

PROMOTING HUMAN GOODS AND REDUCING RISK: ARTICLE FROM A NEW ZEALAND MEMBER

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This is a continuation of a two-part article begun in the April, 2007 issue of *The Correctional Psychologist*. Please reread part one.

In brief, those critical of the RNR model assert that: (a) motivating offenders by concentrating on eliminating or modifying their various dynamic risk factors is extremely difficult. One thing individuals want to know is how can they live better lives, what are the positive rewards in desisting from crime?; (b) the RNR model tends to neglect or underemphasize the role of narrative identity and agency (i.e., self-directed, intentional actions designed to achieve valued goals) in the change process. Thus, an important component of living an offense-free life appears to be viewing oneself as a different person with the capabilities and opportunities to achieve personally endorsed goals; (c) the RNR model appears to be associated with a rather restricted and scientifically obsolete view of human nature. It seems to ignore the established fact that human beings are biologically embodied organisms who quite naturally seek and require certain kinds of experiences and activities (i.e., human goods) in order to live balanced and personally fulfilling lives; (d) the RNR model does not appreciate the relevance and crucial role of treatment alliance in the therapeutic process. Any type of enduring change depends on the capacity of the offender to trust his or her therapist enough to absorb the skills and "lessons" imparted in therapy. This means that despite the claims of proponents of the RNR model, so-called noncriminogenic needs such as personal distress and low self-esteem are essential clinical targets; failure to address them is likely to result in a weak therapeutic alliance. Researchers have demonstrated that the creation of a sound therapeutic alliance requires an array of interventions that are not directly concerned with targeting risk and it has been established that a good therapeutic alliance is a necessary feature of effective therapy with offenders; (e) the RNR model is fundamentally a psychometric model (i.e., derived from and, in part, based on data from reliable

and valid measures of criminal behavior) and tends to be preoccupied with offenders' risk profiles (or traits) and downplays the relevance of contextual or ecological factors in offender rehabilitation. This is a serious mistake and ignores the fact that offenders, like all human beings, are embedded in various social and cultural systems that facilitate and constrain their behavior; and finally (f) the RNR model is often implemented in practice in a one-size-fits-all manner and fails to adequately consider the specific needs, values, and

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issues of individual offenders. Indeed, the typical way in which the RNR model is operationalized is at variance with its own principle of responsivity. At the very least, the fact that the RNR model is implemented in a large scale, heavily manualized and prescriptive manner makes it hard to accommodate the unique characteristics of offenders. In its most inappropriate form the RNR model is translated into a psycho-educational format where offenders are “taught” how to behave in a heavily didactic and counterproductive way (Green, 1995).

The second attitude toward offenders takes a more humanistic stance toward the explanation of crime and the reintegration of offenders. According to this perspective in the course of their daily lives offenders, like all other people, attempt to secure beneficial outcomes such as good relationships, a sense of mastery, and recognition from others that they matter (Ward & Gannon, 2006; Ward & Stewart, 2003).

(Continued on page 3)

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PROMOTING HUMAN GOODS (Continued from page 1)

The claim is that offenses rarely occur simply because individuals are unable to control themselves or because they want to wreck other people's lives just for the thrill of it (Maruna, 2001). There is characteristically a purpose, a logic in what offenders do and why they do it. In short, offending can reflect the search for certain kinds of experiences; namely, the attainment of specific goals or goods. Furthermore, offenders' personal strivings express their sense of who they are and what they would like to become. Narrative identities, for offenders and for all people, are constituted from the pursuit and achievement of personal goals (Bruner, 1990; Singer, 2005). This feature of offending renders it more intelligible and in a sense, more human. It reminds us that effective treatment should aim to provide alternative means for achieving human goods.

Just how successful individuals are in the construction of adaptive identities is crucially dependent on whether or not they possess the necessary capabilities, resources, and opportunities (internal and external conditions) to secure personally valued goals in certain circumstances. One of the advantages of looking at offending in a richer and more constructive manner is that it is able to reconcile risk and goods-oriented discourses. For example, criminogenic needs (dynamic risk factors) can be viewed as representing distortions or omissions in these necessary conditions; risk assessment points to obstacles in the quest for a good and satisfying life (Ward & Stewart, 2003). Because individuals are naturally predisposed to desire, and require, certain types of human goods for a fulfilling and satisfactory life, they will still attempt to secure them despite the presence of such obstacles. This can result in dysfunctional or antisocial behavior.

The standpoint that human beings are agents who assemble narrative identities, and engage in personal projects based on these identities, indicates that they have some degree of plasticity in shaping their lives and circumstances. Furthermore, such identities once created, are dynamic and responsive to the varying contexts in which people live their lives. In short, individuals extract ideas and skills from social and cultural resources (e.g., webs of meaning, tools, supports) to construct a sense of who they are and what really matters to them (Woolfolk, 1998). Woolfolk (1998) states that "Each human life is ineluctably enmeshed in a web of meaning. The meanings we attach to our beliefs and behavior are integral to them" (p. 69). Furthermore, he asserts that all of us are "partially constituted by our self-narratives, we are historical, moral, and aesthetic works in progress (sic)" (p. 103). The array of attitudes and assumptions comprising more constructive views of rehabilitation is evident in theories of rehabilitation such as the good lives model (Ward & Gannon, 2006; Ward & Stewart, 2003).

The Good Lives Model (GLM) is a theory of rehabilitation that endorses the viewpoint that offenders are essentially human beings with similar needs and aspirations to non-offending members of the community. The GLM is based around two core therapeutic goals: to promote human goods and to reduce risk. My colleagues and I point out that focusing on the promotion of specific goods or goals in the treatment of offenders is likely to automatically eliminate (or reduce) commonly targeted dynamic risk factors (i.e., criminogenic needs). By contrast, we argue that focusing only on the reduction of risk factors is unlikely to promote the full range of specific goods and goals necessary for longer term desistance from offending.

According to the GLM, offend-

ers are naturally disposed to seek a range of primary human goods that, if secured, will result in greater self-fulfillment and sense of purpose. In essence, a primary human good is defined as an experience, activity, or situation that is sought for its own sake and is intrinsically beneficial. The possession of primary goods enhances people's lives and increases their level of functioning and personal satisfaction. The justification of personal aspirations and actions ultimately has to stop somewhere and from the perspective of the GLM it is the existence of primary goods that provides the foundation and certainty associated with individuals' most cherished beliefs and values. Examples of primary human goods are relatedness, mastery, autonomy, creativity, physical health, and play (Emmons, 1999; Murphy, 2001; Nussbaum, 2000; Ward & Stewart, 2003). Primary goods are rather abstract, and generally people do not specify them as goals when talking about the things that are most important to them. In fact, what they most often refer to when asked about their reasons for acting in certain ways or engaging in personal projects are the means utilized in the attempt to achieve certain outcomes. Thus, instrumental goods are means for achieving primary human goods and only have value because of their association with the former. For example, the primary good of relatedness could be sought through different types of personal relationships such as friendships or romantic relationships. The available research indicates that all primary goods need to be present in individuals' lives to some extent if they are to achieve high levels of well-being (e.g., Emmons, 1999). However, there is also room for individual preferences with respect to the weight-

(Continued on page 4)

PROMOTING HUMAN GOODS (Continued from page 3)

ing of the various goods. It is typically the case that individuals vary in the importance they accord to the various goods with some placing greater importance on mastery at work and others on feeling connected to the community. This is an important issue because the differential weighting of a good tends to reveal peoples' core commitments and therefore is indicative of their narrative identity. Quite literally, our fundamental value commitments give shape and direction to our lives. Individuals' overarching or more heavily weighted goods reveal the kind of person they wish to be, and the kind of lives they want. This claim is dependent on the assumption that to some degree people are self-constituting, that is, they create themselves by the way they lead their lives and the meanings they attach to their experiences.

A good example of the relationship between identity and goods emphasis is those individuals who weigh the primary good of mastery at work highly. Such individuals tend to cultivate the development of work related expertise and look for opportunities to tackle difficult problems and to impress others with their commitment and achievements. Therefore, it is to be expected that he or she would prize attributes and experiences that are closely associated with this good. These would include spending time at work, being engaged in further training and skill enhancement opportunities, being a good communicator (depending on the job), developing a strong sense of fidelity at work, wanting to be viewed as reliable and competent and so on. These activities and experiences, in turn, serve to constitute the person's narrative identity: by pursuing experiences and activities that realize the good of mastery at work, the person becomes a certain type of individ-

ual with specific interests, lifestyle, and goals. This is a fluid, dynamic process that draws upon each individual's personal memories and repertoire of meanings and also the opportunities and cultural resources available to him (Woolfolk, 1998). Thus, an individual living in a violent and impoverished neighborhood may struggle to find prosocial social ways of living and thus, have little chance of constructing a more adaptive identity. The presence of negative and false gender (e.g., males are "hard" and emotionally controlling), class (e.g., if you are poor, there is no escape), or racial (e.g., Maori, are violent by nature) stereotypes means that there may be little opportunity to construct a different view of himself and others. There may be few discursive (meaning creating resources: norms, knowledge, practices) and material resources he can utilize in the hope of turning his life around.

In summary, the GLM has a twin focus with respect to therapy with sexual offenders: (a) promoting goods and (b) managing/reducing risk. What this means is that a major aim is to equip the offender with the skills, values, attitudes, and resources necessary to lead a different kind of life, one that is personally meaningful and satisfying and does not involve inflicting harm on children or adults. In other words, a life that has the basic primary goods, and ways of effectively securing them, built into it. These aims reflect the etiological assumptions of the GLM that offenders are either directly seeking basic goods through the act of offending or else commit an offense because of the indirect effects of a pursuit of basic goods. Furthermore, according to the GLM, risk factors represent omissions or distortions in the internal and external conditions required to implement a good lives plan in a specific set of environments. Installing the internal conditions (i.e., skills, values, beliefs) and

the external conditions (resources, social supports, opportunities) is likely to reduce or eliminate each individual's set of criminogenic needs.

This rather brief examination of two broad approaches to offender rehabilitation indicates the importance of offenders establishing more adaptive narrative identities if they are to desist from further criminal activities. According to the GLM, therapists should concentrate on equipping individuals with the capabilities to secure primary goods in a personally satisfying and socially acceptable manner. This is essentially an evaluative and capacity building process.

But what are the implications of the GLM's emphasis on narrative identity for offender rehabilitation? In other words, how does the focus on values and capabilities impact on the assessment and treatment of offenders? First, treatment should be directed at the individual agent within his social ecology not at criminogenic needs per se. Criminogenic needs are used to indicate problems in the internal and external conditions required to implement a good lives plan (i.e., fashion a new narrative identity). But they only serve to indicate what capabilities and social factors should be supplied in order to allow a person to live a better life, one that is inherently more fulfilling and socially acceptable. Values are directly involved in the assessment and treatment of offenders. Second, the assumption that there is a plurality of goods necessary for a good life and that individuals can legitimately vary in the importance they place on each of the goods, means that individual choice and preferences are important treatment considerations.

Third, if offenders' pursuit of primary goods (values) is directly or indirectly associated with their of-

(Continued on page 5)

PROMOTING HUMAN GOODS (Continued from page 4)

fending, then it stands to reason that alternative, more adaptive ways of achieving these goods, should be introduced. Fourth, accepting that the offender is a psychological agent with his own views about what is important to him means that it is imperative for therapists to cultivate attitudes of respect and openness. While it is clear that committing harmful acts toward others may diminish offenders' rights, their status as human beings with a certain basic value remains intact. Thus, it is necessary for therapists to explicitly set out to create a sound therapeutic alliance and to monitor carefully their attitudes and personal responses to offenders. Failure to do this can result in punitive and ultimately ineffective practices. Effective therapy involves working positively with offenders.

I would like to make my position more concrete by discussing two examples of the link between identities and offending from our own clinical experience. I worked with a man who obtained enormous satisfaction from teaching and shaping his step-daughter's personality and behavior. He saw himself as a psychological architect who literally designed and created his step-daughter. The goods of mastery, creativity, and autonomy were directly associated with this domination which ultimately led to his sexual offending. The fact that these goods were realized in the domination and control of his step-daughter also points to the lack of material and personal resources in his life. That is, he did not appear to have the skills and opportunities to seek these goods in more socially acceptable ways. Another example concerns a man who sought relatedness and intimacy with vulnerable children. He saw himself as a caring, giving, and loving individual who could heal distressed and abused children.

The goods of relatedness and mastery were directly involved and the image of himself as a kind of social worker was causally implicated in his sexually abusive behavior. The fact that he was unduly suspicious of adults and also was relatively socially isolated meant that the interpersonal and personal resources required to achieve these important goods in socially acceptable ways were missing.

In both these examples the pursuit of primary goods in dysfunctional ways was linked to narrative identities. In the case of the former offender, he considered himself a creative and dynamic individual who needed to express his feelings and aspirations. While the latter person's self-image was centered on what he considered to be his loving and caring nature. The successful management and treatment of both these men would be greatly facilitated by accepting the importance of their primary goods and associated narrative identities, but finding more socially acceptable ways of realizing them. For example, by providing alternative ways of caring for others (adults) and outlets for the need to teach and train other people. This means appreciating the need to focus on equipping both men with the psychological capabilities to pursue their various life plans or projects in personally meaningful ways (internal conditions), and also taking pains to ensure that their social environments support these initiatives (external conditions). The latter factor points to the need to work actively with the relevant community and social networks. Because the construction of narrative identity is an interpersonal and fluid process, it is always necessary to work with the individuals concerned in their social and cultural contexts. It is in these contexts that offenders can establish meaningful relationships and draw upon the available discursive and material resources to help them

in their attempts to desist from further offending (Maruna, 2001).

I suggest that an adequate rehabilitation theory should be consistent with the features of human identity and functioning noted above. Strength-based approaches such as the GLM of offender rehabilitation focus on (a) the utilization of individual offenders' primary goods or values in the design of treatment programs and (b) aim to equip them with the internal and external conditions necessary to implement a life plan or project founded on these values. Offenders are psychological agents who want what most of us want, a chance at a life that expresses their fundamental commitments and hopes. We have been so intent on thinking about how to reduce offending and its destructive consequences that we have overlooked a rather fundamental truth: offenders want better lives, not simply the promise of less harmful ones.

All references for Dr. Ward's two-part article are included here.

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(Continued on page 6)

PROMOTING HUMAN GOODS (Continued from page 5)

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Conferences

THE 26TH ANNUAL CONFERENCE OF THE ASSOCIATION FOR THE TREATMENT OF SEXUAL ABUSERS

The Association for the Treatment of Sexual Abusers (ATSA) 26th Annual Conference is scheduled for October 31 – November 3, 2007, at the Manchester Grand Hyatt Hotel in San Diego, California. As in previous years, pre-conference seminars, concurrent sessions, and poster presentations will highlight cutting-edge research and practice in the assess-

ment, treatment, and management of sexual abusers.

This year's conference theme, "Partners, Policies and Practices: Making Society Safer," will feature innovative approaches to cultivating partnerships with law enforcement and victim advocacy groups; research findings that bear on public policy or on practice; strategies for influencing public opinion

and public policy; evaluation of prevention, assessment, treatment and management strategies; etiology and developmental trajectories of sexual offending; translating research knowledge into practice applications; and prevention and victim-centered approaches to treatment and management. *Contact: atsa.com*

INTERNATIONAL CORRECTIONS AND PRISONS ASSOCIATION ANNUAL GENERAL MEETING AND CONFERENCE

The International Corrections and Prisons Association Ninth Annual General Meeting and Conference,

"Sharing the World of Innovation," will be held October 21-26, 2007, in Bangkok, Thailand. Corrections leaders and

professionals from over 40 countries will attend. Go to page 14 for the conference registration form.

INTERNATIONAL COMMUNITY CORRECTIONS ASSOCIATION CONFERENCE

The 15th Annual Research Conference on what works, "Collaborating for Community Justice: A Local Public Safety Imperative," is scheduled for October 28-31, 2007, Town and Country Resort, San Diego, California.

On Sunday, October 28, 2007, ICCA will offer from 3-5 intensive, day-long pre-conference workshops on a variety of topics. These workshops may involve a team of presenters, panel presentations, or be interactive with the audience.

On Monday, October 29 through Wednesday noon, October 31, the ICCA conference will feature commis-

sioned plenary presentations of new research on cost-effectiveness of implementing best practices (Steve Aos); new developments in risk assessment (Pat Van Voorhis); and restorative justice (Shadd Maruna).

The array of workshops for which we are inviting your participation will demonstrate evidence-based best practices and promising practices at work in the field, especially in the areas highlighted by the plenary speakers. The conference focuses on building community partnerships to reduce crime.

Workshops are typically 90 minutes in length, with from 5-8 workshops running concurrently following each

plenary session. The format may be lecture, panel presentation, or interactive.

The ICCA conference is the premiere international research conference on community corrections. Attendance is estimated at upwards of 700 community corrections agency leaders and program directors, probation and parole officers, jail re-entry program directors, as well as researchers, government representatives, officers of the court, and vendors. Go to page 13 for the conference registration form. *Contact: jbrowning@iccaweb.org*

THE 33RD ANNUAL CONFERENCE OF THE FORENSIC MENTAL HEALTH ASSOCIATION OF CALIFORNIA

The 33rd Annual Conference of the Forensic Mental Health Association of California (FMHAC), "Moving Ahead: Building A Better Continuum of Care," will be held from March 19-21, 2008 at the Embassy Suites Hotel in Seaside, CA. The conference will consist of high-quality presentations relating to forensic mental health and

relevant to medical and mental health clinicians, law enforcement, parole/probation officers and other professionals working with the forensic mental health population.

The FMHAC invites you to participate in their 2008 conference. They are seeking proposals that address best practices for continuum of care

in California's forensic mental health system. Presentations addressing current research, issues, treatment, and assessments in forensic mental health are also welcome.

Submit your paper by August 15, 2007 by visiting their website, fmhac.net. Telephone: (415) 407-1344.

APFO 12TH NATIONAL WORKSHOP

The Association on Programs for Female Offenders (APFO) will hold its 12th National Workshop on Adult and Juvenile Female Offenders at the In-

ner Harbor Marriott at Camden Yards in Baltimore, Maryland, from Saturday, October 20, 2007, through Wednesday, Oc-

tober 24, 2007. For more information, contact conference co-chair, Brenda Shell at bshell@dpscs.state.md.us.

CORRELATION OF SUBSTANCE ABUSE, DOMESTIC ABUSE, AND CRIMINAL HISTORY: IDENTIFYING A NEED FOR A COORDINATED INTERVENTION: RESEARCH SUMMARY

Brenda Rohren, MA, and Lori Scott, MA,*—Contact: brenda@neb.rr.com

Research has consistently shown positive correlations between substance abuse, domestic abuse, and criminal history (Arriago & Shipley, 2005; Bartol & Bartol, 2005; Bennett, 1998; Collins & Spencer, 1999; Easton, Swan, & Sinha, 2000a; Easton, Swan, & Sinha, 2000b; Fals-Stewart, 2003; Fals-Stewart, Golden, & Schumacher, 2003; Family Violence Council, 2001; Galanter, 1997; Klosterman, 2006; Levin & Greene, 2000; Lindquist et al., 1997; Mignon, Larson, & Holmes, 2002; O'Farrell et al., 2003; Schumacher, Fals-Stewart, & Leonard, 2003; Steadman et al., 1998; Substance Abuse and Mental Health Services Administration, 1997; Swanson et al., 1990; Walker, 1994; Walker, 2000; Websdale, 2000; Woerle, Guerin, & Smith, 2002). Due to this strong correlation, it would seem that a coordinated response between substance abuse treatment programs, domestic abuse programs, and the criminal justice system should be standard practice in order to reduce both violence and recidivism. Unfortunately, this coordinated response is not always the standard. While these issues frequently co-occur, there is often a lack of adequate assessment and treatment coordination between the three fields.

Although domestic abuse is usually assessed in substance abuse treatment regarding victims, it is not adequately evaluated regarding offenders (Klostermann, 2006; Schumacher, Fals-Stewart, & Leonard, 2003). In men's domestic abuse programs, even when concerns

arise about a man's substance use, he is not often referred for substance abuse evaluations or treatment (Klostermann, 2006) despite established protocols (Family Violence Council, 2000; Family Violence Council, 2001; Pence & Paymar, 1993; Stordeur & Stille, 1989).

This study addresses the topic by administering standardized substance abuse and domestic abuse inventories to men currently receiving services in three settings: substance abuse treatment, domestic abuse program, and adult diversion services. Results will be described in subsequent issues of this newsletter.

As required by the graduate program in which they are enrolled, the principal investigators will conduct research independently of each other. The respective Informed Consent forms developed for each study indicate that the resulting data (no identifying information) will be shared between each principal investigator.

The subjects will be men, age 19 and over, currently receiving services in one of the three study sites (parentheses indicates the researcher working with the group): 30-50 men in substance abuse treatment (Rohren); 30-50 men in a domestic abuse program (Rohren); and 30-50 men (i.e., felony and misdemeanor offenders) who are currently participating in Diversion Services (Scott). All eligible men participating in each program will be informed of the study and asked to participate on a voluntary basis.

By the end of the study, all subjects will have completed the Sub-

stance Abuse Screening Inventory, adult version (SASSI-3), the Domestic Violence Inventory (DVI), and a supplemental questionnaire. (The supplemental questionnaire identifies specific substances used, arrests for drug-related offenses, and past participation in substance abuse and domestic abuse programs.)

According to the SASSI Institute (1999), the SASSI-3 has a 93% accuracy rate for identifying individuals with substance dependence disorders (i.e., the average alpha coefficient score for all of the subscales is .93). In addition, one study indicated that there was "95% agreement with clinical diagnoses of substance dependence" (Lazowski et al., 1998, p. 1).

There are two face valid scores for Alcohol and Drugs (FVA and FVOD). Other subscale scores include: Symptoms (SYM), Obvious Attributes (OAT), Subtle Attributes (SAT), Defensiveness (DEF), Supplemental Addiction Measure (SAM), Family (FAM), and Correctional (COR). Of particular value is the DEF score. An elevated score (T-Score of 60 or higher) indicates defensive responding; a low score (T-Score of 40 or lower) indicates depression and possible suicidal ideation. In addition, the COR score indicates the person's risk for involvement in the criminal justice system.

The DVI is broken into several components. According to Risk & Needs Assessment, Inc. (1996), the alpha coefficients (at $p < .001$ level of significance) for the DVI subscales are as follows: Truth-

(Continued on page 9)

Research of Interest

COORDINATED INTERVENTION (Continued from page 8)

fulness (.96), Violence/Lethality (.95), Control (.97), Alcohol (.98), Drugs (.97), and Stress Coping (.91). (See also Londt, 2004.) The Truthfulness score helps to assess defensive responding and can help to determine if the results of the inventory are valid.

As both the SASSI-3 and DVI provide separate alcohol and drug scores, these (and other scores) would be compared. Both inventories also provide indicators for deceit or defensive responding. In addition to assessing correlation on different subscale scores, the principal investigators will also evaluate the effectiveness of using both inventories to identify the number of individuals at each program site who could benefit from additional referrals to either substance abuse or domestic abuse programs.

A Pearson's correlation coefficient (and possibly other analyses such as ANOVA) will be conducted comparing the scores of the inventories and the responses to the questionnaire. These results will be compared to information obtained from a literature review. The selection of the inventories is appropriate as they are standard assessments in the substance abuse, domestic abuse, and criminal justice fields (Buttall & Pike, 2003; Lazowski et. al., 1998; Levin & Greene, 2000; Swartz, 1998).

Our study appears to be the first to combine the SASSI-3 and DVI in evaluating the correlation of substance abuse, domestic abuse, and criminal history in the following three study sites: primary substance abuse treatment, men's domestic abuse group, and criminal justice environment (i.e., misdemeanor and felony offenders in a diversion program). In fact, a review of the literature

did not reveal any studies in which both the SASSI-3 and DVI were used together for research purposes. Contact with researchers and others in the field to date, has confirmed this information.

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(Continued on page 10)

Research of Interest

COORDINATED INTERVENTION (Continued from page 9)

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*Brenda Rohren, MA, and Lori Scott, MA, will finish their masters of forensic science (MFS) degrees from Nebraska Wesleyan University. Brenda Rohren will complete her MFS in August, 2007, and Lori Scott will complete her MFS in May, 2008.

Research of Interest

EMPLOYEE PTSD IN CORRECTIONAL FACILITIES: A RESEARCH BRIEF

Bobbi Stadnyk, MA, R.Psych., Edna B. Foa, Ph.D., Jaime Williams, MA, and Regan Hart-Mitchell, MA*—
Contact: bobbianozy@cableregina.com

Two hundred and seventy one Saskatchewan, Canadian corrections employees (27%) responded to a mail-out survey that examined workplace exposure to violence, the prevalence rate of Post Traumatic Stress Disorder (PTSD), and absenteeism. Nearly 80% of the sample reported experiencing a traumatic event in the workplace, and most reported multiple events. Almost 26% of these employees had PTSD symptom severity suggesting a diagnosis. In addition, the PTSD sample of workers reported high workplace absenteeism. The present study found that increased exposure to traumatic events was predictive of increased rates of absenteeism. Support was also provided for a model suggesting that PTSD symptoms are predictive of absenteeism, however the utility of this model is limited.

Traumatic events are widespread in Saskatchewan correctional institutions, and over the last 10 years, inmate assaults, suicides, and attempted suicides within these environments have remained consistently high. In the course of performing their workplace duties, Saskatchewan corrections workers often experience and/or witness acts of violence and may also hear about the associated aftermath of such acts on both victims and co-workers.

When people are employed in high-risk jobs, the work environment itself can become the primary source of ongoing trauma. The high rates of violence report-

ed in Saskatchewan correctional facilities led us to design a study that examined PTSD symptoms in employees within these facilities. Specifically, we wished to consider whether there was a relationship between reports of exposure to violence, reported symptoms of PTSD, and workplace absenteeism. We were not aware of any previous study that examined the rates of PTSD in Saskatchewan corrections employees, and the relationship between these rates and exposure to traumatic events. Furthermore, we were not aware of any studies that examined the relationship between PTSD symptoms and workplace absenteeism.

The term "corrections employees" as used in this study referred to any employee who had contact with inmates, and who worked within a correctional facility in Saskatchewan. This included corrections workers (CW), unit/program supervisors (S), registered psychiatric nurses (RPN), probation officers (PO) and kitchen and maintenance staff (KM). A total of 1,008 corrections workers employed in these five job categories, who were members of the Saskatchewan Government Employees Union (SGEU), were invited to participate anonymously in a mail-out survey examining: exposure to violence in correctional facilities, symptoms of PTSD and absenteeism rates in correctional employees. The SGEU employees copied, prepared, and mailed the survey to potential participants. Additional attempts were made to increase the response rate by having union representatives distribute the sur-

veys to corrections employees directly in the work-place. Participants returned completed packages to the Psychology Department at the University of Regina. Participation was voluntary and participants were not paid.

The breakdown of the 271 employees in this study included: 197 (72.7%) CW; 20 (7.4%) PO; 18 (6.6%) RPN; 12 (4.4%) S; 12 (4.4%) KM. There were 179 (66.1%) full-time employees and 89 (33.2%) part-time employees. Of the respondents in the sample, 124 (45.8%) were male and 132 (48.7%) were female. The mean age for the group was 41.78 (SD=10.19) with a range between 21-63. The average number of years of work experience was 12.27 (SD=8.39) years. In terms of ethnic distribution, 227 (83.8%) of the participants were Caucasian, 32 (11.8%) were Aboriginal, 4 (1.5%) were Asian, and 8 (3.0%) were non-reporting.

*Bobbi Stadnyk, MA, R. Psych., Jaime Williams, MA, and Reagan Hart-Mitchell, MA, are doctoral candidates in the Department of Psychology, University of Regina, Saskatchewan, Canada. Edna B. Foa, Ph.D., is Professor of Clinical Psychology in Psychiatry in the Department of Psychology at the University of Pennsylvania, Philadelphia, Pennsylvania, and the Director of the Center for the Treatment and Study of Anxiety, University of Pennsylvania.

Item of Interest

ICPA AND AACFP: A FORMAL AFFILIATION

Tony Cameron*—Contact: tonycameron@icpa.org

In the mid-1990s, a group of senior prison and community corrections officials conceived the idea of creating the first truly international association in the field of corrections. Led by the Correctional Service of Canada (CSC), strongly supported by the Israel Prison Service, they established the International Corrections and Prisons Association (ICPA) with the vision to be an inclusive, safe, and secure forum for the respectful exchange of ideas, technology, and best practices in the profession of corrections, and creating an internationally influential organization in the world of corrections. In launching it, they decided that the primary aim should be the advancement of professional corrections, a hitherto neglected aspect of prisons in particular. Given the fact that prisons are closed to widespread public scrutiny, they are susceptible to the development of abuse of prisoners and poor practices generally. Improving the basic skills of staff, developing and disseminating best practices, and improving the often poor public status of front line staff, were therefore seen as priorities.

Those early hopes have been partly realized (though there is always more to do!). The ICPA annual conference is now a major world event attended by over 300 delegates from 50 of the 80 countries in which there are ICPA members. The ICPA's major conferences and their published proceedings, the ICPA newsletter titled *Advancing Corrections*, the ICPA awards program, the comprehensive *ICPA Corrections Manual*, now being used for

core training in a number of countries and the Center for Exchanging Best Correctional Practices, have made a major contribution to improvement of public safety and healthier communities, which is the ICPA's mission statement.

The ICPA exists to provide leadership and to exchange and debate ideas with other professionals who work in prisons and community corrections—whether that be in the public or private sector, the statutory or the voluntary. In that way, ICPA, which has UN consultative status, can make further progress in the protection of the dignity and rights of prisoners in accordance with the United Nations Standards and Norms in Criminal Justice and the Universal Declaration of Human Rights.

The ICPA is delighted to enter into formal affiliation with the American Association for Correctional and Forensic Psychology

(AACFP). We believe in the importance of strong partnerships, built upon mutual respect and ongoing collaboration, and the AACFP shares many of our values and goals. Reciprocal membership will enable us to complement one another's efforts in this challenging field of corrections. May we extend a cordial welcome to you all and hope that working together we can make a greater contribution to the many areas where our interests are aligned. Please join us in Bangkok, Thailand, October 21-26, 2007, for our Ninth Annual General Meeting and Conference. See pages 7 for conference information and 14 for conference registration.

*Tony Cameron is President of ICPA and former Chief Executive of the Scottish Prison Service.

Member Recognition

**RICHARD ALTHOUSE, PH.D.,
AND PRESIDENT ELECT OF AACFP,
RECEIVES ACCOLADES**

Richard Althouse, Ph.D., and President Elect of AACFP, received accolades from the Psychology Director for the Wisconsin Bureau of Health Services, Department of Corrections. Doctor Althouse was praised for his presentation at the Wisconsin's Third Annual Mental Health Conference. His presentation, "The Future of Correctional

Psychology," explored the history of correctional psychology and provided ways for correctional psychologists to become more involved with political and government processes in corrections and mental health. The Psychology Director thanked Dr. Althouse for his "insightful, passionate, and provocative" presentation.

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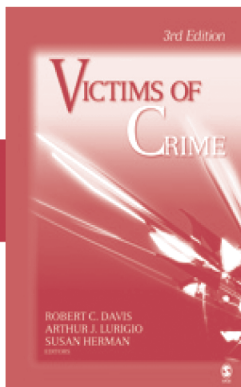
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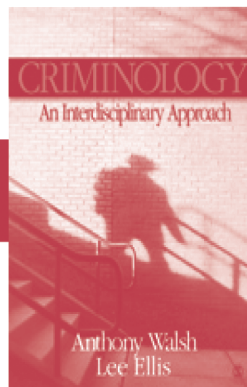
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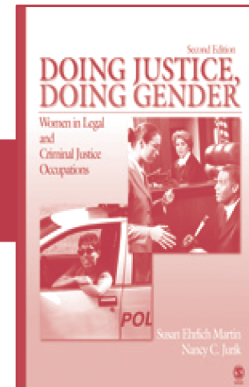
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