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Author post-print (accepted) deposited in CURVE December 2015\*

## Original citation & hyperlink:

Holdsworth, E. , Bowen, E. , Brown, S.J. and Howat, D. (in press) The development of a program engagement theory for group offending behavior programs. International Journal of Offender Therapy and Comparative Criminology  
<http://dx.doi.org/10.1177/0306624X15624177>

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**\*Cover sheet updated June 2016**

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# The Development of a Program Engagement Theory for Group Offending Behavior Programs

Running head: PROGRAM ENGAGEMENT THEORY

### Abstract

Offender engagement in group offending behavior programs is poorly understood and under-theorized. In addition, there is no research on facilitators' engagement. This paper presents the first ever theory to address this gap. A Program Engagement Theory (PET) was derived from a constructivist grounded theory analysis, that accounts for both facilitators' and offenders' engagement in group offending behavior programs. Interviews and session observations were used to collect data from 23 program facilitators and 28 offenders (group members). The analysis revealed that group members' engagement involved shared identities and moving on as a group. In turn, this was dependent on facilitators personalising treatment frameworks and establishing a *hook* in order to help group members *move on*. The PET emphasises the importance of considering change during treatment as a process rather than simply a program outcome. Solution-focused programs were more conducive to engagement and the change process than offence-focused programs.

Key words: engagement; theory; offender; facilitator; group; program

## **The Development of a Program Engagement Theory for Group Offending Behavior Programs**

It has been commonly argued that successful outcomes of group offending behavior programs (GOBPs) designed to target offenders' criminogenic needs and risk, irrespective of the type of programs or treatment settings (Drieschner & Verschuur, 2010), are dependent on offenders' engagement (McMurrin & Ward, 2010; Scott & King, 2007). However, there is little in the way of a general definition for, and theory of, engagement (Ammerman et al., 2006; Graff et al., 2009). In an extensive review of the psychotherapy engagement research, Holdsworth, Bowen, Brown and Howat (2014b p. 430) proposed a working definition of engagement as 'all the efforts that clients make during the course of treatment (both within and between sessions) toward the achievement of changes (treatment outcomes)'. One poor outcome of engagement is non-completion, which has been commonly employed as a proxy for the engagement of offenders in GOBP research has been program completion (see Holdsworth, Bowen, Brown, & Howat, 2014a for a review). Non-completion of GOBPs is not un-common; McMurrin and Theodosi (2007) found that, on average, 15% of institutional samples and 45% of community samples of offenders attending cognitive skills programs did not complete treatment. Daly and Pelowski (2000) reported dropout rates of between 50% and 70% from domestic violence programs. In general non-completion of GOBPs is associated with poor treatment outcomes (Wormith & Olver, 2002). Program attrition has been related to recidivism among domestic violence offenders (Gondolf, 2002), sexual offenders (Miner & Dwyer, 1995) and parents perpetrating child abuse (Harder, 2005). Furthermore non-completers of cognitive skills programs have been identified as at higher risk of re-offending than untreated offenders (McMurrin & McCulloch, 2007). The reasons for these associations are not clear, although there are likely to be a number of characteristics associated with non-completion. Whatever these characteristics are, non-completion and poor treatment outcomes appear prevalent across different types of offenders and treatment contexts. As

a poor outcome of engagement, non-completion does not help facilitators differentiate engagers from non-engagers before treatment dropout, the reasons for the lack of engagement, or strategies for improving engagement and reducing drop-outs. It is therefore important that GOBP facilitators have a greater understanding of the engagement process, so that they know what to look for during programs to assess offenders' engagement, and to implement strategies that can develop and enhance engagement.

While enhancing offender engagement is arguably a cornerstone for maximizing the effectiveness of GOBPs, there is an absence of theory explaining the process of engagement. Instead, the emphases have been on the factors that are likely to predict engagement; i.e. offenders' motivation, and the changes expected to occur as a result of the predicted engagement. The Multifactor Offender Readiness Model (MORM: Ward, Day, Howells, & Birgden, 2004) includes a spectrum of individual factors and contextual factors that comprise treatment readiness, which has been argued to predict engagement (McMurran & Ward, 2010). The Integral Model of Treatment Motivation (Drieschner, Lammers, & van der Staak, 2004) accounts for internal determinants of motivation, such as problem recognition and perceived suitability of treatment, that moderate the influence of external factors, such as the treatment process and personal circumstances. The resulting motivation is then argued to predict engagement (Drieschner & Boomsma, 2008). While these models comprehensively explain the factors that predict engagement, there is no theory explaining what comprises the predicted engagement.

The predicted engagement leads to changes targeted through treatment. Similarly to treatment readiness, there are also models that comprehensively explain the process that leads to these changes, such as the Transtheoretical Model of Change (Prochaska & DiClemente, 1982; Prochaska & DiClemente, 2002). The model incorporates stages of behavioral change and the progress of individuals through each stage. These stages portray change as a process, even though change is more frequently conceptualised as an outcome in relation to GOBPs; i.e. behavioral changes that lead to recidivism. (e.g. Hollin, 2006). Change as a process may offer greater insights

into engagement, but while Prochaska and DiClemente (2002) highlighted the importance of matching treatment interventions to individuals' stages of change, their model does not account for the role and coordinated process of treatment engagement.

Offenders' engagement requires a theoretical basis, but it would be neglectful to consider this without the role of program facilitators, particularly as this role includes establishing a therapeutic alliance. The therapeutic alliance has been established as important to treatment completion and various proxies for engagement such as program participation (see Holdsworth, Bowen, Brown, & Howat, 2014a for a review). It has also been established as important to therapeutic change (Willmot & McMurrin, 2014) and treatment outcomes (Marshall & Serran, 2004; Taft et al., 2003; Taft & Murphy, 2007; Ross, Polaschek, & Ward, 2008). However, therapists experience challenges to forming working alliances with offenders who have personality, educational and motivational difficulties (Ross et al., 2008). In order for facilitators to successfully develop working alliances with offenders, they may need to be engaged in their facilitation of group programs. It is surprising therefore, given the challenge of developing an alliance with offenders, that facilitators' own engagement has received no attention. Facilitators' engagement may well be fundamental to the development of a working alliance with offenders and in turn, the enhancement of offenders' engagement (i.e. offenders' efforts towards treatment, including a working alliance with facilitators). Offenders' and facilitators' engagement may be mutually dependent, therefore theorizing offenders' engagement without theorizing facilitators' engagement, and vice versa, may render a theory of engagement as lacking in scope (Tim, 1990).

The authors of the current paper set out to explicitly address the gap in theories relating to treatment, by developing a Programme Engagement Theory (PET). The PET was developed to explain what occurs during treatment that links offenders' motivation and the process of change. It was also designed to provide a new conceptualization of engagement in GOBPs that accounts for that of facilitators, which has so far been neglected in the research. In light of these aims, an

inductive approach was adopted to characterize the processes of engagement from the perspectives of group members and facilitators, as well as accounting for the factors that affect these processes.

## Method

### Participants

Four Probation Trusts in different parts of the UK combining both urban and rural areas were approached because of previous research collaborations with the authors. They varied in size, employing between approximately 34 and 480 offender managers and program tutors, servicing between approximately 4500 and 20500 offenders, the majority of whom were on post-release community orders. From these four Trusts, 23 OBP facilitators (15 females and 8 males) and 28 offenders (19 males and 9 females) volunteered to take part in this research as well as to publicize the research to the offenders they had contact with. Of those volunteering to take part, 17 facilitators (11 female and 6 male) and 9 offenders (6 male and 3 female) agreed to be interviewed and 7 facilitators (5 female and 2 male) and 23 offenders (14 male and 9 female) agreed to be observed. The offenders ranged from low to high risk, and comprised generally violent offenders, domestic violence offenders, and sexual offenders. No other demographic information was obtained to encourage participation. Henceforth, offenders are referred to as *group members* as it is the authors' contention that referring to individuals attending GOBPs (or in any other context) as *offenders* needlessly perpetuates their identities as such. Half the group members had completed programs in the past, but the focus was on the program they were either attending or had recently completed. A description of the programs can be found below under data sources and codes. Facilitators' were program tutors with experience of delivering at least one type of accredited GOBP ranging from 12 months to 15 years. Participating facilitators from one of the Probation Trusts (8 females and 4 males) also had experience of delivering non-accredited brief solution-focused programs.

### Design and Data Collection

An inductive, exploratory methodological approach suitable for the development of theory was required in order to meet the research aims. Consequently, a constructivist grounded theory

methodology was employed for data collection and analysis, following the guidelines set out by Charmaz (2006). Steps were taken to ensure that the methodology adhered to the guidelines proposed by Shenton (2004) for achieving research trustworthiness. In particular, a triangulation of individual interviews and observations of group sessions exploited the strengths of these methods of data collection (Brewer & Hunter, 1989) and contributed towards credibility and confirmability (Miles & Huberman, 1994). This method of gathering sufficient data fitted the research task of developing as full a picture as possible within the parameters of the research task (Charmaz, 2006). Interviews provided the opportunity to enquire about participants' experiences and perspectives in relation to GOBPs and then further explore their idiosyncratic responses (Keats, 2000). Combining interviews with observations provided the researchers with the opportunity to compare accounts of program experiences with observations of program experiences, and then verify and clarify the data obtained from both methods (Miles & Huberman, 1994).

The interview schedule was semi-structured and designed with guidance from Spradley's (1979) ethnographic approach in order to explore participants' experiences of programs in a way that would reveal the nature of their engagement. Facilitators and group members were asked similar *grand tour* questions, such as "Can you talk me through your experience of a session when you felt you were really involved?" and conversely "Can you talk me through your experience of a session when you felt you were not very involved?" Depending on responses, these were then followed up with *mini tour* questions, such as "When you say you 'worked through the role-play', what would I have seen you doing?" The 26 interviews, which were audio-recorded and transcribed verbatim, were each approximately one hour.

Eight program sessions were observed and audio-recorded. A daytime Thinking Skills Program group (TSP: 19-session program targeting self-control, social problem-solving, and positive relationships) was observed over three sessions and an evening TSP group was observed for one session. A Women's Group Program was observed for four sessions that focused on personal goal work, discovering personal skills and strengths, and social problem-solving from a



solution-focused perspective. With guidance from Cotton, Stokes and Cotton (2010) and Robson (2002), a non-participatory, informal method of observation was employed. Any particularly notable observations regarding the behavior of the group (e.g. standing up, moving away from the group) that could not be captured by an audio-recording were noted in order to provide context and corroboration for the data. Initial codes were also noted to guide subsequent observations in order to follow-up, explore and expand on these codes (Charmaz, 2006, pp. 48). The audio recordings of the observed sessions were transcribed verbatim although this presented challenges when group members were talking over one-another. However, where possible, this data was combined with the interview data to be analysed as one data set.

The data was collected and analysed by the lead author as part of a PhD. The lead author has an MSc in Forensic Psychology and applied research experience in the evaluation and development of GOBPs. The team of authors, who also have experience in the evaluation and development of GOBPs, regularly met at various time points throughout the process of collecting and analysing data, to review and discuss the data and analysis, which led to the refinement of the PET.

### **Data Analysis**

Initial coding (brief notes on data content) was conducted systematically until similarities were established (Charmaz, 2006). Focused codes (notes on more salient aspects of the data) were then created by selectively attending to emerging concepts. Discrepancies were revealed (Charmaz, 2006) rather than smoothed out in order to retain significant facets of the data. Focused codes were compared for refinement and to begin to develop tentative conceptual categories, which were then employed to analyse further data as a method of theoretical sampling (Charmaz, 2006). Refinement of conceptual categories occurred through moving through the focused codes, back to the initial codes, and sometimes back to the originating data. This process contributed to axial coding, which revealed relationships between conceptual categories and sub-categories, and the properties and dimensions of subcategories (Charmaz, 2006). Once conceptual categories and their relevant

subcategories had been established, they were conceptualised together as a process of theoretical coding: weaving the fractured story back together (Glaser, 1978, pp. 72).

### **Data Sources and Codes**

The titles of the conceptual categories in the findings and discussion are followed by either (GM) or (FA) to indicate who (group members of facilitators) the category was derived from and is relevant to. Extracts of data presented in the findings are followed by codes which denote the gender of the participants (F – female; M – male). The codes for the data extracts also include program information. There were programs attended or facilitated that are accredited by National Offender Management Services including: Thinking Skills Program (TSP); Integrated Domestic Abuse Program (IDAP: 27-session program targeting respect, accountability and honesty, negotiation and fairness); Drink-Impaired Drivers' Program (DIDs: 16-session program targeting attitudes towards the use of alcohol, patterns of drinking and related behavior); Sexual Offender Treatment Program (SOTP: 38-session program targeting relationship skills, attachment style deficits and victim empathy); and Aggression Replacement Therapy (ART: program targeting aggression and anger). There were also non-accredited programs that were solution-focused (SF: 10-session programs targeting skills and strengths). If participants were referring to programs in general, the extract is coded GEN. All participants were allocated a participant number, consequently an extract accompanied by the code: (M TSP 33) denotes data from a male participant (No. 33) attending an accredited Thinking Skills Program.

### **Findings and Discussion**

The PET comprises three principal stages that describe the process of engagement: (i) getting started; (ii) working; and, (iii) getting somewhere. The aim of GOBPs is behavioral change. Group members' engagement is analogous to the change process, while facilitators' engagement comprises the work involved in facilitating this process; therefore the PET can also be seen as a model of how GOBPs are best delivered to bring about engagement and change. Each stage comprises a number of conceptual categories that are discussed below. The PET also accounts for

determinants of engagement. These include: group members' early ambivalence about programs at the point of referral; facilitators' preparations for programs; internal and in-session drivers for group members' engagement; facilitators' resources for engagement; and barriers to engagement. These determinants are all reciprocally related to the process of engagement, and have important implications for practice, particularly the design and delivery of GOBPs and the referral process. There will be forthcoming reports from the authors on these engagement determinants as well as the implications for practice, but the focus of this paper is on the three principal stages of the engagement process. The PET is depicted in Figure 1. Facilitators' engagement (left of the diagonal) and group members' engagement (right of the diagonal) are reciprocally interlinked across the diagonal.

[Figure 1 here]

### **Getting Started**

**Setting the scene (FA).** Facilitators went through a process of setting the scene in order to mitigate group members' feelings of ambivalence about the program by calming initial resistance, and instilling perceptions of choice. This was a strategy facilitators used only in solution-focused programs for disarming group members and facilitating engagement. Even though there were known consequences for non-attendance, facilitators conveyed to group members that they had a choice to not attend and face those consequences. This was not conveyed as a threat, but as a means of clarifying to group members what their alternatives were.

*When the negativity was still there we gave them the choice of, you know, if this isn't for you, you can leave, you know, there are consequences to that...but giving them that choice, and actually it was the best attended program that I ever ran...I think we had ten to start with and we ended up with eight finishing, and they were the most difficult group that I have ever encountered. (F SF 4)*

When facilitators put group members in control of making decisions about what they might take from the program, this appeared to have a positive impact on completion rates.

Volitional factors have been conceptualized as internal determinants of treatment readiness (Ward et al., 2004) and although they might prove to be scarce among group members mandated to GOBPs, facilitators still attempted to take advantage of the therapeutic value of choice (Miller, 1987), which may be crucial to engagement.

A further benefit facilitators reported of solution-focused programs was the focus on group members, not offenses. The shift in focus towards group members and their strengths was constructed by some facilitators as a novel approach for group members who were familiar with GOBPs, which had a positive impact on their typical resistance to offense-focused work, and enhanced their motivation towards treatment and self-improvement.

*They don't seem to be bored - it seems to make sense to them, they're saying it's different to what they've ever done before and it seems to be motivating people. We've had some quite good success stories of people being quite highly motivated having gone through the group and gone on..... It's about them as people, like talking about themselves, and you're not beating people with a stick about their offenses. They find that quite refreshing. (M SF 9)*

The solution-focused approach also enabled facilitators to engage *prolific offenders* much to their surprise.

*The group of eight we've got some difficult characters on there so it's not so easy, but even then we've got prolifics on there...and they don't attend anything but they're managing to attend 2 sessions a week with us and they enjoy it. They're writing on the board and getting involved and it's unreal really. (M SF 9)*

Facilitators felt more empowered and more able to engage group members when programs legitimately and openly required them to concentrate on group members as people, not their offenses.

A focus on group members rather than their offenses was likely to harness facilitators' interpersonal qualities such as expression of affect (Burns & Nolen-Hoeksema, 1991), motivation and interest in the client (Thompson, Bender, Windsor, & Flynn, 2009; Tryon, 1986; Tryon, 1989).

A complex issue that emerges however, is the incompatibility between facilitators' interpersonal styles to facilitate engagement, which involved focusing on group members as people (interest in the client), and the requirements of some of the programs for facilitators to focus on group members' offences.

**Negotiating the group (GM).** The first principal stage of engagement occurred at the start of programs, as group members began negotiating the group. They established a position in the group by making comparisons with, and relating to, other group members. Some group members reported being shocked by how *normal* other group members were, suggesting that they held stereotypical views of other offenders with which they had not associated themselves.

*My vision of it was gonna be sitting in the room with a lot of guys, with skinheads and Doc Marten boots, combats and stuff like that...it was a big shock. (M IDAP 22)*

*I was quite shocked at how normal all the people appeared to be. (M SOTP 25)*

This initial *shock* indicates that the participants had preconceptions about what other group members would be like. However, comparisons were quickly made on levels of aggressiveness or seriousness of offense as important means of establishing a position within the group.

*...in the group sessions there's people at different levels of aggressiveness and whatever behavior they've done wrong. I don't know whether they count it in grades one to five. I consider myself... I would probably say I was a three – medium, which wasn't good. (M IDAP 21)*

*I seemed to be the lesser offender of all of them. Either that or maybe I'm able to rationalise it better than them. (M SOTP 25)*

Some participants identified with younger, less experienced group members, whom they then took on the role of mentoring.

*There was a guy on the course, I looked at him and we got on...and I thought shit, that's like me when I was like 21 sort of thing, you know and I sort of looked after him a bit. (M IDAP 24)*

A mentoring relationship between group members may have helped both to engage in the program, but some participants reported a general but important benefit of simply being in a group, of not feeling alone; that there were others who were in the *same boat*. This feeling reflected a sense of shared identities, which was perceived by participants as having a calming effect, positively influencing their abilities to engage and *move on*.

*...so you're not the only one in the boat, you're not on your own, there's quite a few people in the same boat as you. (M IDAP 21)*

These shared identities led to emotional attachments, which may have fostered group cohesion that helped build a momentum in moving on.

*After 15 weeks you become so attached. (F DID 23)*

*As time goes on you get sort of...you become a proper group and you do bond and there's a bit of banter in the room and things like that. You sort of warm together and everyone sort of understands each other's lives a little bit so you ignore the cameras and what not and things just flow. (M IDAP 22)*

Group cohesion seemed to also function as a distraction from some of the formalities of the group environment and enable the *flow*.

As shared identities and group cohesion were important to *moving on*, the PET indicates that the positive relationships established in the research between group cohesion (Serran & Marshall, 2010), group climate (Kirchmann et al., 2009; Moos, 1994) and treatment outcomes are likely to be mediated by engagement. According to social identity theory (Hogg, 2007), consequences of a lack of shared self-identities are lower levels of trust among group members, less willingness and abilities to cooperate, and diminished well-being (Amiot, Terry, Wirawan, & Grace, 2010).

Therefore, a lack of group cohesion in GOBPs is likely to have an adverse influence on engagement and subsequent program outcomes.

## **Working**

**Establishing roles and positions (FA).** The second principal stage of engagement represents the core work of both group members and facilitators. Facilitators began establishing roles and positions by managing group members' impressions of them, seeing these impressions as having an influence on group members' engagement. Facilitators attempted to create a balance of giving something personal of themselves to group members while maintaining professional integrity, which was important to aligning group members' knowledge and attitudes with the aims of the program. Facilitators recognised that they might have been perceived by group members as representing authority figures lacking perspective, which would distance them from the group.

*...they assume that you've never been in trouble, you've never done wrong, you've got no idea what their life is like so. (M GEN 7)*

Facilitators made deliberate efforts to counter this perceived stereotype by establishing common ground with group members, but at the same time openly identifying their differences; facilitators considered the consequences of their actions and modified their actions accordingly. Establishing common ground first however, was what made group members more receptive to what facilitators needed to say.

*Yeah I don't give an awful lot away but I try and use quite a lot of examples of home-life to just get them to see this does happen to us as well... just being able to give them a bit of our lives. (F GEN 11)*

Some researchers have proposed that therapists' self-disclosures facilitate the therapeutic alliance (Marshall et al., 2003), while others have argued that it detracts the focus in treatment away from the client (Karver, Handelsman, Fields, & Bickman, 2005). It seems that this controversy is a question of careful judgment about relevance and quantity; some self-disclosures relevant to the program from facilitators is required to develop a connection with group members, something they can identify with, but only a sufficient amount of information to serve this purpose should be disclosed.

A further way facilitators established positions was by encouraging group members to engage each other. Both facilitators and group members perceived that treatment *flowed* when this was happening. Listening to each other's points of view was regarded by both group members and facilitators as more useful than listening to facilitators. Facilitators adopted a back-seat approach in some cases to allow the session to *flow* and for group members to move on as a group. Encouraging group members to engage each other was also considered by facilitators as an effective strategy for indirectly tackling disruptive group members and challenging group members. Facilitators selected group members for these tasks whom they perceived to hold a positive status in the group.

*he was quite engaging but he was one of those group members that if you could get him on side he was very good and open, but he also had quite a good level of status in the group...so when he says something positive everyone looks up and nods...I focused on him because I knew that if I got something good from him it would be good, for the rest of them, and I also focused on him because I knew that he needed a little bit of support and guidance.*

(M SF 9)

Encouraging group members to engage each other through sharing personal experiences and insights, indicated facilitators' awareness, as Day (1999) found, that group members' similar circumstances lead to inter-relations among group members that are more important than content, probably because it means they are engaged.

**Building engagement: personalizing treatment frameworks (FA).** Encouraging intra-group engagement and minimising an impression of being in authority was reciprocally related to the task of building engagement: personalising treatment frameworks. Facilitators constructed personalised treatment frameworks in order to align group members' current knowledge and attitudes according to the aims of the program (see Figure 2).

[Figure 2 here]



Facilitators used their knowledge about group members to establish the *hook*, which can be considered a mechanism for developing a working alliance that involved facilitators improvising and making programs relevant to group members. These personalised treatment frameworks allowed facilitators to align group members' current knowledge and attitudes according to the aims of the program.

Improvising program content allowed group members to grasp complex or abstract program concepts. Solution-focused programs were more conducive to this task, by offering facilitators greater flexibility in being able to respond to group members' learning needs.

*What we don't want to do is sort of shut people down, so 'sorry can't do that because it's not part of this package', we address it and erm, and and I find, you know because we're allowed to do that, it's quite good. (M SF 7)*

One way of improvising involved facilitators making programs relevant to group members, so that they could make important connections between program concepts and their personal lives. In order to achieve this, facilitators needed to be good at obtaining personal information from group members as they made self-disclosures.

*I am very good at getting stuff from the group and building on it, and I am quite good at remembering things that they may have said a few weeks ago, and building all that together... That is what I am good at, getting it to have some meaning in their life, some relevance in their life. And linking it back to their life, and linking it back to the material. (F*

*GEN 6)*

Simpson and Joe (2004) investigated the effect of *node-link mapping*; a method for representing personal issues that provided a visual focus for on-task attention. This cognitive mapping strategy was positively associated with the therapeutic alliance in substance misuse programs (Simpson & Joe, 2004) and seems to be what facilitators were intuitively doing as a fundamental process in facilitating engagement.

Facilitators also searched for opportunities in group members' self-disclosures to establish the hook; facilitators used the hook to embed program concepts within group members' personal lives and help them find relevance and meaning in the concepts.

*It's about how you engage that person within that window of opportunity. I believe the time I spend with them are very short periods of time, but windows of time that I can really sort of try and find a crack in them, dig myself in and try and open it up. (M SF 9)*

In the absence of being able to perceive relevant personal information, one facilitator reported *using discrepancies* in group members' accounts to establish the hook. The facilitator encouraged group members to talk until a discrepancy emerged that revealed a desire to change, which the facilitator then used as a *way in*.

*So the more people talk the more they give away their little discrepancies, and that's where I think I kind of come in...or just kind of keep getting them talking about stuff so you realize that eventually they do want to change but they don't want to be forced to change, they want to do it on their own level. (M GEN 12)*

Developing discrepancies in clients' accounts is a motivational interviewing strategy (Westra, 2012) which helps clients to explore inconsistencies between their current behaviors and values.

Recognizing that group members do not want to be forced to change has also been argued to represent a key assumption when enhancing engagement (McMurrin, 2002).

**Moving on as a group (GM).** It was evident in observations of sessions that group members learned from each other and worked together. Group members reported their experience in moving on as resulting from working as part of a group, feeling like they had worked together with everyone else as opposed to working on their own.

*Everybody worked together, everyone... so it always ended up everyone worked together and it became, you know it became comfortable cos everybody worked together. (F DID 23)*

While working together was evident, there were mixed opinions about the importance of self-disclosures within the group. For some, the release of pent-up frustration was important in preventing them losing control or their temper, in the safe environment of the group.

*...if you don't say what's on your mind at the time it's just gonna brew and stew inside the following week or you might blow out on somebody else after the group and that's not good for anybody. (M SF 42)*

However, other group members saw having to talk about the past and about offending behavior as additional punishment; they anticipated they would be judged by other group members. Group members who were attending solution-focused programs saw not having to talk about their pasts, particularly about their offending behavior, as helpful to the process of moving on.

*I thought that part of it was good that we weren't allowed to know what each one has done because obviously it's bad enough committing the crime that you've committed. (F SF 38)*

Frost (2004) argued that self-disclosure management styles were a key indicator of engagement. However, self-disclosure may reveal treatment compliance, not engagement, and that not all program approaches foster the need for self-disclosures of offending behavior (Holdsworth, Bowen, Brown, & Howat, 2014). Self-disclosures may still be important, but in relation to efforts towards *change* (discussed below) instead of offending behavior, and these disclosures were evident in the solution-focused programs.

### **Getting Somewhere**

**Recognizing and sustaining engagement (FA).** The third principal stage of engagement represents the experience of progress. Facilitators started recognising engagement by observing both implicit and explicit cues to participation such as asking questions, listening, and reflecting. Affirming statements and listening reflectively (Boardman, Catley, Grobe, Little, & Ahluwalia, 2006) and asking open-ended questions (Moyers, Miller, & Hendrickson, 2005) are motivational interviewing strategies that facilitators of GOBPs are frequently trained to employ. However, facilitators perceived that group members were capable of giving an impression they were engaged

when they were not. Being able to differentiate between real engagement and impressions of engagement was constructed by facilitators as a skill.

*...we have offenders all the time that come in and say what we want to hear...so that is quite a skill to spot the real, the people that are really taking it in and the people that are just going through the motions. (F GEN 4)*

Conveying an impression of engagement was constructed as a type of game group members played, but one that also evidenced the cognitive processes at play in genuine engagement.

*...they could just be playing the game with me, and they could just be saying those words, but they are saying those words, and that means, they know that is the right thing to say, and if they know that is the right thing to say, they know their belief is wrong. (F GEN 6)*

**Acknowledging and accepting (GM).** Knowing their beliefs were wrong came about from group members acknowledging and accepting the past and their offending behavior in order to move on. In-depth group discussion facilitated this knowledge and acceptance.

*...when you break it down like that, because I don't really look at things like that, but when you break it down, and you think; you know what – yeah. I have seen this happening and you still just carried on. (M TSP 33)*

This discussion provided the participant with insights into his own behavior that seemed to help him understand and accept what he had done in a way that helped him move on. However, the relevance of acknowledgment and acceptance to engagement may be a function of the program rather than a preference of group members. It was only a part of moving on for group members attending offense-focused programs, because it was a consequence of making required self-disclosures, which was not a requirement of the solution-focused programs. Participants attending solution-focused programs had seen *not* having to make self-disclosures as beneficial to their engagement. Research has yet to establish that failing to accept responsibility for offending behavior is a risk factor for recidivism (Ware & Mann, 2012). Maruna and Mann (2006) have argued that offenders should be encouraged to accept responsibility for their future rather than their past.

**Taking the initiative (GM).** Group members reported taking the initiative and applying program concepts to their personal lives and making changes. Taking the initiative therefore represents group members' active efforts between sessions that forms part of the engagement process and evidences change. There were important links established between program content and group members' personal situations from realising program relevance.

*...but then a few things sort of clicked and I thought; ah actually that stuff can be very useful and I can use that in between the sessions. (M SF 42)*

However, it was questionable whether these changes were always evident within sessions. Only one group member attending a solution-focused program referred to systematically reporting on her efforts between sessions as part of program sessions.

*I've already started changing my routine, my pattern and everything that's been done before, so I'm feeling already that, you know, I'm getting there. (F SF 38)*

Furthermore, facilitators noticed evidence of engagement because group members anecdotally reported their efforts towards change, not because facilitators routinely or systematically enquired or searched for evidence of change. Change has not been employed as a proxy for engagement (Holdsworth, Bowen, Brown, & Howat, 2014) which may be because it has been considered an outcome of engagement as opposed to part of the engagement process. However, change as an outcome may reflect the degree or extent of change, but the *process* of change may reflect the efforts group members make towards achieving these outcomes between as well as within sessions, and this in turn reflects their program engagement.

### **Summary**

According to the PET, group members' and facilitators' engagement is mutually contingent, even though their positions, roles, and aims in the treatment framework differ. Group members' engagement in programs is integral to their perceptions of change. It is about a sense of personal journey, about finding ways to move away from offending behavior, even though where they were moving to was not clear in the data. The features of group members' engagement were summed up

as *moving on*. Facilitating engagement was at the core of facilitators' work; their abilities to fulfill their roles as GOBP facilitators were contingent upon their abilities to engage group members in *moving on*. When group members' and facilitators' engagement are interpreted in conjunction with one another they can be seen as interdependent; thus engagement in GOBPs is *a process of group members moving on that is integrated with a process of facilitating group members to move on*.

### **Limitations**

The PET offers the first explanation of group members' as well as facilitators' engagement in group programs, including the determinants and barriers to engagement. The focus of this paper was on the integral process of group members' and facilitators' engagement. There are, however, limitations which should be taken into account. Firstly, the lead author alone collected the data which may have resulted in selective attention to the data captured. Secondly, while steps were taken to ensure that the methodology adhered to the guidelines proposed by Shenton (2004) for achieving research trustworthiness, one aspect that might not be entirely fulfilled was transferability (equivalent to generalizability). Engagement in GOBPs is embedded within its general context and therefore the PET can only be fully understood within the context of the GOBPs investigated in this research. Finally, the participants were an opportunistic sample because of previous collaborations with the authors' university and the sample did not include group members who had dropped out of GOBPs. Therefore, transferability of the findings to other program contexts may only be inferred at this stage. However, this limitation is somewhat mitigated by the variety in experience of facilitators, the range of GOBPs, and thereby the variety of group members' offense types and risk levels.

### **Implications**

The PET emphasises how the process of facilitators' and group members' engagement are integrally related, that change should be considered a process, not just an outcome, and that solution focused approaches are more conducive to engagement than offence focused approaches. These emphases pose issues for the current design and delivery of GOBPs. Group members' engagement

relies on facilitators' abilities to establish a hook, an important mechanism for developing a working alliance, which was the cornerstone of facilitators' engagement, and involved facilitators improvising and personalising treatment frameworks. However, this requires facilitators to work creatively and flexibly with group members, which may be incompatible with adherence to program content and delivery protocols, particularly if programs are offense-focused. Furthermore, offense-focused content dictates that facilitators must work with group members in a way that is counter to not only group members' engagement, but their own engagement. These practical implications are particularly relevant in relation to the determinants of engagement, which are accounted for by the PET. Reports on these components of the theory as well as the practical implications for the future development of GOBPs that are based on the principles of engagement are forthcoming.

### **Future Research**

Attrition is a significant issue for most GOBPs and knowledge as to why offenders drop out is of importance to understanding engagement. One reason group members may drop out is through a lack of shared identities or group cohesion (Serran & Marshall, 2010). The PET indicates that both are of importance to engagement but there is little research that has focused on how group members work together in GOBPs. The reasons for group members not identifying with the rest of the group, or why a group lacks cohesion, and how these factors may have a detrimental impact on engagement warrants further enquiry. While recruitment is problematic, future research needs to find ways of capturing the perspectives of those who have dropped out or did not engage in programs in order to develop greater insights into barriers to engagement.

Shared identities and group cohesion paved the way for self-disclosures, and acknowledging and accepting, which for some group members was necessary to move on. However, perceptions of the need to acknowledge and accept differed according to whether programs were offense-focused or solution-focused. Research has yet to demonstrate that acceptance is related to recidivism (Ware & Mann, 2012), therefore the focus should now be on whether self-disclosures, leading to

acknowledging and accepting offending behavior, are important to engagement and the change process.

The lack of research to date on facilitators' engagement opens up opportunities for future research. According to the PET, facilitators personalized treatment by making programs relevant to group members, which was fundamental to building engagement. The extent to which GOBPs offer sufficient flexibility for facilitators to achieve this, and the effectiveness of training and support offered by program providers, warrants investigation. Facilitators' capabilities to notice evidence of engagement and change may require systematic exploration but this was not always the case according to the current study. Research needs to develop an in-session procedure or assessment tool that facilitators can adopt for noticing evidence of engagement and change and exploring it, particularly with a focus on developing links between group members' efforts to change and program content.

### **Conclusions**

The PET offers four distinct and novel developments in how engagement should be conceptualised, as well as a more fine-grained characterization of the engagement process. First, prior to this research, facilitators' engagement in GOBPs had been overlooked, but according to the PET group members' engagement and facilitators' engagement are inseparable, and should only be conceptualised in conjunction with one another. In order for group members to progress and move on as a result of GOBPs, facilitators need to be engaged in the process by supporting group members and personalising treatment frameworks. Second, completion rates should never be considered as adequate or useful proxies for engagement, because they do not explain the extent to which group members were engaged in programs and the process of change. More than simply completing a program, group members' engagement involves shared identities, group cohesion, and moving on as a group. In turn, this is dependent on facilitators personalising treatment frameworks and establishing the hook to develop an alliance, in order to help group members move on. Thirdly, the PET indicates that solution-focused or group member-focused as opposed to offense-focused



approaches, and programs that provide sufficient flexibility for facilitators to work therapeutically with group members, are more conducive to developing an alliance, and fostering engagement and change within the treatment process. Finally, the PET emphasises the importance of considering change as a process in relation to engagement, rather than simply a program outcome, and that what occurs *between* program sessions is an essential part of the engagement process.

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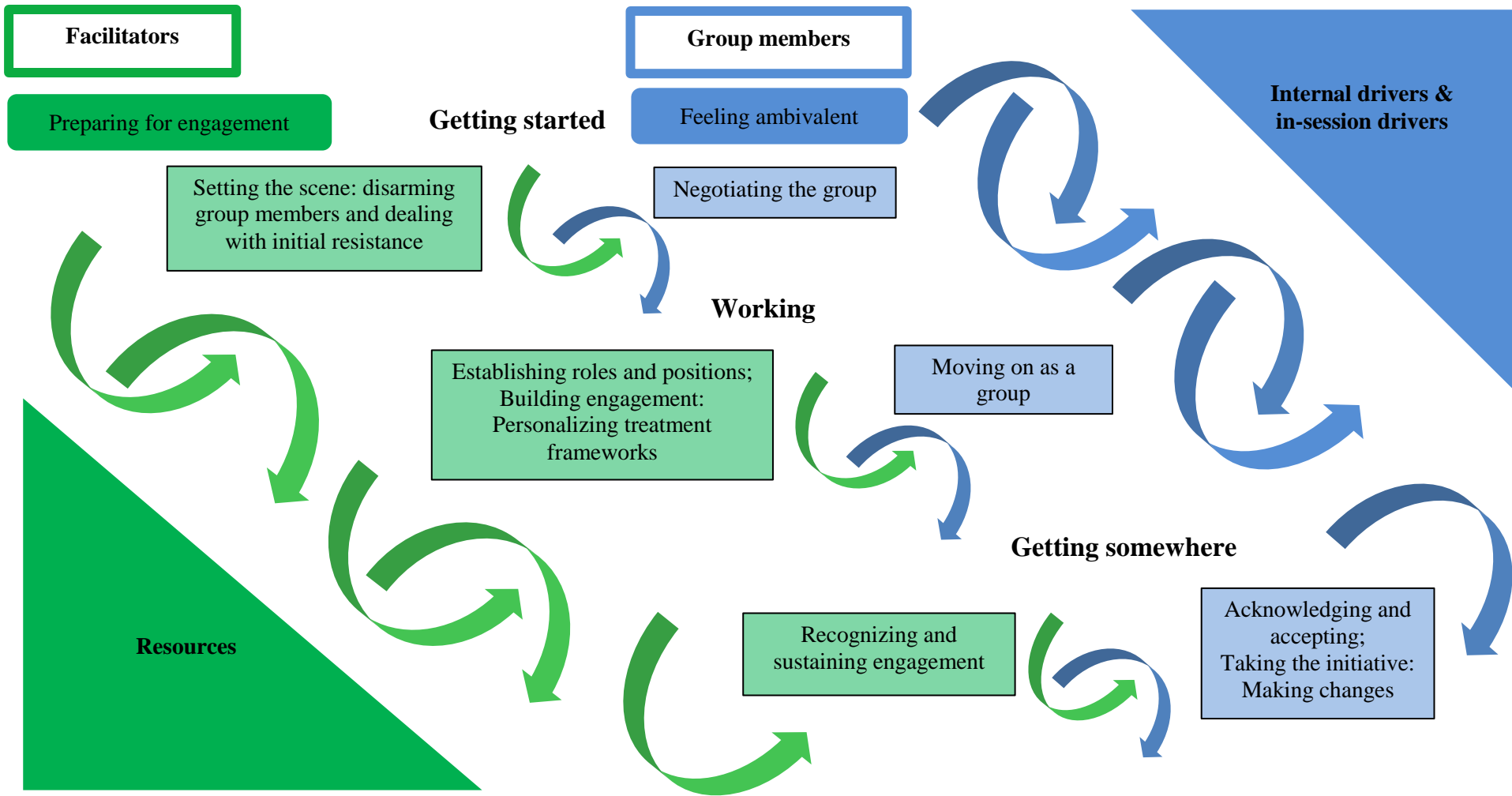


Figure 1. The integrated processes of facilitators' and group members' engagement.

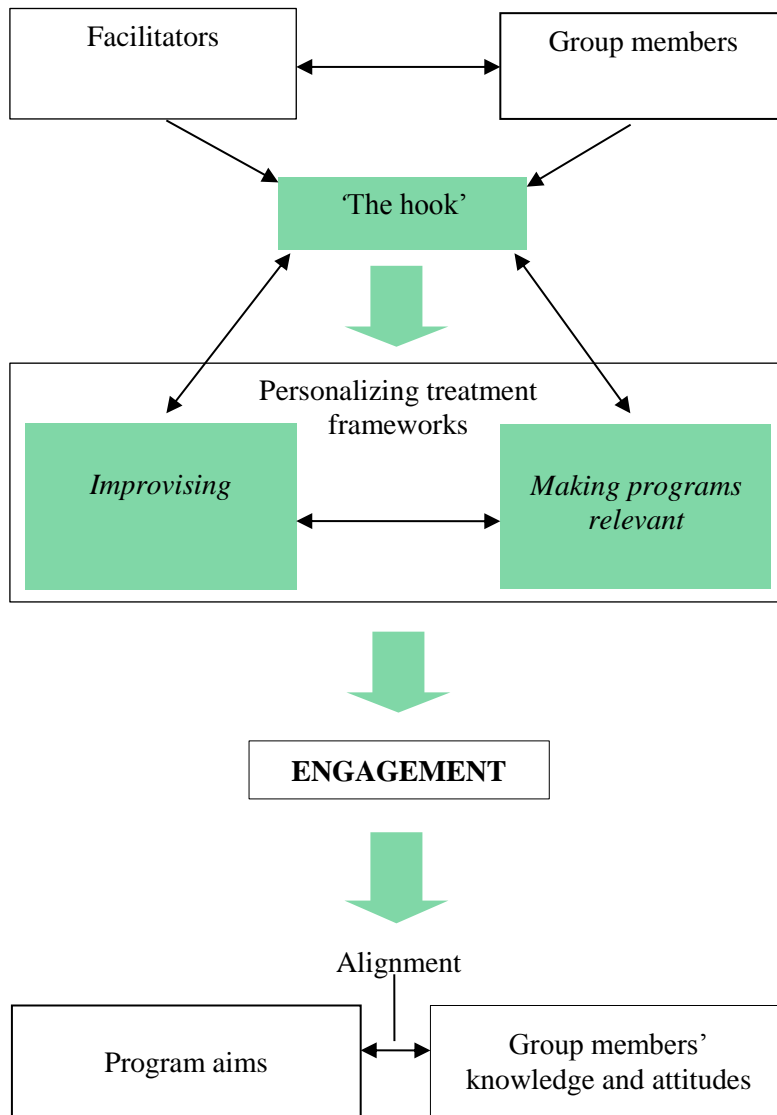


Figure 2. Facilitators' process of building engagement by personalizing treatment frameworks.

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