<b>Accommodation</b>	<b>16.60%</b>	<b>16.10%</b>	<b>15.50%</b>	<b>24.70%</b>
<b>Unemployment</b>	<b>40.70%</b>	<b>46.30%</b>	<b>49.70%</b>	<b>54.20%</b>
<b>Relationships</b>	<b>44.80%</b>	<b>54%</b>	<b>45.70%</b>	<b>60.40%</b>
<b>Thinking and Behaviour</b>	<b>25.50%</b>	<b>21.70%</b>	<b>31.50%</b>	<b>29.70%</b>

The above table refers to 16384 offenders serving a community order. The sample is restricted to offenders in the West Midlands area. The pattern of need is similar to the nationwide sample.

Table 37. Need on the Pathways for offenders serving a community sentence. Nationwide.

	Male Adults	Female Adults	MYO	FYO
Drugs	20%	28.10%	8.90%	21%
Alcohol	43.30%	32.60%	42.20%	38.20%
Mental Health	35%	55.90%	19.30%	41%
Finances	52.60%	64.50%	51.10%	60.40%
Accommodation	13.60%	12.90%	12.50%	17.60%
Unemployment	26.10%	29.40%	33.90%	38%
Relationships	43.90%	52.20%	44.70%	60.40%
Thinking and Behaviour	26.30%	22.70%	32.50%	29.70%

Tables 36 and 37 show that the pattern of need for offenders serving community sentences is similar for the West Midlands and the nationwide sample.

Table 38. West Midlands need compared to Nationwide need.

	Male Adults - WM	Male Adults	Female Adults - WM	Female Adults	MYO - WM	MYO	FYO - WM	FYO
Drugs	33%	28.30%	40.20%	39.20%	20.70%	18.60%	25%	21.30%
Alcohol	32.80%	27.10%	23.60%	24%	46.70%	45.90%	31.20%	43.50%
Finances	53.60%	46%	61.80%	56.90%	53.70%	56.60%	62.50%	63%
Unemployment	27.30%	22%	30.40%	22.40%	31.60%	28.60%	50%	24.10%
Accommodation	12.40%	12%	19.60%	13%	11.70%	11.80%	18.70%	10.20%
Relationships	49.70%	46.40%	59.80%	54.80%	54.80%	55.20%	81.20%	70.40%
Thinking and Behaviour	31.20%	29.80%	28.40%	26.90%	37.80%	42.00%	37.50%	38.90%
Mental Health	29%	28.10%	47.10%	46.80%	18.90%	24.20%	18.70%	38%

Table 38 shows that offender need is similar for the national and West Midlands population across all pathways. Analysis of the Connect data revealed that female drug use is a problem and needs intervention. Female drug use is associated with increased risk to other people including children. Statistics from offenders in the West Midlands on OASys show that 40.2% of women in this sample have a drug problem compared to 39.2% of the national sample.

**1: FINDING: Drug interventions for female offenders need reviewing and improving.**

Alcohol use and risk are correlated for all offender groups but perhaps the most significant findings concern male young offenders. Statistics from the Connect sample show that a large proportion of male young offenders with an alcohol problem are considered a risk to others (37%). Analysis of the West Midlands population also shows that male young offenders have a high rate of alcohol problems. Alcohol problems are also high in the population of offenders serving a community sentence. (Tables 36 and 37). When looking at the data regarding ethnicity (Tables 34 and 35) it is interesting to note that white males have the highest rate of alcohol problems.

**2: FINDING: Male young offenders need alcohol interventions not only to address their drinking but to address their offending behaviour and the risk they pose to other people.**

Female offenders are at a higher risk of self harm generally regardless of need. The rates are similar for the national sample and the West Midlands sample. Mental health problems are also high in the female population of offenders serving a community sentence suggesting that there is an underlying problem with female offenders regardless of the sentence they receive.

**3: FINDING: The data suggests that female offenders need interventions to reduce their risk of self harm which may be linked to an underlying mental illness.**

Analysis of offences committed revealed that a relatively high number of driving offences are committed by offenders with drug and alcohol problems. Driving offences could be added to the list of trigger offences or other ways of intervening could be considered for people that have been arrested for certain driving offences.

**4: FINDING: There is a link between driving offences and offenders with a drug and alcohol problem. The research suggests that driving offences could be added to the list of trigger offences that result in a drugs test.**

**5: FINDING: The data suggests that there is scope for an Arrest Referral Scheme to be introduced for offenders that have been arrested for driving offences. The scheme could apply to both drugs and alcohol.**

Findings 4 and 5 could be implemented as interventions or alternatively existing policies and practises could be altered.

Analysis of data from OASys revealed that nearly half of female adult offenders have a mental health issue. (46.8% of the national sample compared to 47.1% of the West Midlands sample.) Alternatives to custody should be considered for this group of offenders. Mental health problems will frequently occur with other problems such as drug and alcohol problems and these interventions need to recognise that there may be underlying mental health issues that need addressing. Offenders with mental health problems will also have problems finding suitable accommodation when they leave prison. There was also a high rate of mental health problems amongst offenders serving community sentences. This highlights that there is a wide ranging need for mental health interventions for all offenders. The data on ethnicity (Tables 34 and 35) suggest that white males are more likely to have a mental health issue than other ethnic groups.

Reducing Re-Offending: National Action Plan (2004) supports the recommendation to improve mental health services.

*"Most prisoners with mental health problems are not currently receiving the care and treatment they might expect outside."*

*"Some people who ought to be diverted to secure psychiatric services are being sent to prison."*

*"Current processes to move prisoners from prison to more appropriate provision can be slow and cumbersome."*

**6: FINDING: The data suggests that better mental health interventions may be needed both in isolation and in combination with other interventions surrounding drugs, alcohol and accommodation.**

**7: FINDING: The Thinking and Behaviour section on OASys could be used to "trigger" mental health assessments.**

Finding number seven is a practise recommendation that may be quite simple to implement. Analysis into combinations of pathways revealed that a high proportion of offenders have problems with their close family and financial problems perhaps suggesting that these two factors are related. This is true for offenders serving custodial and community sentences. It is also true across to an extent across all ethnic groups.

**8: FINDING: Financial advice that is available to prisoners needs to be reviewed and improved. Debt advice and help finding suitable employment may help reduce reoffending especially when motivation to offend is primarily financial. Where appropriate include the offender's family or partner in financial advice.**

An overwhelming number of offenders are unemployed. Need on this pathway could possibly be linked with offending behaviour. This is especially true of offenders serving sentences of less than twelve months. Connect are currently in the process of delivering interventions to address the following recommendation.

This is especially the case with male young offenders. Connect have a mentoring scheme in place to assist male young offenders find and keep employment. Connect also mentor all offenders.

**9: FINDING: Offenders need help to get into employment once they have left prison.**

Alcohol in isolation and in combination with other factors has a significant detrimental impact on risk. When conducting analysis into combinations of pathways, it quickly became clear that those combinations that included alcohol resulted in a higher risk to others. This suggests that alcohol may be a causal factor in need on the other pathways. A particular combination of note is alcohol and accommodation. This results in a consistently high risk to others across offender groups. Forensic Pathways concludes that improved alcohol treatment is urgently needed across all offender groups both to reduce offender need and risk. We suggest that alcohol services are overhauled in stages as outlined below.

**10: FINDING: The data suggests that the alcohol and drugs pathway should be split into two distinct pathways.**

Offender need with regards to drug use and alcohol use should be assessed separately and thoroughly. When the offender's problems have been assessed in detail, interventions can be tailored to suit the individual's problems and combined if necessary. The data suggests that there is an emphasis on drug treatments. Offenders with alcohol problems need to be assessed and treated in the same detail that drug users are. The Annual Report of HM Inspectorate of Prisons (2007) recognises this.

*"Prisons that have done population needs analyses have established that a quarter of their population require alcohol services – yet most CARATs contracts excluded prisoners whose sole problem is alcohol: even young people, where the need for this is greatest."*

**11: FINDING: Alcohol interventions are needed for all offenders.**

Alcohol use seems to be a factor in many crimes committed. This is especially true of male young offenders and female offenders yet current alcohol interventions do not seem to be as widespread or detailed as the drug interventions.

Interventions are needed for all offenders, those serving custodial sentences and those serving community sentences. Table 26 shows that alcohol problems are high for offenders serving community sentences and

successful intervention here may act as a preventative measure against more serious offences being committed in future.

Offending behaviour related to alcohol and drug use is also relevant and differs. The fact that alcohol can be legally obtained means that offenders will acquire alcohol and illegal drugs differently and offending behaviour can be linked to acquisition of drugs and / or funds to obtain drugs.

Forensic Pathways recommends that early interventions be considered in order to reduce offending behaviour and the number of custodial sentences. This is especially relevant now that prison capacity has been exceeded.

The Reducing Re-Offending: National Action Plan (2004) recognised that there are problems delivering alcohol and drugs interventions.

*"There are limited opportunities for addressing alcohol misuse, despite the fact that many prisoners have problems relating to alcohol."*

It is recommended that alcohol interventions are prioritised and implemented as a matter of urgency.

The use of trigger offences to determine and highlight need is a particular area that could be extended. Forensic Pathways recommends that alcohol interventions should be prioritised using a list of trigger offences in the same way that drug interventions are targeted. An arrest referral scheme could be introduced here. Suggestions are that acquisitive offences, violent offences against the person and driving offences should be considered as trigger offences for alcohol use. Currently trigger offences for drugs result in the offender being tested for drugs and then advised accordingly. Obviously this is difficult for alcohol as it is not an illegal substance and many people drink without a problem. However, analysis of offences committed revealed that acquisitive, violent and driving offences account for approximately 65% of all offences committed by offenders with an alcohol problem on the Connect database.

This suggests that alcohol may be a causal factor in many of these offences and that intervention may not only be appropriate but may also reduce the likelihood of reoffending.

**12: FINDING: The research suggests that “trigger offences” could be used to investigate offender’s alcohol problems at the time of arrest and also to deliver interventions to offenders in the form of an arrest referral scheme. Forensic Pathways suggests that acquisitive, violent and driving offences be considered trigger offences.**

A pilot project is currently in use in certain areas that uses “trigger offences” to highlight offenders and offer interventions. Forensic Pathways suggests that this be extended and implemented in a structured and detailed way as an approach such as this seems to reduce re offending. More details can be found at <http://press.homeoffice.gov.uk/press-releases/action-alcohol-behaviour?version=1>

This scheme appears to be on the right track but Forensic Pathways recommends that it is taken even further to incorporate the use of trigger offences as a marker for intervention. The current pilot scheme relies on the judgement of custody officers and while this is probably reliable, trigger offences would allow statistics to be gathered to assess the long term effectiveness of such an intervention.

There also needs to be distinctions made between people who are addicted to alcohol, those who are considered problem drinkers but are not physically addicted and those that commit crime and pose a significant risk to others. Forensic Pathways believe that a dedicated agency in the mould of the DATs could address these issues and deliver targeted interventions.

Alcohol interventions are urgently needed and probably need to be available on the same scale as drug intervention programmes. Drug Action Teams (DATs) and the National Treatment Agency (NTA) were designed to improve access and the efficacy of drug interventions and they have been quite successful pursuing this aim. However, there is not a standard policy with regards to alcohol interventions. Some DATs only treat drug addictions whereas others do treat alcohol misuse. Reorganisation and clarification of the responsibilities of these organisations is needed so that alcohol problems can be addressed with the same level of detail and success as drug problems.

A report examining Alcohol in the West Midlands recognises that,

*"Alcohol misuse harms more people and causes more deaths and serious illnesses than street drugs. However the provision of services for alcohol misusers is on a far lower scale than that for drugs. Drug services are largely funded through specific allocations and there are procedural difficulties in using these funds for alcohol services, which therefore have to compete for mainstream funds against other demands on NHS resources."*  
(Alcohol in the West Midlands – Government Office West Midlands).

**13: FINDING: Forensic Pathways suggests two options here. Extend the Drug Action Team's responsibilities to include alcohol interventions. Alternatively create a separate scheme and/or organisation to address and treat alcohol use.**

**14: FINDING: All offenders that commit an offence that is a trigger offence for drug interventions could also be screened separately for alcohol problems and offered appropriate treatment and advice.**

**15: FINDING: The research suggests that alcohol and drug interventions should address risk and associated offending behaviour.**

Analysis of the Connect data shows that there seems to be a large number of offenders serving custodial sentences for relatively minor offences such as shoplifting. Forensic Pathways recommends that community sentences and appropriate drugs/alcohol interventions are used as an alternative to custody. Custodial sentences should be reserved only for those offenders that present a risk to the community.

**16: FINDING: Drug and alcohol interventions may be more appropriate than a custodial sentence in some cases.**

It is important to recognise that different offender groups will have different experiences and consequences resulting from their offending behaviour.

Female offenders often have children that are dependent on them and custodial sentences here often punish the children of offenders. The children and families of offenders should be taken into account when sentences are passed and community sentences should be used more.

Analysis into the characteristics of offenders committing particular offences has revealed trends and issues that need addressing. The main correlations are that acquisitive offences and drug use are linked as are violent offences and alcohol use. It is important that drug and alcohol interventions address related offending behaviour.

Finally, the data presented in this report clearly shows that the majority of offenders have a need relating to multiple pathways. A holistic approach to offender need is required to ensure that interlinking factors are recognised and appropriate treatment and interventions offered. There should also be better communication and information sharing between agencies.

The Reducing Re-Offending: Nation Action Plan (2004) stated the following:

*"Information is not shared between different organisations, different parts of the Prison Service or Probation Service or even different parts of the same prison. In part, this is due to concerns about data protection issues, but the SEU was told repeatedly that often this was an excuse for inactivity. There are few information-sharing protocols set up to deal with the problem."*

*"Joint rehabilitation strategies do not exist at any level, except in some outstanding regions....The lack of a strategy means that prison and probation services have nothing to plug into, and so develop policy and practice in isolation. Where inter-agency issues are dealt with, it is usually on an ad hoc basis to address a particular localised problem. It is rare for there to be a strategic forum, and where one exists, it usually mirrors the prison and probation divide, focusing on either prison or community issues."*

This situation needs to change to deliver interventions effectively.

## Summary of Main Findings

<u>Finding</u>	<u>Reason</u>	<u>Source</u>
Review and improve the ways in which data is recorded on Connect and OASys.	There are a large proportion of fields that contain null values.	Table 1
Review and improve drug interventions for female offenders.	68.5% of women serving less than twelve months have a drug problem	Table 7
Male young offenders need alcohol interventions not only to address their drinking but to address their offending behaviour and the risk they pose to other people.	Male young offenders serving less than twelve months have the highest rate of alcohol use.  Male young offenders are more likely to engage in alcohol induced violent behaviour.	Table 6
Female offenders need interventions to reduce their risk of self harm which may be linked to an underlying mental illness.	Female offenders are at a high risk of self harm.	Table 17
The research supports splitting the alcohol and drugs pathway into two distinct pathways.	There is a greater emphasis on drug interventions than alcohol interventions but alcohol is more of a risk factor.	Table 28

<p>Add driving offences to the list of trigger offences that result in a drugs test or introduce interventions at the arrest stage.</p>	<p>14% of offences committed by people serving less than twelve months and with a drug problem are driving offences.</p> <p>Driving whilst disqualified is a common offence for offenders serving less than twelve months.</p>	<p>Table 9</p>
<p>Better mental health interventions are needed both in isolation and in combination with other needs such as drugs and alcohol.</p>	<p>A high proportion of offenders have mental health problems.</p>	<p>Table 23</p>
<p>Improve financial advice that is available to prisoners. Debt advice and help finding suitable employment may help reduce reoffending especially when motivation to offend is primarily financial. Where appropriate include the offender's family or partner in financial advice.</p>	<p>A high proportion of offenders have financial and relationship problems.</p>	<p>Table 24</p>
<p>Offer more offenders help to get into employment once they have left prison.</p>	<p>The majority of offenders are unemployed.</p>	<p>Table 5</p>
<p>Use "Trigger Offences" to investigate offender's alcohol problems at the time of arrest and also to deliver interventions to offenders. Forensic Pathways suggests that acquisitive, violent and driving offences be considered trigger offences.</p>	<p>Alcohol interventions need improving because alcohol and risk are linked.</p> <p>Alcohol in combination with other pathways also raises risk.</p> <p>There is also a link between alcohol use and</p>	<p>Tables 29 and 30</p>

	certain crimes.	
Extend the Drug Action Team's responsibilities to include alcohol interventions. Alternatively create a separate scheme and/or organisation to address and treat alcohol use.	Alcohol interventions need to be on the same scale as drug interventions	Conclusions
All offenders that commit an offence that is a trigger offence for drug interventions should also be screened separately for alcohol problems and offered appropriate treatment and advice.	Alcohol problems may occur with drug problems but may be overlooked by drug treatments.	Conclusions
Offer drug and alcohol interventions as an alternative to custodial sentences where appropriate.	There are a high number of offenders serving custodial sentence of less than twelve months for minor offences such as shoplifting and these offences may be linked to drug or alcohol use.	Tables 9, 10, 11 and 12

## **Conclusion**

The report has highlighted areas where interventions are needed. It is also important that interventions are not carried out in isolation and that it is understood that many offenders will have multiple needs and require more than one intervention. It may well be the case that their needs are interlinked, are directly linked to their offending behaviour and the risk they pose to themselves and others. Communications between agencies carrying out interventions need to be good and detailed to ensure that interlinked offender needs are not overlooked.

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